

General Hospital, Gurgaon

AA/GGN/07/0034

(Department of Radiology -THSTI)
Report of Ultrasonography

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Patients Name Nisha Age & Sex 24/F Date 28-01-19
Husband's/ Father's Name Ravi Referring Doctor Name Dr. Shahang
Residential Address Shakti Park
Outdoor /Indoor No. 641/S18573/G05604 Ultrasound No. 1998/
Identification Card Aadhar Card
Number of Children None M F

ULTRASOUND REPORT ----(14-18 WKS / AS- ANOMALLY SCAN/ FWB)

Number of foetus : Single
Presentation : Variable / cephalic . FHR 148 BPM.
Placenta- Anterior / Posterior, Lower end is away from internal os.
slightly towards left side
Foetal Parameters (in mm)

Table with 4 columns: BPD, HC, AC, FL. Values: BPD 41.9 mm (18 weeks 5 days), HC 158.3 mm (18 weeks 5 days), AC 134.9 mm (19 weeks 0 days), FL 29.2 mm (19 weeks 0 days).

Liquor : Adequate . AFI: cm Estimated foetal weight 265 gms +/- 39 gms
Gestational Age : 19 WEEKS 0 DAYS EDD 24-06-19

Any Congenital Anomaly : Ecogenic cardiac focus in left ventricle of fetal heart and choroid plexus cyst in lateral ventricle of fetal brain. No obvious GCMF seen. Suggested correlation with maternal risk status and biochemical screening of markers.

DECLARATION OF PREGNANT WOMAN
1. Mrs. Nisha (Name of the Pregnant woman) declare that by undergoing Ultrasonography / Image scanning etc. I do not want to know the sex of my foetus.

DECLARATION OF DOCTOR / PERSON CONDUCTING ULTRASONOGRAPHY /IMAGE SCANNING

I, Dr POONAM YADAV... (Name of the person conducting ultrasonography /image scanning) declare that while conducting ultrasonography / image scanning on Mrs. Nisha (Name of the pregnant woman). I have neither detected nor disclosed the sex of her foetus to anybody in any manner .

Date: 28-01-19

Dr. POONAM YADAV st
Consultant Radiologist

Suggested fetal echo after 4 weeks.