

Patient Name	: Ms.PUNAM RAWAT	Visit No	: CHA250036724
Age/Gender	: 47 Y/F	Registration ON	: 01/Mar/2025 09:39AM
<b>Lab No</b>	<b>: 10134020</b>	Sample Collected ON	: 01/Mar/2025 09:39AM
Referred By	: Dr.QMH	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 01/Mar/2025 10:16AM

### **ULTRASOUND STUDY OF OBSTETRICS**

- IVF convinced pregnancy. Embryo transfer date: 18/07/2024. EA by ET : 35 weeks + 4 days.
- Single live intrauterine foetus is seen in longitudinal lie cephalic presentation.
- Foetal heart rate is 136/min.
- Foetal gestation age is
  - BPD 90mm 36 weeks + 4 days
  - HC 324mm 36 weeks + 5 days
  - AC 308mm 34 weeks + 6 days
  - FL 66mm 34 weeks + 1 days
- Placenta is fundus anterior in upper uterine segment and shows grade III maturity changes.
- No gross congenital anomaly is seen.
- Amniotic fluid is adequate. AFI = 19 cm.
- EFW is approximately 2562gms (± 374gms).
- EDD is approximately 01/04/2025.
- No evidence of cord is seen around fetal neck at the time of examination.

### **COLOUR & PULSED DOPPLER STUDY**

- The umbilical artery flow is within normal limits.
- The flow in the umbilical vein is normal. There is no pulsatility.
- The foetal MCA flow is within normal limits.
- The cerebro-placenta ratio is within normal limits (>1).
- The flow in the foetal aorta and IVC show normal flow and spectral pattern.
- Ductus venosus shows normal wave form.



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**COLOUR & PULSED DOPPLER STUDY**

	<b>MCA</b>	<b>UA</b>	<b>RT UT</b>	<b>LT UT</b>
<b>PS</b>	63m/ sec	38cm/sec	95cm/sec	79cm/sec
<b>ED</b>	11cm/sec	15cm/sec	38cm/sec	26cm/sec
<b>S/D</b>	5.6	2.4	2.4	2.9
<b>RI</b>	0.8	0.6	0.6	0.6
<b>PI</b>	1.8	0.8	0.31	1.2

**OPINION:**

- **SINGLE LIVE FOETUS OF 35 WEEKS + 4 DAYS (± 2.3 WEEKS) WITH NORMAL COLOUR AND PULSED DOPPLER STUDY AS DESCRIBED ABOVE.**

Note:-- I **Dr. Atima Srivastava**, declare that while conducting ultrasound study of **Mrs. Punam Rawat** I have neither detected nor disclosed the sex of her foetus to anybody in any manner. All congenital anomalies can't be excluded on ultrasound.

**Clinical correlation is necessary.**

**[DR. ATIMA SRIVASTAVA]**  
**[MBBS, DNB (OBSTETRICS AND GYNAECOLOGY)]**  
**[PDCC MATERNAL AND FETAL MEDICINE (SGPGIMS LUCKNOW)]**

Transcribed By: Purvi

CHARAK

\*\*\* End Of Report \*\*\*

