

Date : 11/12/2025

Name : Mrs. Saba Shaikh.

30 year/F

Ref BY: Dr: Malekar.S.S.

ULTRASOUND FOR ASSESSMENT OF PREGNANCY

Anomaly scan

Thick abdominal wall

LMP: 19/07/2025

EDD: 25/04/2026

G age by LMP: 20.5 Weeks

There is a single viable fetus of unstable lie.

The placenta is fundus anterior not low lying.

Os closed, cervix 3.7 cm.

Normal amount of clear amniotic fluid is noted.

BPD = 4.5 cm. which is equivalent to 19.5 weeks maturity.

HC = 17.0 cm. which is equivalent to 19.4 weeks maturity

AC = 14.6 cm. which is equivalent to 20.0 weeks maturity

FML = 3.3 cm. which is equivalent to 20.4 weeks maturity.

TL = 2.6 cm. which is equivalent to 19.3 weeks maturity.

HL = 3.1 cm. which is equivalent to 20.1 weeks maturity.

RL = 2.6 cm. which is equivalent to 19.6 weeks maturity.

Fetal heart rate = 144 beats/min.

Fetal body weight = 335 grams.

G age by USG: 19.6 weeks.

Good fetal movements and muscle tone.

Right uterine artery pi 0.84

Left uterine artery pi 0.86

Mean pi (0.85) within normal limit. 13 percentile

(if increased uterine artery pi.... indicative of iugr / pre eclampsia)

Fetal Anatomy-

Head:

Cranial vault appeared intact. Midline falx and cavum septum pellucidum is seen.
Both lateral ventricles appeared normal. No identifiable intracranial lesion seen.

Face:

Both orbits are seen with eyeballs and lenses.
Premaxillary triangle is seen..

Neck:

Foetal neck appeared normal. No cystic or solid mass.

Spine:

Entire spine visualised in longitudinal and transverse axis.
Vertebrae and spinal canal appeared normal.

Thorax:

Both lungs are seen of normal echogenicity. No e/o pleural or pericardial effusion.
No e/o SOL in the thorax.

Heart:

Heart appears is normal in size and position. Normal cardiac situs.
Four chamber views are normal. Outflow tracts appeared normal.

Abdomen:

Abdominal situs is normal. Stomach and is normal in size and position. No e/o ascites.
Abdominal wall is intact.

Excretory system:

Right and left kidneys appeared normal. Bladder is normal.

Extremities:

All fetal long bones are visualised and appear normal in size and mineralization. Feet appeared normal.

IMPRESSION:

- Single live intrauterine fetus of gestation 19.6 weeks. BOH (cardiac defect)
- Suggest fetal echo
- cannot comment on evolving abnormalities.

N.B. the sonography has been performed very carefully . however sonography may not be able to completely exclude the possibility of foetal anomaly due to factors such as maternal abdominal wall thickness , gestational age , foetal position / movements , liquor status , subtlety of anomaly , technical limitations etc . it is important to note that false positive / false negative study exists with sonography despite thorough evaluation. This is not foetal echocardiography scan . diagnostic discretion is recommended . Therefore all fetal anomalies may not be detected at all examinations. The fetal gender has not been detected or disclosed to the patient.

I Dr. Payal Bhalgat declare that while conducting ultrasonography /image scanning on Mrs. Hove Neit detected nor disclosed the sex of her fetus to anybody in any manner.

Dr. Payal Bhalgat
Radiologist

I declare that by undergoing ultrasonography / image scanning etc. I do not want to know the sex of my fetus .

(मी जाहीर करते की अल्ट्रासोनोग्राफी / इमेज स्कॅनिंग वगैरे करून मी माझ्या गर्भाचे लिंग जाणून घेऊ इच्छित नाही.)

सोवत असलेले नातेवाईक
सही/अंगठा

Shabba Sh