



Surya Imaging and Pathology Centre Pvt. Ltd.

DIAGNOSTICS REDEFINED

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CIN NO. : U85110DL2004PTC130690

NAME:	MRS.PRIYANKA YADAV	AGE/SEX:	29 Y/F
REF. BY DR:	TARANG YADAV	DATE	08-MAY-2021
INVESTIGATION:	OBSTETRIC USG	S.NO :	641

FINDINGS:

LMP: 01-02-2021

Gestational age by LMP: 13 weeks 05 days, By USG: 13 weeks 05 days.

Gravid uterus with a single viable intrauterine fetus is noted, with Variable presentation at the time of study. Amniotic fluid is adequate.

Fetal cardiac activity is well appreciated. FHR ~151 bpm, at time of study.

Nuchal translucency = 1.22 mm, Nasal bone is seen measures = 4.83 mm.

All congenital anomalies cannot be excluded on routine scan.

Placenta appears anterior upper uterine segment, not low lying, Grade I maturity. No retro placental clot is seen.

FOETAL PARAMETERS:

CRL: 7.66 Cm (13 weeks 05 day)

Average age by USG: 13 weeks 05 days (± 01 weeks), EDD (by USG): 08-11-2021

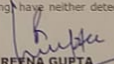
Internal Os is closed. Cervical length appears normal.

IMPRESSION: Single Live Intrauterine Pregnancy of approx. 13 weeks 05 days gestation, as described.

Please correlate with clinical and biochemical parameters.

All congenital anomalies cannot be excluded by ultrasonography.

I, Declare that while conducting Ultrasonography/Imaging Scanning, have neither detected nor disclosed the sex of her fetus to anybody in any manner.


DR. REENA GUPTA
MBBS, DNB (Radiologist)
DMC NO: 15660

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes.

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TESLA • SPIRAL CT SCAN • 4D COLOR DOPPLER/ULTRASOUND • DIGITAL X-RAY • ECG/EEG • ADVANCED PATHOLOGICAL

Clinical Correlation is essential for final diagnosis • If test result are unsatisfactory please contact personally • This report is only for personal of doctors.
• Not for medico legal cases • All congenital anomalies in a fetus may not be diagnosed in routine obstetric ultrasound.