

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003 Phone : 0522-4062223, 9305548277, 8400888844 9415577933, 9336154100, Tollfree No.: 8688360360 E-mail : charak1984@gmail.com

CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name	: Ms.ARTI SINGH	Visit No	: CHA250039491
Age/Gender	: 26 Y/F	Registration ON	: 05/Mar/2025 09:46AM
Lab No	: 10136786	Sample Collected ON	: 05/Mar/2025 09:46AM
Referred By	: Dr.VEERANGANA AWANTIKA BAI	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 05/Mar/2025 10:35AM

ULTRASOUND STUDY OF OBSTETRICS

- LMP is 28/08/2024 EGA by LMP is 33 weeks + 5 days.
- Single live intrauterine foetus is seen in longitudinal lie cephalic presentation.
- Foetal heart rate is 148/min.
- Foetal gestation age is

РR

- BPD 84 mm 34 weeks + 1 days
- HC 321mm 36weeks + 2 days
- AC 282mm 32 weeks + 2 days [<1%]
- FL 69mm 35 weeks + 6 days
- Placenta is anterior in upper uterine segment and shows grade III maturity changes.
- No gross congenital anomaly is seen.
- Amniotic fluid is adequate. AFI = 16 cm.
- EFW is approximately 2312gms (± 338gms).
- EDD is approximately 11/04/2025.
- Two loops of cord are 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

	<u>MCA</u>	<u>UA</u>	<u>RT UT</u>	LT UT
<u>PS</u>	62cm/ sec	60cm/sec	58cm/sec	104cm/sec
ED	15cm/sec	27cm/sec	34c <mark>m/sec</mark>	65cm/sec
<u>S/D</u>	3.9	2.1	1.7	<mark>1</mark> .6
<u>RI</u>	0.7	0.5	0.4	<mark>0</mark> .3
<u>PI</u>	1.4	0.7	0.5	0.4

OPINION:

- SINGLE LIVE FOETUS OF 34 WEEKS + 5 DAYS (± 2.3 WEEKS) WITH NORMAL COLOUR AND PULSED DOPPLER STUDY AS DESCRIBED ABOVE.
- TWO LOOPS OF CORD AROUND FETAL NECK AT THE TIME OF EXAMINATION WITH [<1%] AC.

Note:-- I **Dr. Atima Srivastava**, declare that while conducting ultrasound study of **Mrs. Arti Singh** 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

*** End Of Report ***

