

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003 Phone: 0522-4062223, 9305548277, 8400888844

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

Patient Name : Ms. NAGMA Visit No : CHA250044457

 Age/Gender
 : 28 Y/F
 Registration ON
 : 12/Mar/2025 10: 47AM

 Lab No
 : 10141752
 Sample Collected ON
 : 12/Mar/2025 10: 47AM

Referred By : Dr. UZMA MUBASHSHIR Sample Received ON :

Refer Lab/Hosp : CHARAK NA Report Generated ON : 12/Mar/2025 11:50AM

## **ULTRASOUND STUDY OF OBSTETRICS**

- LMP is 08/07/2024 EGA by LMP is 35 weeks + 2 days.
- Single live intrauterine foetus is seen in longitudinal lie cephalic presentation at the time of scan.
- Foetal heart rate is 149/min.
- Foetal gestation age is
  - BPD 85 mm 34 weeks + 4 days
  - HC 319 mm 36 weeks + 0 day
  - AC 306 mm 34 weeks + 4 days.
  - FL 65 mm 33 weeks + 5 days
- Placenta is anterior in upper uterine segment and shows grade-II maturity changes.
- Amniotic fluid is adequate. AFI = 10 cm.
- EFW is approximately 2445 gms (± 357 gms).
- EDD is approximately 18/04/2025.
- No evidence of cord is seen around fetal neck at the time of examination.

## **COLOUR & PULSED DOPPLER STUDY**

- The flow in maternal uterine artery is normal.
- 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).
- Ductus venosus shows normal wave form.





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## **COLOUR & PULSED DOPPLER STUDY**

	<u>MCA</u>	<u>UA</u>	RT UT	<u>LT UT</u>
<u>PS</u>	52cm/ sec	35cm/sec	40cm/sec	50cm/sec
<u>ED</u>	14cm/sec	17cm/sec	21cm/sec	28cm/sec
<u>S/D</u>	3.6	1.9	1.8	1.7
<u>RI</u>	0.7	0.5	0.4	0.4
<u>PI</u>	1.3	0.7	0.6	0.6

## **OPINION:**

- SINGLE LIVE FOETUS OF 34 WEEKS + 5 DAYS (± 2.3 WEEKS).
- NORMAL COLOUR AND PULSED DOPPLER STUDY AS DESCRIBED ABOVE.

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

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

