

भारत सरकार
Government of India

अल्का
Alka

पिता : हीरादास चैलेक
Father : HIRADAS CHAILEK

जन्म तिथि / DOB : 08/01/1993
महिला / Female

5717 0934 3069

आधार - आम आदमी का अधिकार

आधार
Unique Identification Authority of India

पता: D/O: हीरादास चैलेक, 108, महाराणा प्रताप वार्ड, बेरला, वार्ड नं. 12, बेरला, बेरला, बेमेतारा, छत्तीसगढ़, 491332
Address: D/O: Hirasdas Chailek, 108, maharana pratap ward, BERLA, ward no. 12, Berla, Berla, Bemetara, Chhattisgarh, 491332

5717 0934 3069

1947
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

Smt' ALKA KURRE 32/F

DOB:- 08/01/1993

Height:- 5'7"

Weight:- 104.650 kg

LMP:- 18/04/2025



We treat, HE cures

ज्ञानदेवी नेत्रालय एवं प्रसूति क्लीनिक

देवेन्द्र नगर, सेक्टर-1, शहीद हेमू कालाणी वार्ड, रायपुर (छ.ग.) फोन : 0771 4031711



डॉ. रीमा दिलावरी

M.B.B.S., M.D.

प्रसूति एवं स्त्री रोग विशेषज्ञ

CGMC No. 2727

98274 84816



डॉ. रोहित दिलावरी

M.B.B.S., M.S.

नेत्र रोग विशेषज्ञ

CGMC No. 2761

98274 86851

परामर्श समय सुबह 10:30 से 2 बजे तक
शाम 6:30 से 8 बजे तक
परामर्श : सोमवार से शनिवार तक (रविवार अवकाश)

पूर्व नेत्र विशेषज्ञ प. भगवत दयाल शर्मा मेडिकल कॉलेज, रोहतक (हरियाणा)
पूर्व नेत्र विशेषज्ञ छ.ग. नेत्र चिकित्सालय, तेलीबांधा, रायपुर (छ.ग.)
पूर्व नेत्र विशेषज्ञ उदयाचल चैरिटेबल आई हॉस्पिटल, राजनांदगांव (छ.ग.)
पूर्व नेत्र विशेषज्ञ क्रिश्चियन हॉस्पिटल, राजनांदगांव (छ.ग.)

Name Mrs Alka Kurrey Age/ Sex 32 Date 22/8/25

Address Raipur

HbA1c 5.8.

Fallin - DM II

HPLC

No hemoglobins

WT - 105 Kg

BP - 117/76.

prevalence
rises

WBP - 18/4/25

EDD - 25/1/26

12
31
30
31
22

126 (18)

4

56

→ 1st dose

② 1ab Livogen XT 100 ③0

③ 1ab Calbus 100 x ③0

④ Candide CL 215 3 days

vaginas (K 62)

• बालिका बचाओ - बालिका पढ़ाओ •

Patient name	Mrs. ALKA KURRE	Age/Sex	32 Years / Female
Patient ID	E15845-25-09-08-12	Visit no	1
Referred by	Dr. REEMA DILAWARI	Visit date	08/09/2025
LMP date	18/04/2025, LMP EDD: 23/01/2026[20W 3D]		

Anomaly Scan Report

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal

Single intrauterine gestation

Maternal

Cervix measured 3.93 cm in length.

Right Uterine	0.86	●—+— (22%)
Left Uterine	0.56	●—+— (1%)
Mean PI	0.71	●—+— (5%)

Fetus

Survey

Presentation : Variable
Placenta : Anterior
Grade I
Liquor : Normal
Umbilical cord : Two arteries and one vein
Fetal activity : Fetal activity present
Cardiac activity : Cardiac activity present
Fetal heart rate - 154 bpm

Biometry(Hadlock,Mediscan)

BPD 44.8 mm 19W 3D (24%ile)	HC 166.5 mm 19W 2D (8%ile)	AC 152.4 mm 20W 3D (46%ile)	FL 31.4 mm 19W 5D (24%ile)	EFW BPD,HC,AC,FL 328 grams (33%ile)
5% 50% 95%	5% 50% 95%	5% 50% 95%	5% 50% 95%	5% 50% 95%

Long bones	Right (mm)
Tibia	26.2, 18W 6D ●—+— (6%)
Fibula	26.9, 19W ●—+— (5%)
Humerus	29.8, 19W 3D ●—+— (16%)
Radius	27.3, 20W 3D ●—+— (54%)
Ulna	26.8, 18W 5D ●—+— (4%)

TCD : 21.1 mm

Aneuploidy Markers

Nasal Bone : 6.84 mm - Present
Nuchal Fold : 3.94 mm - Normal

Note: Investigations have their Limitations, Solitary Pathological/Radiological and other investigations never confirm the final diagnosis of disease. They only help in diagnosing the disease in correlation to clinical symptoms & other related factors.



Vitals

Fetal Medicine & Diagnostics
For Appointment Call : 91 97522 79404

Dr. Mamta Patel J
Reg. No. CGMC 2840/2010
MBBS, DMRD (Gold Medalist)
Fellowship Fetal Med (Ahmedabad)
Former Consultant Ria Clinic (Mumbai)

Patient name	Mrs. ALKA KURRE	Age/Sex	32 Years / Female
Patient ID	E15845-25-09-08-12	Visit no	1
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Fetal Anatomy

- Head** : Right lateral ventricle measured 6.99 mm
Cisterna magna measured 4.99 mm
Midline falx seen. Both lateral ventricles appeared normal.
Posterior fossa appeared normal. No identifiable intracranial lesion seen.
- Neck** : Fetal neck appeared normal.
- Spine** : Entire spine visualised in longitudinal and transverse axis.
Vertebrae and spinal canal appeared normal
- Face** : Both orbits, nose and mouth appeared normal
- Thorax** : Both lungs seen.
No evidence of pleural or pericardial effusion.
No evidence of SOL in the thorax.
- Heart** : Normal cardiac situs. Four chamber view normal.
Outflow tracts appeared normal.
Normal origin of right subclavian artery noted.
- Abdomen** : Stomach and bowel appeared normal.
No evidence of ascites.
Abdominal wall intact.
- KUB** : Both kidneys and bladder appeared normal.
- Extremities** : All fetal long bones visualized and appear normal for the period of gestation.
Both feet appeared normal.

Impression

Single live intrauterine fetus in variable presentation.
LMP averaged Gestational age 20weeks3 days; EDD-23/01/2026
USG averaged Gestational age 19weeks5 days; EDD-28/01/2026
Estimated fetal weight according to BPD,HC,AC,FL :- 328 + / - 32.8 gms.
Fetal biometry s/o normal fetal growth as per gestation
Liquor - Adequate.
No obvious anomaly seen at the time of scan.
Low risk for trisomy 21 as mentioned.
Uterine artery Doppler S/o normal placental blood flow.

Note: Investigations have their Limitations, Solitary Pathological/Radiological and other investigations never confirm the final diagnosis of disease.
They only help in diagnosing the disease in correlation to clinical symptoms & other related tests. Please Interpret accordingly.

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2nd trimester screening for Downs

Maternal age risk 1 in 659

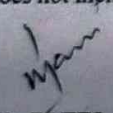
Fetus	2nd Trimester Downs Risk Estimate	Markers - Present	Markers - Absent
A	1 in 5069		Increased nuchal fold, Short humerus, Short femur, Mild hydronephrosis, Intracardiac echogenic focus, Echogenic bowel, ARSA, Absent or hypoplastic NB, Ventriculomegaly

Disclaimer

Declaration :- Myself, DR. MAMTA PATEL JAISWAL declare that while conducting ultrasonography on this patient, I have neither detected nor disclosed the sex of her fetus to any body in any manner.

All congenital anomalies can not be detected sonographically & detection of abnormality may be dependent on various factors like position of fetus, amount of liquor, maternal body habitus etc at the time of scan. Structures like ear, digits, palate may not be looked upon routinely.

This scan does not include detailed Fetal ECHO.


DR. MAMTA PATEL JAISWAL
DMRD, Fellow fetal medicine
Consultant Radiologist & Sonologist

