



DHRUV

DIGITAL X-RAY, ADVANCED 4D COLOUR DOPPLER SONOGRAPHY & MAMMOGRAPHY

- Digital X-ray
- Whole Body & Vascular colour Doppler
- 4D & 3D vaginal / Obst / Abdominal Sonography
- Colour 2D & 4D Adult & Foetal Echocardiography
- USG guided interventional sonography
- Mammography
- Musculo-skeletal sonography

PATIENT'S NAME :- MRS. RADHIKA DAHIWALE

REF. BY :- DR. SUNEETA JAISWAL (MBBS, DGO)

DR. ASAWARI K. DESHMUKH
M.B.B.S., M.D.
RADIOLOGIST
Fetal Medicine Foundation Certified
(UK - London) ID- 184373

AGE:- 35 YRS
DATE :- 30/10/2025
LMP:- 31ST JULY.
EDD:- 07TH MAY.
(13 WKS)

SONOGRAPHY IN PREGNANCY

(Done on 4D & colour doppler high resolution machine)

There is single live intrauterine pregnancy with changing lie.

Biparital diameter is 2.0 cm corresponds to 13 weeks 1 day.

Head circumference is 7.4 cm corresponds to 13 weeks.

Abdominal circumference is 6.1 cm corresponds to 12 weeks 6 days.

Femur length is 0.6 cm corresponds to 12 weeks.

Crown to rump length is 6.4 cm corresponds to 12 weeks 6 days.

Foetal cardiac activity and movements are well seen and heart rate is 175b/min.

Foetal cerebral hemisphere, ventricles, spine, stomach and limbs appear normal.

Ductous venous flow is normal, No tricuspid regurgitation seen.

Nasal bone 2.5mm & premaxillary triangle appears normal.

Nuchal translucency is 1.7 mm (50%tile).

There are no obvious gross congenital anomalies seen.

Placenta is posterior reaches the os and shows grade 0 maturity.

No evidence of retroplacental clots or subchorionic hematoma is seen.

Amniotic fluid is adequate for the period of gestation.

Cervical length is 3.2cm and os is closed.

Foetal weight is 58gms.

IMPRESSION :- SINGLE LIVE INTRAUTERINE PREGNANCY WITH CHANGING LIE.

COMPOSITE GESTATIONAL AGE IS AROUND 12 WEEKS 5 DAYS.

PLACENTA IS POSTERIOR REACHES THE OS AND SHOWS GRADE 0 MATURITY.

NOTE :- ALL CONGENITAL ANOMOLIES MAY NOT BE SEEN ON SONOGRAPHY.

(I HAVE NOT DISCLOSED SEX TO ANYBODY IN ANY MANNER)

Mean Uterine PI - 1.65 (50%TILE).

The risk of developing preeclampsia before 37 weeks is low. Nevertheless, it is recommended that the risk is reassessed at 20 and 36 weeks.

For a woman who will be 35 year old at the time of delivery.

The Risk for trisomy 21 (Down syndrome)^{1,2} is 1:272

The Risk for Trisomy 18 (Edward syndrome)^{1,2} is 1:1060

The Risk for Trisomy 13³ is 1:4000

AS

Thanks for referral !

DR. ASAWARI K. DESHMUKH

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10/00/25, 1:57 PM

Maternal characteristics

Date of birth 13/07/1990

Height 161.0 cm

Weight 75.0 kg

Ethnicity

Currently smoking Yes No

Current pregnancy

Last menstrual period 31/07/2025

Vanishing twin Yes No

Conception method

Pregnancy dating

Method

CRL 64.0 mm

Gestational age 12 weeks 5 days

EDD 09/05/2026

Examination date 30/10/2025

Medical history

Chronic hypertension Yes No

Diabetes type I Yes No

Diabetes type II Yes No

Mother of the patient had PE Yes No

Systemic lupus erythematosus Yes No

Anti-phospholipid syndrome Yes No

Obstetric historyNulliparous (no previous pregnancies at ≥ 24 wks.)Parous (at least one pregnancy at ≥ 24 weeks)**Details of last previous pregnancy at ≥ 24 weeks**

Preeclampsia Yes No

GDM Yes No

Date of delivery 10/05/2021

Gestation at delivery 36 weeks 3 days

Birth weight 9

Inter-pregnancy interval 4.23 years

Ultrasound assessment