ISO 9001: 2015 Certified

First Trimester Screening Report

KOMAL GULIA

Date of birth: 01 April 1993, Examination date: 17 July 2023

Address:

GURGAON **GURGAON**

INDIA

Referring doctor: Dr REENA JAIN

JAIN HOSPITAL

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi). Parity: 0; Spontaneous deliveries between 16-30 weeks: 0. Maternal weight: 73.0 kg; Height: 163.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Patient's mother had preeclampsia: no. Method of conception: Spontaneous;

Last period: 13 April 2023

EDD by dates: 18 January 2024

First Trimester Ultrasound:

US machine: SAMSUNG H-60 HIGH DEFINITION. Probe: H-60 HIGH DEFINITION. Visualisation: good.

Gestational age:

12 weeks + 4 days from CRL

EDD by scan: 25 January 2024

Findings Alive fetus Fetal heart activity visualised 158 bpm Fetal heart rate Crown-rump length (CRL) 61.5 mm Nuchal translucency (NT) 0.7 mm Biparietal diameter (BPD) 19.7 mm

0.880 **Ductus Venosus PI** anterior low Placenta normal Amniotic fluid not examined

Cord

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Skull/brain: appears normal; Spine: appears normal; Abdominal wall: appears normal; Skull/brain: appears normal; Skull/Drain: appears normal, Spinor, Visible; Hands: both visible; Feet: both visible. Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

equivalent to 1.330 MoM

Uterine artery PI: Mean Arterial Pressure:

90.0 mmHg

equivalent to 1.040 MoM

Endocervical length:

50.0 mm

2.12

Risks / Counselling:

Patient counselled and consent given.

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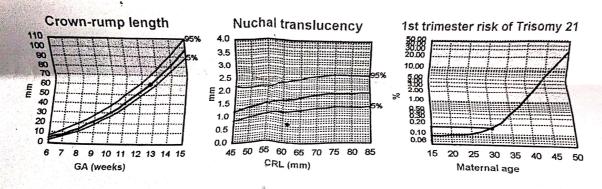
Condition Trisomy 21 Trisomy 18		Background risk 1: 625 1: 1508 1: 4735	Adjusted risk 1: 3123 1: 4570 <1: 20000
Trisomy 13	1 Camp 24 WOOKS		1: 1272

Spontaneous delivery before 34 weeks

The background risk for aneuploidies is based on maternal age (30 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, fetal heart rate).

All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2012 software (version 2.81) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).



Comments **SUMMARY**:

SINGLE LIVE INTRA-UTERINE FETUS CORRESPONDING TO 12 W 4 D WITHIN THE LEFT CORNUA OF BICORNUATE UTERUS

LOW RISK OF PRETERM PRE-ECLAMPSIA SEEN ON THE FMF CALCULATOR. Preeclampsia risk from history only: At < 37 weeks: 1 in 98 Preeclampsia risk from history plus UT PI: At < 37 weeks: 1 in 154

THE BACKGROUND RISK FOR TRISOMIES 21, 18 & 13 ARE 1:625; 1:1508 & 1:4735 RESPECTIVELY, HOWEVER THE ADJUSTED RISKS FOR THE ABOVE ARE 1:3123, 1: 4570

LOW RISK OF PRETERM DELIVERY: 1: 1272

ANTERIOR LOW LYING PLACENTA 1.5 CM FROM INTERNAL OS AS DESCRIBED.

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Date

17/07/2023

Name Ref. By

Mrs. KOMAL GULIA Dr. REENA JAIN

Srl No. 15

30 Yrs.

Patient Id 23071715

Sex

USG SPECIAL

LMP:13.04.2023

USG LEVEL 1 (NB+NT SCAN)

GA by LMP: 13 wks 4 day

UTERUS is bicornuate with a normal appearing gestational sac in the upper uterine segment. The internal Os is closed. The Endocervical length is adequate(5.0 cm).

The right uterine artery shows normal flow pattern with RI = 0.86 and a PI = 2.94 The left uterine artery shows a normal flow pattern with RI = 0.66 and a PI = 2.84 The mean pulsatility index of the uterine arteries is 2:12 (1.33 MoM) = < 95 th centile.

Placenta: Forming anteriorly low lying 1.5 cm from internal os. Homogenous echopattern. No R.P. collection. Liquor amnii is normal. Cardiac activity is visualised and is normal. Approx. = 158 bpm.

Nasal bone is seen and measures 1.5 mm in length and appears normal. Nuchal Translucency measures 0.7 mm (within normal range). Intracranial lucency & Ductus venosus flow are normal. No tricuspid regurgitation. Fetal stomach bubble is visualised and appears normal. CRL= 61.5 mm corresponding to 12 wks 4 days+/- 3 days. EDD by USG is 25.01.2024

Pre-eclampsia risk from history only: At < 37 weeks : 1 in 98 Pre-eclampsia risk from history plus UT PI: At < 37 weeks: 1 in 154

IMPRESSION: Single intrauterine pregnancy, corresponding to a gestational age of 12 wks 4 days +/- 6 days with low lying placenta and normal level 1 scan.On the basis of the FMF risk assessment the patient has been classified as having a low risk for preterm pre-eclampsia.

I. Dr. Sahii Loomba, declare that while conducting the ultrasound on Mrs. KOMAL, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.Please note: All congenital anomalies cannot be detected on ultrasound.

Dr. SAHIL LOOMBA

MBBS, DNB (St Stephens Hosp, MNAMS, MRCR, FRCR(London FMF (UK) CERTIFIED ID:- 2513 Consultant Radiologist ,HMC-6

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