SURYA HOSPITAL

Patient ID: UFM2654

First Trimester Risk Assessment

Patient: **G ASHWINI** DOB: 08-10-1999

Exam date: 05-01-2026

Indication First trimester risk assessment.

History

General History Blood group: A, Rh positive. Smoking: no. Height 157 cm, 5 ft 2 in
Non consanguineous marriage.

OB History **Gravida 1**

Method Transabdominal and transvaginal ultrasound examination. View: Sufficient

Pregnancy Singleton pregnancy. Number of fetuses: 1

Dating

	Date	Details	Gest. age	EDD
LMP	11-10-2025		12 w + 2 d	18-07-2026
Conception		Conception: spontaneous		
U/S	05-01-2026	based upon CRL	13 w + 0 d	13-07-2026
Agreed dating	**based on ultrasound (CRL)**		**13 w + 0 d**	**13-07-2026**

General Evaluation

Cardiac activity present
Placenta: posterior, low lying covering internal os
Cord vessels: 3 vessel cord
Amniotic fluid: normal

Fetal Biometry

FHR	159 bpm		Nasal bone	2.4 mm	
CRL	67.3 mm	46%	IT	2.3 mm	
NT	1.80 mm	44%			

Fetal Anatomy **The following structures appear normal:**
Cranium. Face. Neck. Heart. Great vessels. Thorax. Abdominal wall. Stomach. Kidneys. Bladder. Spine. Arms. Legs. Skeleton.

Fetal Doppler

Ductus Venosus:

S-wave	40.15 cm/s		PLI	0.64
D-wave	35.53 cm/s		S/a	2.80
A-wave	14.32 cm/s		a/S	0.36
TAmax	30.93 cm/s		D/a	2.48
PIV	0.84	29%	HR	162 bpm
PVIV	0.73			

Maternal Doppler

Right uterine artery:

HR	95 bpm		ED	14.19 cm/s	
PI	1.11	7%	TAmax	20.41 cm/s	
RI	0.61		MD	13.92 cm/s	
PS	36.77 cm/s		S / D	2.59	

Left uterine artery:

HR	104 bpm		ED	-13.56 cm/s	
PI	1.20	12%	TAmax	-20.13 cm/s	
RI	0.64		MD	-11.66 cm/s	
PS	-37.78 cm/s		S / D	2.79	
Mean HR	99.50 bpm		**Mean PI**	1.16	9%

Impression: normal uteroplacental resistance

Maternal Structures

Cervix
Visualised
Appearance: normal
Approach - Transvaginal: Cervical length 33.4 mm, Endocervical length 33.0 mm
Funnelling absent

Risk Parameters

Maternal Characteristics and History
Age: 26 yrs. Height 157 cm, 5 ft 2 in. Weight 65 kg, 143 lb. Ethnic origin: Indian. Smoking currently: no. Conception: spontaneous
Diabetes mellitus: no. History of chronic hypertension: no. Systemic lupus erythematosus: no. Antiphospholipid syndrome: no. Maternal family history of preeclampsia: no
Parity (pregnancies after 23 weeks): nulliparous
Previous pregnancy with preeclampsia: no. Previous pregnancy with fetal growth restriction: no

U/S Markers
Nasal bone: present. Tricuspid regurgitation: absent. Fetal cardiac activity: present. FHR 159 bpm. Ductus ven. PIV 0.84. Holoprosencephaly: no. Diaphragmatic hernia: no. AV- septal defect: no. Exomphalos: no. Megacystis >= 7 mm: no.

Biophysical Markers
Endocervical length 33.0 mm.
A. uterine mean PI 1.16, equivalent to 0.7202 MoM.

Risk Assessment

Chosen trisomy screening option: Tr21, Tr18 and Tr13.

Risk at time of screening	Trisomy 21	Trisomy 18	Trisomy 13
Background risk	1 in 918	1 in 2,278	1 in 7,136
Adjusted risk	1 in 9,414	1 in 9,951	< 1 in 20 000

The background risk is based on maternal age. The adjusted risk (risk at time of screening) is calculated on the basis of the background risk, ultrasound markers (nuchal translucency, nasal bone and fetal heart rate).
Risk for preeclampsia before 37 weeks 1 in 246.
Risk for fetal growth restriction before 37 weeks 1 in 263.
The risk for preeclampsia is based on maternal history and uterine artery mean-PI. The risk for fetal growth restriction is based on maternal history and uterine artery mean-PI.

The risk assessment was performed by Sri Sai Lakshmi B J. The estimated risk is calculated by the FMF-01-04-2016 software and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).

Comment

After detailed NT scan, the risk of Downs syndrome has reduced from
1: 918 (Background risk based on maternal age) to
1: 9,414 (Based on NT + NB + Tricuspid Flow + FHR)

I have explained to couple that this is low risk.

Couple understand that this is risk assessment only and chromosomal abnormalities cannot be diagnosed by ultrasound and or blood test on their own.

I have explained different screening tests, their detection rates and limitations of screening to couple.

The only way to know the chromosomal makeup of the fetus is by invasive tests, which would carry small risk of procedure related miscarriage.

Another option is Noninvasive testing: NIPT (Non Invasive Prenatal Testing); performed by obtaining maternal blood.
NIPT has a very high sensitivity and specificity (>99%) but still considered as screening test (i. e Positive test results need to be confirmed by invasive test; Negative test results means Down's syndrome is extremely unlikely).
No risk of miscarriage in NIPT but at present it is limited to only three common trisomies and few deletions. Test results would take 10 to 14 working days.

In view of low risk, I have not recommended further invasive test and couple also declined invasive test.

Risk for preeclampsia before 37 weeks 1 in 246.
Risk for fetal growth restriction before 37 weeks 1 in 263.

Impression

Single live intrauterine gestation.
Estimated gestational age by CRL is 13w 0d.
Assigned EDD based on CRL: 13-07-2026.

Normal NT:1.8 mm.
Nasal Bone present.
Ductus Venosus: Normal
Tricuspid regurgitation: Absent.
No obvious sonological structural abnormalities detected for gestation.

Placenta: posterior, low lying covering internal os
Cervical length: 33.4 mm: Normal.
Normal Uterine artery Doppler mean P.I:1.16. 9%th centile

Follow-up

1. Double marker test.
2. Review for counselling if Combined test is screen positive or PAPPA MoM is < 0.4.
3. Review for mid-trimester morphology scan.

Next Appointment

23-02-2026 (GA 20 w + 0 d)

Disclaimer/

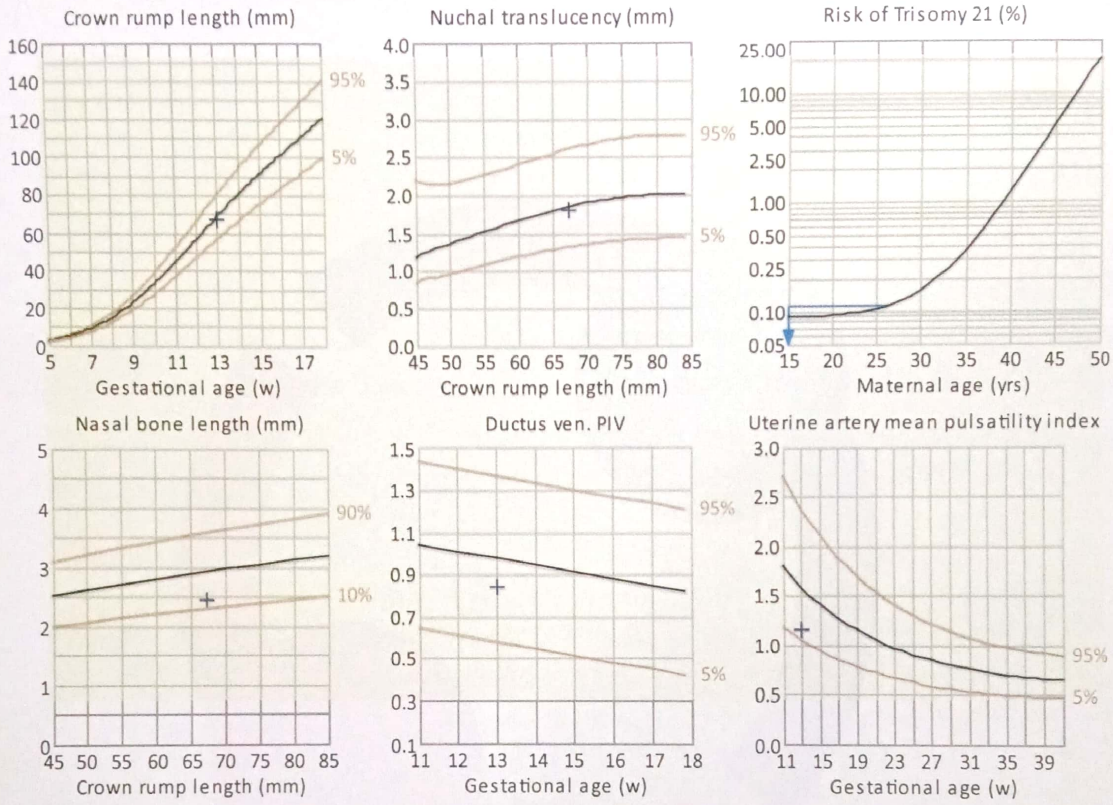
Ultrasound scanning cannot detect all fetal abnormalities and genetic syndromes,

Declaration

especially so in this early gestation. Some abnormalities may evolve as gestation advances, and obviously those cannot be detected at current gestation.

Declaration:

I,Dr Sri Sai Lakshmi B J, declare that while conducting ultrasonography on Mrs.ASHWINI G I have neither detected nor disclosed the sex of her fetus to anybody in any manner.



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ViewPoint 6

Image Report

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