

Reveal Diagnos cs

Screening Type:	First Trimester (Double Marker) <input type="checkbox"/> 10 W + 0 Days to 13 W + 6 Days	Second Trimester (Triple Marker) <input type="checkbox"/> 15 W + 0 Days to 22 W + 6 Days	Second Trimester (Quadruple Marker) <input checked="" type="checkbox"/> 15 W + 0 Days to 20 W + 0 Days
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PATIENT DETAILS

Pa ent Name:	Mrs. Mittal Jaydeep Sindhar		
Date of Birth:	12/08/1999	Age:	25 years
Mobile No:	9016432478		

Blood Group (Rh type): O ⁺ ve	Race: Indian / Other (if other please specify)
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PREGNANCY DETAILS

Gravida (No. of Pregnancies): 1	Para (No. of Live Birth /Child): 0
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ULTRA SOUND DETAILS

Date of USG : 25/10/25	CRL / BPD:Corresponds to Weeks: 48 mm
LMP (DD/MM/YY): 07/06/2025	Nasal Bone:
Nuchal Translucency (NT):	No. of Fetuses: Singleton / Twins

PATIENTS CLINICAL HISTORY

Diabetes Mellitus : Yes / <input checked="" type="checkbox"/> No	Smoker : Yes / <input checked="" type="checkbox"/> No / Unknown
Down Syndrome (DS) History: Yes / No / <input checked="" type="checkbox"/> unknown	Open Spinal Bi da (OSB) History : Yes / No / <input checked="" type="checkbox"/> Unknown
	Concep on: Natural <input checked="" type="checkbox"/> Assisted : Induced IUI / IVF / ICS / Other <input type="checkbox"/> Egg Donor DOB: Age:

Samle Collec on Date : 25/10/25	Sample Processing Date : 25/10/25
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BIOCHEMICAL MARKERS

1) BHCG (mIU/ml) : 2)PAPP-A (ng/ml) :



Patient's Name	Mrs. Mittal Jaydeep Sindhav /Parmar	Age/Sex	25 YRS /FEMALE
Ref By	Dr. Sucheta s Talele	Date	25/10/2025

ANTENATAL ULTRASOUND EXAMINATION.

LMP = 07/06/2025

GA by LMP = 20 Weeks 0 days

A single live intrauterine gestation noted in variable lie. Fetal movements are good. Fetal heart rate is regular and is 148/ bpm.

The Placenta is fundal and of grade I maturity. No e/o placenta previa.

There is no retro-placental bleed. Liquor is adequate.

Internal os is closed. Cervical length is 36 mm.

FOETAL BIOMETRY:

	MM	WEEKS	DAYS
BPD	48	20	3
HC	183	20	5
AC	157	20	6
FL	33	20	4
HUMERUS	30	20	1
RADIUS	26	19	5
ULNA	29	21	0
TIBIA	27	19	6
FIBULA	27	19	6

Estimated foetal weight is 373 +/- 54 Gms.

Average gestational age by ultrasound 20 weeks and 2 day.

E.D.D.BY U.S.G – 12/03/2026



Fetal head, spine, upper end and lower limbs, stomach, urinary bladder, kidneys, diaphragm, cord insertion and 4 chamber heart are seen developing normally and no obvious dysmorphic developmental anomaly was detected at this examination.

FETAL STRUCTURAL SURVEY:

Fetal head: - Normal intracranial structures. Falx is in the midline. Normal ventricles. No choroid plexus cyst is seen.

<u>CEREBELLUM</u>	19 mm
<u>CISTERNA MAGNA</u>	6 mm
<u>LATERAL VENTRICAL</u>	6.3 mm
<u>NFT</u>	4.2 mm

() **Fetal spine:** - Normal curvature. No open defect

Face: normal, Grossly normal fetal face. Normal orbits. No cleft lip.

Chest: - No evidence of any pleural effusion or any intrathoracic mass.

Heart: - Normal cardiac axis .Cardiac chambers are normal with normal outflow tracts. No chamber wall hypertrophy. Normal arch.

Fetal 2D- echo is suggested for Detailed Cardiac Evaluation at 22-24 weeks.

Abdomen :- Fundic bubble is normal in size and position. Normal fetal kidneys. Ureters are not dilated. Normal fetal bladder. No bowel obstruction.

Limbs: - All four limbs were visualized. All the digits may not always be seen due to positional variation.

*No obvious congenital anomalies noted at present study.

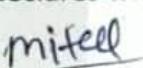
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IMPRESSION:

- Single live intrauterine gestation in variable lie of average gestational age 20 weeks 2 days. (+/- 1 Week).
- Suggest fetal 2D echo at 22-24 weeks.

Declaration by the patient: I, Mrs. Mittal Jaydeep Sindhav, declares while undergoing USG I did not want to know the sex of my fetus. **SIGNATURE:** 

Declaration by the doctor: I, Dr. Sandeep Ghuge declare that while conducting USG on Mrs. Mittal Jaydeep Sindhav, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Please Note : All parameters are subject to statistical variations. Because of fetal position, movements and quantity of liquor all the fetal organs may not be visualized optimally on one scan. Certain Congenital Anomalies like very small ASD or VSD, Mental Retardation, Cutaneous lesions cannot be Diagnosed on USG. Some Anomalies are not detected by Sonography at all . Fetal echocardiography is suggested for detailed cardiac evaluation at 22-24 weeks.

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