

Patient Name: BHAGYASHREE VISHAL GAWADE	Age/Sex: 34 Years / FEMALE
Ref Phy: DR. SHUBHANGI KAMBLE	Date: 17/12/2025

ANTENATAL SONOGRAPHY

A single, live, intrauterine fetus is noted in **breech** presentation at the time of examination.

Fetal spine is right lateral.

Placenta is **posterior**. Grade II in maturity. No e/o retroplacental or intra-placental clot noted.

Amniotic fluid is adequate.

Cardiac activity and fetal movements well appreciated. Fetal heart rate of **160 beats / min.**

Cervical length is normal (**3.5 cm**). Internal os is closed.

CARDIAC evaluation-

- Normal situs is noted.
- Fetal heart is in normal position and axis.
- Fetal heart rate, rhythm and myocardial contractility are normal.
- Heart is seen in the left side of thorax with its 4 chambers.
- Its apex is pointing towards left.
- Cardio-thoracic ratio is normal.
- Bilateral atria and ventricles are normal in sizes.
- Normal ventricular septum and crux are seen.
- Atrio-ventricle & ventricle-arterial concordance is maintained.
- 4 chamber view, 3 vessel view, LVOT, RVOT & aortic arch images are normal.
- SVC and IVC are seen draining into right atrium.
- No pericardial effusion is seen at present.
- **Single echogenic intra-cardiac focus is seen in left ventricle.**

FETAL BIOMETRY:

BPD	56.7 mm	23 weeks 2 days
HC	204.6 mm	22 weeks 4 days
AC	161.5 mm	21 Weeks 2 days
FL	40.1 mm	23 weeks 0 days

LMP: 07/07/2025

Weight : 477 ± 70 Grams

PTO

MGA by LMP: 23Weeks 2 Days

MGA by USG: 22Weeks 4 Days

EDD by LMP: 13/04/2026

EDD by USG: 18/04/2026

IMPRESSION: USG study reveals:

- Single, live, intrauterine pregnancy in breech presentation at the time of examination with mean gestational age of 22 weeks 4 days.
- Single echogenic intra-cardiac focus in left ventricle, likely represent papillary muscle mineralization.
- Optimal interval growth.
- Adequate liquor status.

Suggest clinical, laboratory correlation and SOS follow up.

Thanks for reference.



DR SWAPNIL INGOLE
MBBS, MDRADIOLOGY

Kindly note that sonography has its own limitations and cannot detect all fetal abnormalities. Pick up rate of abnormality depends on various factors like fetal position, tissue penetration of sound waves, resolution of USG machine and patients body habitus

I Declared that while undergoing ultrasonography / image scanning on patient, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.