

Patient name	Mrs. RINKU HEMANT SAWARKAR	Age/Sex	30 Years / Female
Patient ID	D25564	Visit No	1
Referred by	Dr. KARUNA MURKEY	Visit Date	17/10/2025
LMP Date	10/07/2025 LMP EDD: 16/04/2026[14W 1D] C-EDD: 23/04/2026[13W 1D]		

OB - 2/3 Trimester Scan Report

Indication(s)

FIRST TRIMESTER NUCHAL TRANSLUCENCY AND ANOMALY SCAN

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal

Single intrauterine gestation

Poor penetration of sound waves due to thick abdominal wall.

Maternal

Cervix measured 3.20 cms in length.

Right uterine PI : 2.8.

Left uterine PI : 1.4.

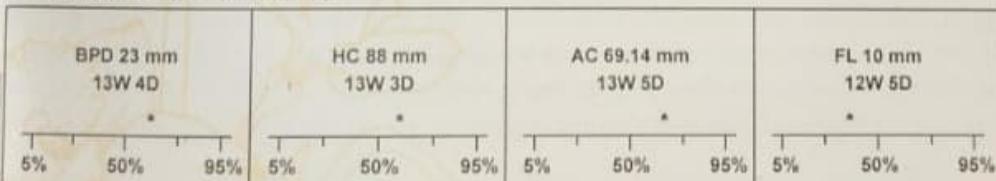
Mean PI : 2.10 (80%ile)

Fetus

Survey

Placenta	: Anterior
Liquor	: Normal
Umbilical cord	: Two arteries and one vein
Fetal activity	: Fetal activity present
Cardiac activity	: Cardiac activity present Fetal heart rate - 145 bpm

Biometry(Mediscan, Hadlock)



CRL - 74 mm(13W 3D)

Aneuploidy Markers

Nasal Bone : seen

Nuchal translucency : 1.4 mm Normal.

Ductus venosus : Pulsatile flow.

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Fetal Anatomy

Head: normal, Neck: normal, Spine: normal, Face: normal, Thorax: normal, Heart: abnormal, Abdomen: normal, KUB: normal, Extremities: normal

Head :Both lateral ventricles seen. Intracranial translucency appeared normal.

Face :Orbits and Premaxillary triangle seen

Heart :Heart - Abnormal cardiac situs noted

four chamber and outflow tracts appeared abnormal

Impression

INTRAUTERINE GESTATION CORRESPONDING TO A GESTATIONAL AGE OF 13 WEEKS 1 DAY

GESTATIONAL AGE ASSIGNED AS PER BIOMETRY (CRL) ON 27/08/2025 (PREVIOUS SCAN)

MENSTRUAL AGE 14 WEEKS 1 DAY

CORRECTED EDD 23-04-2026

PLACENTA - ANTERIOR

LIQUOR - NORMAL

HEART - ABNORMAL CARDIAC SITUS NOTED -

FOUR CHAMBER AND OUTFLOW TRACTS APPEARED ABNORMAL

- SITUS INVERSUS WITH ? AVSD

MATERNAL - RIGHT UTERINE ARTERY SHOWS INCREASED RESISTANCE TO FLOW

SUGGESTED DETAILED EARLY ANOMALY SCAN AT 16-17 WEEKS

(Please bring referral letter.)

I Mrs. Rinku S. Declare that while undergoing Ultrasonography, I do not want to know the sex of my fetus.

DECLARATION - I declare that while conducting ultrasonography / image scanning, I have neither detected nor disclosed the sex of the fetus to anybody in any manner. All congenital anomalies and genetic conditions may not be detected on ultrasonography due to limitations like fetal position, amount of liquor, previous scars, Small VSDs, late appearance of few anomalies, TO fistula and structures that are not part of routine imaging protocol. Detailed fetal echo not included in scan.

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