

# Nucleus Diagnostic Centre

Discover Disease, Recover Health



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Patient Name: **ASHWINI SURAJ CHAVHAN**  
Ref Dr.: **DR. KARUNA MURKEY (M.D. (OB.&GY))**

Date: **17/11/2025**  
Age/Sex: **31 Years / FEMALE**

## USG OF GRAVID UTERUS (NUCHAL TRANSLUCENCY SCAN)

Single intrauterine live gestation is seen in variable position.  
Placenta is posterior with Grade 0 maturity with its lower end 1.5 cm away from the internal os.  
Internal os is closed. Cervical length is 38.8 mm.  
Liquor is adequate.  
Fetal cardiac activity is seen and heart rate is 152 beats per minute.  
Nuchal translucency measures 1.6 mm (22%  ).  
Nasal bone is visualized and measures 3.9 mm.  
Ductus venosus shows normal spectral pattern. No c/o tricuspid regurgitation.

### FETAL BIOMETRY:

Dating	LMP	▼GA(Corrected EDD):14w1d		▲AUA:14w1d		Corrected EDD:17-05-2026
		Weeks	Days	Weeks	Days	
By LMP	LMP: 02/08/2025	15	2			09/05/2026
By Corrected EDD	Corrected LMP: 10/08/2025	14	1			17/05/2026
By USG CRL		14	1			17/05/2026

### AGREED DATING IS (BASED ON Corrected EDD)

CRL	81.3 mm	14 weeks 1 days
BPD	28.3 mm	15 weeks 1 days
HC	101.9 mm	14 weeks 5 days

No obvious congenital anomaly is seen at this stage.  
Screening Doppler of uterine arteries appears normal.

Vessels	S/D	RI	PI	PI Percentile
Right Uterine Artery	3.44	0.71	1.54	55.4%   
Left Uterine Artery	4.97	0.8	2.06	90.2%   
Mean Uterine Artery			1.8	78%   



## **Nucleus Diagnostic Centre**

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Patient Name: ASHWINI SURAJ CHAVHAN  
Dr.: DR. KARUNA MURKEY (M.D. (OB.&GY))

Date: 17/11/2025

Age/Sex: 31 Years / FEMALE

**First trimester:** Pre Ultrasound Maternal age risk for Trisomy21 is **1 in 543**

Fetus	Risk estimate – NT
A	1 in 3194

IMPRESSION:

- Single intrauterine live gestation of 14 weeks 1 days as per CRL.
- Menstrual age 15 weeks 2 days.
- Corrected EDD - 17/05/2026
- Placenta posterior with its lower end 1.5 cm away from the internal os.
- Internal os is closed. Cervical length is 38.8 mm.
- Nuchal translucency measures 1.6 mm.
- Nasal bone is visualized and measures 3.9 mm.
- Ductus venosus shows normal spectral pattern.
- No e/o tricuspid regurgitation.
- Normal mean uterine artery PI 1.8 (78% ).

**SUGGEST:**

1. FIRST TRIMESTER DUAL MARKER SCREEING.  
2. FOLLOW UP STUDY TO RULE OUT ANOMALIES AT 18-20 WEEKS.

Note: It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, fluid volume, fetal movements, and patient's abdominal wall thickness. Therefore all fetal anomalies may not necessarily be detected at every examination.

**DECLARATION:** I have neither detected nor disclosed the sex of the fetus to anyone in any manner.

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- CT Scan -

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