

249 mas - Maniko Rajavara 35/6 1 Double vertebra
Pip

wt 20.50g
lf 5.5inch
age 6-6-1989.

Dr. Pooja Shrivastava

MBBS

MD (Obstetrics & Gynaecology)

Reg No. MP-4298

Specialties : Gynaecological Endoscopy Laparoscopy & Hysteroscopy Obstetric & Gynaecological Ultrasonography Laparoscopic Sterilization & Family Planning



- Ex. Resident Gynaecologist, M. Hospital Indore
- Trained in Obstetric Ultrasonography, Wadia Hospital Mumbai
- Ex. Consultant Gynaecologist and Sterilization Urban RDH programme, J. P. Hospital, Bhopal

Obstetrician & Gynaecologist

Consultation fee valid for 3 visits/15 days whichever is earlier in routine hours only (Monday to Saturday)



Patient : MRS. MONIKA RAJORIA

Age/Sex : 35 Years / Female

LH-A-002740

Address : H No 113 Kaushal Nagar Nirmal Estate

Mobile No.: 7618119013

Date : 8-Oct-2025

P_r

BP : - 101/59

pulse : 85b

Temp : - 96.5°F

SpO₂ : - 98%

wt : - 70.5 kg

TAD Endometrial 14mm

TAD Ovaries 10x6cm

TAD Uterus 10x6cm

Cap Reticular 10x6cm

Byt Shunt 14x6cm

Adn

Asymmetrical
marks
sub

Insulin

Revised
Revised
upward

2



First Trimester Screening Report

Preeclampsia before 34 weeks

1: 454

Fetal growth restriction before 37 weeks

1: 214

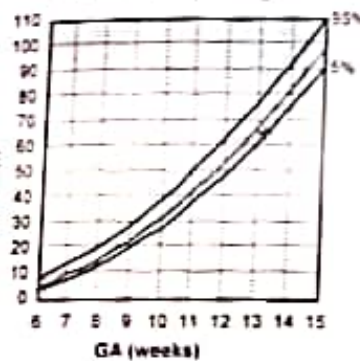
The background risk for aneuploidies is based on maternal age (36 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, tricuspid Doppler, ductus venosus Doppler, fetal heart rate).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history, uterine artery Doppler and mean arterial pressure (MAP).

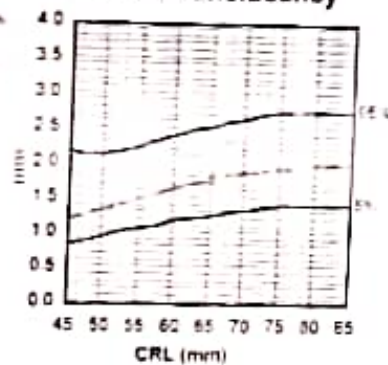
All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2012 software (version 2.81) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).

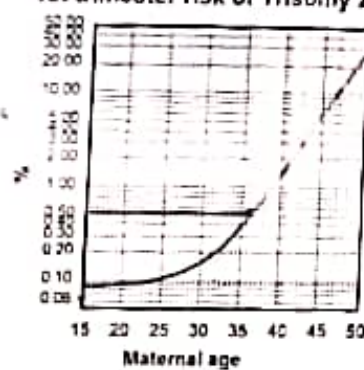
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



First Trimester Screening Report

Rajoriya Monika

Date of birth : 06 June 1989, Examination date: 08 October 2025

Address: hno. 113, koushal nagar
nirmal estate misrod
Bhopal
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

Maternal / Pregnancy Characteristics:

Previous chromosomally abnormal child or fetus: first trimester miscarriage.
Racial origin: South Asian (Indian, Pakistani, Bangladeshi).
Parity: 1; Deliveries at or after 37 weeks: 1.
Maternal weight: 71.0 kg; Height: 165.1 cm.
Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Preeclampsia in previous pregnancy: no; Previous small baby: no; Patient's mother had preeclampsia: no.
Method of conception: Spontaneous;
Last period: 07 July 2025

EDD by dates: 13 April 2026

First Trimester Ultrasound:

US machine: GE Voluson S8. Visualisation: good.

Gestational age: 13 weeks + 2 days from dates

EDD by scan: 13 April 2026

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	164 bpm
Crown-rump length (CRL)	65.9 mm
Nuchal translucency (NT)	1.8 mm
Ductus Venosus PI	0.750
Placenta	posterior low
Amniotic fluid	normal
Cord	3 vessels

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: No TR.; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:	1.85	equivalent to 1.180 MoM
Mean Arterial Pressure:	93.4 mmHg	equivalent to 1.080 MoM
Endocervical length:	37.8 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 204	1: 4085
Trisomy 18	1: 504	1: 10073
Trisomy 13	1: 1579	<1: 20000

डॉ. अंकिता विजयवर्गीय

एम. बी. बी. एम., डॉ. एम. आर. जो
एम. आर. आई. फेलोशिप :
नानावटी हॉस्पिटल, मुंबई
हिंदुजा हॉस्पिटल, मुंबई
पूर्व रेडियोलॉजिस्ट :
फोर्टिस हॉस्पिटल, बंगलूर
जो. टी. बी. हॉस्पिटल, दिल्ली
रेजेंसी हॉस्पिटल लिमिटेड, बंगलूर
जवाहर लाल नेहरू कैंसर हॉस्पिटल, भोपाल

DR. ANKITA VIJAYVARGIYA
MBBS, DMRD

FMF Certified from
Fetal Medicine Foundation
Reg. No. MP-2912

MRB FELLOWSHIPS

- NANA VATI HOSPITAL, MUMBAI
- HINDUJA HOSPITAL, MUMBAI
- FORMER RADIOLOGIST AT
- FORTIS HOSPITAL, NOIDA
- G.T.B. HOSPITAL, DELHI
- REGENCY HOSPITAL LTD, BANGALUR
- JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

PATIENT'S NAME : MRS. MONIKA

REF. BY : DR. POOJA SHRIVASTAVA (MBBS, MS)

AGE/SEX : 35Y/F

DATE : 08-07-2024

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 07.07.2023

GA(LMP): 13wk2d

EDD : 13.04.2026

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 164 beats/min
- PLACENTA: is grade I, posterior with lower edge covering the os.
- LIQUOR: is adequate for the period of gestation.

Fetal morphology for gestation appears normal.

- Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.
- No intrathoracic mass seen. No TR.
- Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.
- Urinary bladder is seen, appears normal. 3 vessel cord is seen.
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 1.8 mm (WNL).
- Ductus venosus shows normal flow & spectrum with positive "a" wave (PI = 0.75)

FETAL GROWTH PARAMETERS

• CRL 65.9 mm	12 wks	6 days of gestation.
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- Estimated gestational age is 12 weeks 6 days (+/- 1 week). EDD by USG : 16.04.2026
- Internal os closed. Cervical length is WNL (37.8 mm)
- Baseline screening of both uterine arteries was done with mean PI ~ 1.85 (WNL for gestation).
- Date of last delivery 30.01.2021.
- Gestation at delivery of last pregnancy 40 weeks 2 days.

IMPRESSION:

- ↓ Single, live, intrauterine fetus of 12 weeks 6 days +/- 1 week.
- ↓ Gross fetal morphology is within normal limits.
- ↓ Low lying placenta with lower edge covering the os.

Follow up at 19-22 weeks for target scan for detailed fetal anomaly screening.

Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid volume, fetal movements, maternal abdominal wall thickness & tissue echogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been counselled about the capabilities & limitations of this examination.)

(DR. ANKITA VIJAYVARGIYA)

