



Patient Name: SNEHA
Patient Id: 2775
Ref Phy: DR. ANURAG CHATURVEDI.

Date: 29/03/2024 Age/Sex: 36 Years / FEMALE

## **OBSTETRIC NT SCAN**

The second secon		
LMP:08-01-2024 *GA(LMP):11w4d	A AUA:12wod EDD by LMP:14-10-2024	30.00
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Dating	LMP		3A	EDD -
		Weeks	Days	
By LMP	LMP: 08/01/2024	11	4	14/10/2024
By USG		12	0	11/10/2024
	AGREED	DATING IS (BAS	ED ON LMP)	

There is a single gestation sac in uterus with a single fetus within it.

The fetal cardiac activities are well seen.

Chorion frondosum/Placenta is anterior in nature. Pacenta is low lying covering the internal os.

Amniotic Fluid: Normal

Internal os is closed and length of cervix is normal 3.9 cm.

Embryonal Growth Parameters	mm Weeks Days
Crown Rump Length	54 12 0
Heart Rate	165 Beats Per Minute.
The Embryo attains 40 weeks of age on	11/10/2024
Nuchal Translucency	1.7 mm 61% + 1s +
Nasal Bone	2,4 mm 37.7% + * 1 38%
All four Limbs appear to be developing, Na	sal Triangle Integrity, Seen
Skull, Spine, Bladder, Stomach & Umbilical c	ord
Ductus Vegosus Waveform	Normal waveform Pattern

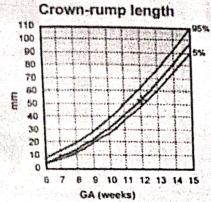
Andrews and the second	S/D	RI	Pl	PI Percentile	Remarks
Vessels	97.0	•••			No early Diastolic notch
Right Uterine Artery	4.24	0.76	1.63	39%	seen
					No early Diastolic notch
Left Uterine Artery	3.25	0.69	1.28	10.4%	seen
All the second s			1 46	25% + + + +	Normal
Mean Uterine Artery		rinar mijunanar	1,46	227	PSV=19.95 Normal
Ductus venosus	3.09	0.68	0.94		waveform Pattern

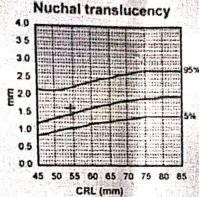


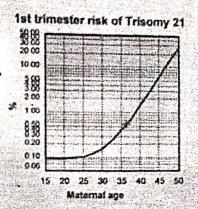












First trimester: Pre Ultrasound Maternal age risk for Trisomy21 is 1 in 196

1000	T21 Risk	1.1300000000000000000000000000000000000	A. 35. W.
	From - NT	1 in 700	

CONCLUSION: SINGLE LIVE INTRAUTERINE FETUS OF 12 WEEKS 0 DAYS IS PRESENT.

PLEASE CORRELATE WITH DUAL/TRIPLE MARKER TEST.

Suggested Anomaly scan at 19 weeks: 20/05/2024 ± 2 days

Please note that all anomalies can not be detected all the times due to various technical and circumstantial reasons like gestation period, fetal position, quantity of liquor etc. The present study can not completely confirm presence or absence of any or all the congenital anomalies in the fetus which may be detected on post natal period. Growth parameters mentioned herein are based on international Data and may vary from Indian standards. Date of delivery (at 40 weeks) is calculated as per the present sonographic growth of fetus and may not correspond with period of gestation by L.M.P. or by actual date of delivery. As with any other diagnostic modality, the present study should be correlated with clinical features for proper management. Except in cases of fetal Demise or Missed Abortion, sonography at 20-22 weeks should always be advised for better fetal evaluation and also for base line study for future reference.

I, DR RUBY RAHUL declare that while conducting sonography on SNEHA (name of pregnant woman), I have neither detected nor disclosed the sex of the fetus to anybody in any manner.

To be correlated clinically.

OR-RUBY RAHUL DMRD CONSULTANT RADIOLOGIST HIM G 7054MQ - 7054



