



एडवांस ऑर्थोपेडिक एण्ड मेटरनिटी सेन्टर



पादलीपुत्र स्टेसन, पापी टकी के सामने, गीसी नगर, रोड नं. - 58, पटना

Contact No. - 9006982665

डॉ. पी. के. झा
Dr. P. K. Jha

M.B.B.S, M.S (Ortho) PMCH, Patna
Fellowship in Stencil and
Regenerative Medicine
Life member of Indian Orthopedic association
and Indian Arthroplasty association



Specialist in

Arthroplasty
Stem cell and Regenerative medicine
Iliac crest reconstruction
GTEV
Trauma

इडडी, जोड़ एवं नस रोग विशेषज्ञ
(मंगलवार एवं शुक्रवार बन्द)

24 घंटे सेवा उपलब्ध है।
शुक्र 25 घंटे का नजदीक।

OPD - Timing : 11:00 AM - 01:00 PM
05:00 PM - 07:00 PM
(Except Tuesday & Friday)

BCMR 33222

Name Poo Nam Kumari Age 26 years
Address Phulwari Sharada Height 5.1 Kg. 120/70
Regd. No. EDD - 21 05 2026 Date 25/12/2023

010
4 months pregnancy, came for ANC

GTE
P+, C+, P+ chest
evs 3NAD

2
level II scan
after 3 weeks

P/A
ut 18 weeks
EB-

Triple marker
test

- 1. Tab. Kineron 2 - 1x2
- 2. Tab. cobaxol - 1x1
- 3. Cap. Prenatal - 1x2
- 4. Tab. Vetc - 1x3

1 month

आयुष्मान भारत के तहत मुफ्त इलाज एवं ऑपरेशन की सुविधा उपलब्ध है।

SBI Life Insurance, HDFC ERGO Insurance and Cholamandalam Insurance Empanelled

Note: This report is subject to the terms and conditions outlined. Partial reproduction of this report is not permitted.



SHREE DIAGNOSTICS

REPORT CHOUDHARY SWEETS STORE, NEAR I.C.O. BANK, BANARASURA, RAJA BAHADUR, PATNA-800014
CONTRAST ECHOCARDIOGRAPHY,

Name : MRS. PUNAM KUMARI
LMP:- 14.08.2025 Date: 12.01.2026

Age: Years
Refd. By: DR. AMITA BHARTI MBBS,MS

USG FOR FETAL WELL BEING (LEVEL II)

- FETAL BRAIN:** Appears sonographically normal. Atrial width—5.3mm. Cisterna magna—6.0mm. Transverse cerebellar diameter—21.8mm. Nuchal thickness—4.2mm.
- FETAL FACE:** No evidence of cleft lip. Inter orbital diameter—10.9mm. Nasal bone—7.1mm.
- FETAL HEART:** Normal 4 chamber heart with normal situs, rate & rhythm. Levocardia. Normal RVOT & LVOT noted. However, study does not include a detailed fetal echo scan.
- FETAL ABDOMEN:** Appears sonographically normal. Normal cord insertion, normal echogenicity of bowel loops. Gastric shadow seen. Peritoneum appears normal. No evidence of ascites.
- FETAL KIDNEYS:** Mild pelviectasis of both fetal kidneys (RK-3.1mm, LK-4.5mm). Follow up scan suggested. No other renal pathology seen.
- FETAL U. BLADDER:** Normal distended.
- FETAL SPINE:** Ossification centres are parallel. Sacral tapering seen. Overlying skin line intact. No evidence of neural tube defect seen.
- FETAL LIMBS:** Limbs fore & hind limbs appear normal. Normal orientation to trunk. No bowing seen. The proximal & distal segments appear normal. No evidence of polydactyly/syndactyly. Normal ossification noted.
- UMBILICAL ARTERY:** Normal colour Doppler study of umb. arteries.
- MIDDLE CEREBRAL ARTERY:** Normal flow.
- DUCTUS VENOSUS:** Normal forward flow seen throughout the cycle.
- BOTH UTERINE ARTERIES:** Normal low resistance high diastolic flow seen in both uterine arteries.
- IMPRESSION:** (1) Mild pelviectasis of both fetal kidneys, at the time of scanning—RK-3.1mm LK-4.5mm—follow up scans suggested.
(2) Otherwise normal study. No other sonodetectable could be anomaly seen. Normal colour Doppler study of vessels.

Note—Level II scan has technical limitations inherent to ultrasound & its quality is further affected by maternal obesity, amount of liquor, fetal position & gest. age at the time of evaluation. Anomalies of the gut such as distal small bowel & large bowel atresias may not be diagnosed during level II scan owing to gest. age. In literature, level II has sensitivities ranging from 85-96% so results should always be seen in this perspective.

Dr. Jalshree
M.B.B.S., D.M.R.D.
CONSULTANT RADIOLOGIST
& SONOLOGIST

Radiologist

Dr. Jalshree
MBBS, DMRD
Reg. no. SCNR 31018

Facilities : • ECG • Digital X-Ray (300 MA Siemens) • All Contrast Studies (IVP, RGU, MCU, HSC etc.)
• USG (Ultrasound) • Colour Doppler • Echo Doppler • Trans Vaginal USG (TVS) • Vascular Doppler • TMT • PFT • Holter
Time : 9.30 AM to 7.30 PM (Monday to Saturday), 9.30 AM to 1.30 PM (Sunday)

(Please co-relate clinically, not for medico-legal purpose)