Name: NISHA GOEL Age: 32 YRS Sex: Female

Sr.No: 21798 Date: 27-Feb-2021 Lab No: 012102270018

Ref. By: Dr. NUPUR GUPTA

<u>ULTRASOUND OBSTETRICS – LEVEL I / NT-NB SCAN</u>

LMP: 06/12/2020 G.A. by LMP: 11 Weeks 6 Days EDD by LMP: 12/09/2021

UTERUS shows a single live intrauterine pregnancy.

The embryonic CRL measures 51.0 mm, corresponding to a gestational age of 11 Weeks 4 Days +/- 1 week.

The embryonic cardiac activity is well visualized. FHR - 161 Beats per Minute

Ductus venosus flow is normal.

No evidence of tricuspid regurgitation.

The internal OS is closed. The **cervix** is adequate in length.

Nuchal thickness measures 0.87 mm and is within normal limits.

Nasal bone is seen and appears normal.

Placenta is developing POSTERIORLY (not low lying).

Uterine Arteries

| oternic Arteries | | | |
|----------------------|------|------|------|
| | RI | PI | S/D |
| RIGHT UTERINE ARTERY | 0.54 | 0.83 | 2.15 |
| LEFT UTERINE ARTERY | 0.81 | 1.98 | 5.25 |

EDD by CGA is 14/09/2021

IMPRESSION:

Single live intrauterine pregnancy, corresponding to a gestational age of 11 Weeks 4 Days +/- 1 week.

Advised: 1. Double Marker blood test with this USG scan.

2. USG Level 2 scan (19-21 Weeks of G.A.) for further evaluation of anomalies.

Note: This is an obstetrical ultrasound, mainly done for estimation of gestation age, amount of liquor, placental position and general well being of the fetus and not for the evaluation of congenital anomalies. Moreover, the detailed fetal anomaly may not always be visible and are extremely difficult to visualize due to constantly changing position of the fetus, abdominal wall thickness and overlapping of various fetal parts. Therefore, all fetal anomalies may not necessarily be detected at every examination.

I, the undersigned declare that while conducting the ultrasound on Mrs. Nisha, I have neither detected nor disclosed the sex of the fetus to anyone in any manner.