

Patient Name :

Ms. Sheeba Saniya

Age/Gender:

34y

Height:

5

Weight:

Phone No.:

Address:

Referring Doctor:

Client Code

Collection Date

05/12/2025

Collection Time

Collected by :

Blood Tests:

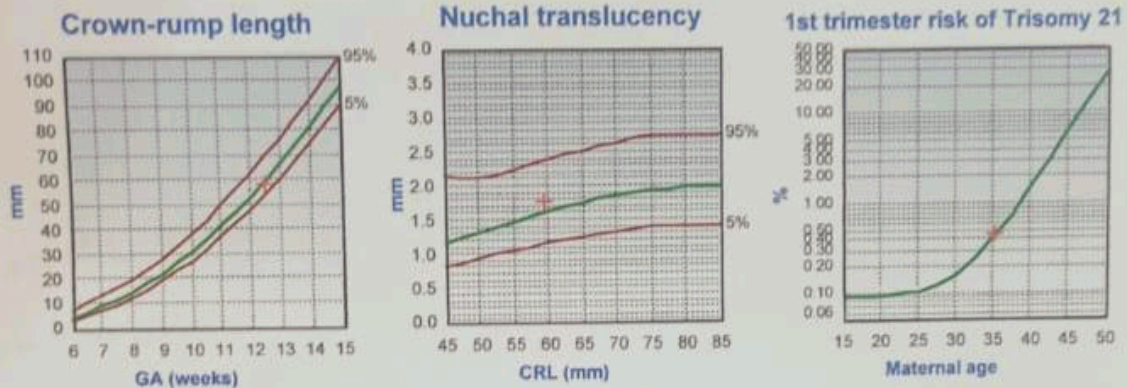
Histopathological Tests:

Test - Dual  
marker

Height - 157 cm

Weight - 64 kg.

DOB - 21/10/1991



First trimester: Pre Ultrasound Maternal age risk for Trisomy 21 is 1 in 249

T21 Risk	
From - NT	1 in 889

#### CONCLUSION:

- GA assigned by LMP (12 weeks 1 days).
- Single live intrauterine pregnancy and fetal growth corresponding to 12 weeks 3 days according to USG.

ADVICE- Dual marker correlation and Anomaly scan at 20 weeks to 22 weeks is suggested

I, DR. ABHIJEET TIWARI declare that while conducting sonography on MRS SHEEBA (name of pregnant woman), I have neither detected nor disclosed the sex of the fetus to anybody in any manner.

DR. ABHIJEET TIWARI  
MBBS, DNB (Mumbai)  
CONSULTANT RADIOLOGIST  
CGMC - 9455/2019



Please note that all anomalies can not be detected all the times due to various technical and circumstantial reasons like gestation period, fetal position, quantity of liquor etc. The present study can not completely confirm presence or absence of any or all the congenital anomalies in the fetus which may be detected on post natal period. Growth parameters mentioned herein are based on International Data and may vary from Indian standards. Date of delivery (at 40 weeks) is calculated as per the present sonographic growth of fetus and may not correspond with period of gestation by L.M.P. or by actual date of delivery. As with any other diagnostic modality, the present study should be correlated with clinical features for proper management. Except in cases of Fetal Demise or Missed Abortion, sonography at 20-22 weeks should always be advised for better fetal evaluation and also for base line study for future reference.

ISO 9001:2015  
(Quality Management System)



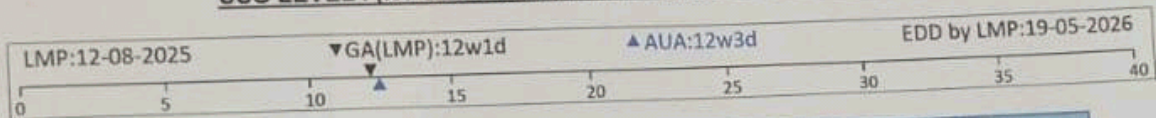
Shop No. 6 Ground Floor, Lalganga Business Park, New Dhamtari Road, Pachpedi Naka, Raipur (CG) 492001  
0771-3586710, 89208-47611 • drprimediagnosics@gmail.com • www.dratprimediagnosics.com

• Laboratory Tests & Investigations Results are to be Correlated Clinico Pathologically. • If the Results Does not match with the Clinical Findings Patients is Advised to Contact back Timing :- Monday to Saturday - 8.00 am to 9.00 pm, Sunday - 10.00 am to 4.00 pm



Patient Name: MRS SHEEBA	Date: 05/11/2025
Ref Phy:	Age/Sex: 35 Years / FEMALE

### USG LEVEL I (NT & NB SCAN) WITH UTERINE ARTERY DOPPLER



Dating	LMP	GA	EDD
		Weeks	Days
By LMP	Corrected LMP as per previous USG study : 12/08/2025	12	1
By USG		12	3
AGREED DATING IS (BASED ON LMP)			

There is a single gestation sac in uterus with a single fetus in variable presentation.  
 The fetal cardiac activities are well seen.  
 Placenta is posterior in lower segment reaching till internal OS and grade 0 in maturity.  
 Amniotic Fluid: Normal for GA  
 Internal OS is closed and length of cervix is ~ 39 mm  
**The fetal growth parameters are as follow:**

	mm	weeks	days
Crown Rump Length	59.2	12	3
Heart Rate	158 Beats Per Minute.		
The Embryo attains 40 weeks of age on	17/05/2026		
Nuchal Translucency	1.8 mm 64%		
Nasal Bone	2.5 mm 26.5%		
Hands, Limbs, Nasal Triangle Integrity, Bladder, Stomach & Umbilical Arteries	Seen		
Ductus Venosus Waveform	Normal waveform Pattern		

Vessels	S/D	RI	PI	PI Percentile	Remarks
Right Uterine Artery	4.98	0.8	1.92	69.1%	
Left Uterine Artery	2.65	0.62	1.07	4.1%	
Mean Uterine Artery			1.50	33%	Normal
Ductus venosus	1.2	0.17	1.02		PSV=32.47 Normal waveform Pattern

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