

DR. K. S. RAO & SON
INSTITUTE OF MEDICAL SCIENCES
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ULTRASOUND REPORT

OBSTETRICS

Patient Name: **Rajwahi** Age: **33/F**
OPD Registration No: **2503604051** Referred By:

13/8/25

LMP: 26/6/25 by LMP. 20w5d EDD by LMP: 20/5/26

Number of fetuses: **Single**

Fetal Position: **Variable**

Fetal Heart: **Seen** / Heart Rate: **138/min**

Placenta Position: **Fundoanterior**

Amniotic fluid: **SVP: 4.8 cm**

Fetal Biometry: **All measurements are in cms.**

BPD = **4.8 cm N 20w5d**

FL = **20w.6d**

HC = **20w.6d**

AC = **21w.2d**

Effective gestational age by USG = **20w.5d**

Fetal Weight = **398 g (66.1)**

Screening of Body Parts:

HEAD:

Skull: **Normal / dolicocephalic**

Nuchal fold thickness: **4 mm**

Orbital diameter: **10 mm**

Inter orbital distance: **11 mm**

Palate, Lips & Nose appear normal

NB: **6.8 mm**



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Brain - Cerebellar diameter (TS) - 20.4 mm

Cisterna magna- 5.4 mm

Atria of lateral ventricle - 6 mm

All the above measurements are within limits.

Fetal Spine: Appears normal. (Parallelism of anterior and posterior lamellae is well maintained)

Chest: Bilateral Lung appear normal in morphology and parenchymal echogenicity. Diaphragm appears normal

Heart: 4 chambers views suggest normal sizes of all cardiac chambers

- Normal situs
- Normal outflow tracts

Abdomen: - Cord insertion - Normal
- 3 Vessel cord is noted

Stomach: Bubble well visualized, normal in position.

Normal distribution, diameter and echogenicity of bowel loops.

Kidney: Bilateral kidneys are normal in size and echogenicity.

~~No evidence of hydronephrosis.~~

Urinary Bladder: appears normal.

Limbs: Humerus length: 31.5 mm

Tibial length: 28 mm

Foot length: 34 mm

Above screening suggest absence of any apparent congenital anomaly.

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IMPRESSION: Single live intrauterine gestation \bar{c} EGA \approx 20w 5d
 \bar{c} no gross congenital anomalies

DECLARATION

Dr. Aman Raywah declare that while performing sonography/ Images I have neither detected nor disclosed sex of the fetus to her or a (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid, maternal abdominal wall thickness and tissue echogenicity. Therefore, all fetal anomalies may not necessarily be visible on this examination) Patient has been counseled about the capabilities and limitations of this examination

Dr. Aman (SR)

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