

DRS. PREETI RAJPUT A/30

To RASHMI SHARMA MD 21/08/25

wet - 6710g.

Jobor Ball. 05/08/94

High 5"6

Roll No. 5250 0653 9062

MO NO. - 7773826628

To MO NO. 9039067494

ANTENATAL CARD

ANC Regt. No.

Date of 1st Visit on

Patients Name : *Rishi Rajput* Age : *30 years*

Husbands Name : *Mukesh Rajput* Age :

Religion Education : Husband Wife

Occupation Date of Marriage :

MENSTRUAL HISTORY : Menarche Cycle : Reg / Irreg.

LMP *17/5/25*

EDD *17/8/25*

OBSTETRIC HISTORY : Gravida *3* Para *1* Abortion *1*

*1 SCS 7yr Janmurti Hosp.
2nd op. Abd.*

creatinine - 0.5

Past History : Medical
Surgical
Gynaecological

Family History : Diabetes/Hypertension/TB
Multiple Pregnancy
Fetal Abnormality

Personal History :

Dietary Habit : Veg/Non-Veg
Smoking : Yes/No
Allergy :

INVESTIGATION Date :

HB% *12.4*

Urine R/E

Blood Gp (W) *AB+ve(H)*

GCT/RBS *95*

TSH *1.34*

HBS Ag *+*

HIV *-ve*

HCV *-ve*

VDRL *+*

I.C.T. *+*

H.B. Electrophoresis *hichle rel*

Sicking Test *+*

HIGH RISK FACTOR

HIGH RISK FACTOR

1st dose on :

2nd dose on :

Ini. Boostrix :

DR. RASHMI SHARMA

MBBS (Lucknow) MD (O&G) DMRD
MRCOG (LONDON) FRCOG (LONDON)
Senior Consultant & Obstetrician & Gynaecologist,
Laparoscopic Surgeon & Cosmetic Gynaecologist, Reg. No. 1916



Preeti Rajput 30y

Date - 12/07/20

Age - 30/00

Weight - 71 kg

G.O. Early beg.

Age - 17/5/25.

1st G, 2nd G, 3rd G, 4th G, 5th G - Somethi road.
1st G, 2nd G, 3rd G, 4th G, 5th G.

1. 1st G cor - 3 cor
Early x 1m.

2. 2nd G cor - 10
x 1m.

3. 3rd G cor - 7
at Wed 1m.

Ans:
Hb Electrophoresis
USG - uterus
pseudocyst
adnexa

16/07/25.
USG. NT
plan.
Doubtful
pregnancy.

BLISS MULTI SPECIALITY CENTRE

A-23, Phase-2, Rajkishore Nagar, Bilaspur (C.G.)

Patient name	Mrs. PREETI RAJPUT	Age/Sex	30 Years / Female
Indication(s)		Visit no	1
Patient ID	B3143	Visit date	12/07/2025
Referred by	Dr. RASHMI SHARMA		
LMP date	17/05/2025, LMP EDD: 21/02/2026[8W]		

Date : _____

OB - Early pregnancy Scan Report

Indication(s)

1 fetal well being

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal

Intrauterine gestation

Maternal

Internal os is closed.

Intramural fibroid measuring 2.6 x 2.8 x 3.1mm noted in fundus of uterus.

Fetus

Survey

Gestational Sac seen. Sac margins appeared regular

Yolk sac seen

Embryo seen

Fetal activity present

Cardiac activity present

Fetal heart rate - 114 bpm

Biometry(Hadlock, Unit: mm)

CRL	8, 6W 5D	● ——— (2%)
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Impression

Single live Intrauterine gestation corresponding to a gestational age of 8 Weeks

Gestational age assigned as per biometry.

DECLARATION

I Dr. _____ declare that while conducting USG Scan, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

DR. RASHMI SHARMA
MD, DMRD, MRCOG, FRCOG
Sr. Consultant O&G
Reg. No. - 1916

All Congenital anomalies cannot be ruled out by USG, Some foetal congenital malformations can be masked due to position of fetus and oligohydromnious. Not for medico legal purpose. Subject to Bilaspur Jurisdiction only

Signature

BLISS MULTI SPECIALITY CENTRE

A-23, Phase-2, Rajkishore Nagar, Bilaspur (C.G.)

Mrs. PREETI RAJPUT / B3143 / 12/07/2025 / Visit No 1
Indication (S)

Date : _____

Suggested to do repeat scan at 12-14 weeks for NT scan/ Combined first trimester screening

DR. RASHMI SHARMA
MBBS, MD (O&G), DMRD, MRCOG, FRCOG

DECLARATION

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Signature

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PRIMO MULTI SPECIALITY CENTRE

Patient name	Mrs. PREETI RAJPUT	Age/Sex	- / Female
Patient ID	B3143	Visit no	1
Referred by	Dr. RASHMI SHARMA	Visit date	12/07/2025

