



# Dr. Hardik Diagnostic Centre

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"We Care"

NAME: MRS. BHAWNA

AGE: Y/F

DATE: 24.11.2022

REF BY: DR. VARSHA TIWARI

## ULTRASOUND LEVEL II FOR TARGETED IMAGING FOR FETAL ANOMALIES EXCLUDING FETAL ECHOCARDIOGRAPHY; II<sup>ND</sup> TRIMESTER SCREENING

SINGLE LIVE INTRAUTERINE PREGNANCY IS SEEN IN VARIABLE LIE AT THE TIME OF EXAMINATION.

### FETAL MEASUREMENTS:-

BPD	43.9 MMS	19 WEEKS 2 DAYS OF GA		
HC	165 MMS	19 WEEKS 2 DAYS OF GA		
AC	136 MMS	19 WEEKS 0 DAYS OF GA		
FL	31.8 MMS	19 WEEKS 6 DAYS OF GA		
CGA	19 WEEKS 4 DAYS (BY LMP)	19 WEEKS 3 DAYS +/- (BY USG)		
EDD	16.04.2023 (BY LMP)	17.04.2023 (BY USG)		
EFW	292 GMS +/-	FHR	167 BPM	
LVW	6.2 MMS	TCD	20.1 MMS	
CM	4.5 MMS	NFT	4.5 MMS	
OCCULAR DISTANCE 10.5 MMS	INTEROCCULAR 10.5 MMS	BINOCCULAR 31.1 MMS	NBL 6.4 MMS	CSP 7.2 MMS

**Placenta- Posterior and just covering the internal OS.** The maturity is grade I. The placental-myometrial interface appears normal.

**Umbilical cord** and its insertion sites over the placenta and the fetal abdomen do not reveal any definite abnormality. The umbilical cord shows central insertion. The umbilical cord shows 2 arteries and a vein.

**Amniotic fluid** does not reveal any definite abnormality. No definite septations is seen in the amniotic cavity.

**Cervix** the internal OS is closed. Cervical length appears normal and measures 39.2 mms.

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डॉ. हार्दिक डाइग्नोस्टिक सेंटर

■ 4-D ULTRASONOGRAPHY ■ COLOR DOPPLER ■ SMALL PARTS SONOGRAPHY ■ COLOR ECHO-CARDIOGRAPHY  
■ LATEST 600 MA X-RAY ■ DIGITAL X-RAY ■ E.C.G. ■ PATHOLOGY LAB.

This is only a professional opinion & not the diagnosis. Findings should be co-related clinically. •Not for Medico Legal Purposes.

Note : All foetal anomalies can't be detected by ultrasound scan.

गर्भवस्थ कन्या भ्रूण की जांच एवं हत्या दण्डनीय अपराध है।

I don't detect/declare fetal sex

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**FETAL STRUCTURAL ASSESSMENT:**

**Fetal head-** Skull appears normal. Brain structures including the cistern magna, cavum septum pellucidum and trigone appears normal. Midline falx seen. No evidence of ventriculomegaly. The calvarial ossification is optimal.

**Fetal face and neck** -Do not reveal any definite abnormality. Binocular and orbital distances are normal. Lips and nose appears normal.

**Fetal chest** -Heart is in normal location. Heart size and axis is normal. Situs solitus seen. Four chamber view, 3VT, RVOT and LVOT appears normal. Heart rate and rhythm are normal. No echogenic intracardiac foci is noted. The echogenicity of fetal lung appears within normal limit. No evidence of pleural effusion / pericardial effusion is seen.

**Diaphragm**-Diaphragmatic echo is visualized. No diaphragmatic hernia is noted.

**Abdomen** - Fetal anterior abdominal wall is intact. Echogenicity of fetal bowel appears within normal limit. Fetal stomach, kidney and urinary bladder are well-visualized. There is no definite evidence of renal pyelectasis. No fetal mass lesion is identified.

**Fetal spine**- Including the osseous components, soft tissues and skin were assessed in longitudinal, axial and coronal section along with special view in 4D appears normal.

**Fetal extremities** are optimally evaluated and do not reveal any definite abnormality. No evidence of long bone shortening is seen in this study. Finger counting is attempted.

Movements were observed:

**Right uterine PI is - 1.07 Normal**

**Left uterine artery PI is - 0.95 Normal**

**IMPRESSION :- FINDING REVEALS**

- SINGLE LIVE INTRAUTERINE FETUS IN VARIABLE LIE AT THE TIME OF EXAMINATION. GESTATIONAL AGE CORRESPONDING TO 19 WEEKS 3 DAYS.
- MARGINAL PLACENTA PREVIA -----MAY MIGRATE AS PREGNANCY ADVANCES.

**ADVICE:- FOLLOW UP USG.**

**NO DEFINITE FETAL STRUCTURAL ABNORMALITY IS IDENTIFIED IN THIS STUDY AT PRESENT.**

Depending on the size and stage of development, foetal position, amount of liquor and maternal obesity, all congenital malformations may not be identified on sonography.

All measurements including birth weight are subject to statistical variations.

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