

Patient Name	: Ms.CHANDNI MAURYA	Visit No	: CHA250045028
Age/Gender	: 26 Y/F	Registration ON	: 13/Mar/2025 10:06AM
Lab No	: 10142323	Sample Collected ON	: 13/Mar/2025 10:06AM
Referred By	: Dr.ESIC HOSPITAL LUCKNOW	Sample Received ON	:
Refer Lab/Hosp	: ESIC HOSPITAL LUCKNOW	Report Generated ON	: 13/Mar/2025 10:40AM

ULTRASOUND STUDY OF OBSTETRICS

- LMP is 27/07/2024 EGA by LMP is 33 weeks + 3 days.
- Single live intrauterine foetus is seen in longitudinal lie cephalic presentation.
- Foetal heart rate is 136/min.
- Foetal gestation age is
 - BPD 75 mm 30 weeks + 1 days
 - HC 285mm 31 weeks + 2 days
 - AC 253mm 29 weeks + 4 days
 - FL 66 mm 34 weeks + 2 days
- Placenta is posterior in upper uterine segment and shows grade III maturity changes.
- No gross congenital anomaly is seen.
- Amniotic fluid is adequate. AFI = 13cm.
- EFW is approximately 1741gms (\pm 254gms).
- EDD is approximately 13/05/2025.
- No evidence of cord is seen around fetal neck at the time of examination.
- **Fetal age parameters corresponding to 31 weeks and 2 days. There is discrepancy of 2 weeks from the date of L.M.P - ? Wrong dates.**

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.



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- Ductus venosus shows normal wave form.

COLOUR & PULSED DOPPLER STUDY

	MCA	UA	RT UT	LT UT
PS	52cm/ sec	34cm/sec	85cm/sec	56cm/sec
ED	15cm/sec	15cm/sec	45cm/sec	26cm/sec
S/D	4	2.4	1.8	2
RI	0.9	0.5	0.4	0.7
PI	1.9	0.8	0.6	0.5

OPINION:

- **SINGLE LIVE FOETUS OF 31 WEEKS + 2 DAYS (± 2.3 WEEKS) WITH NORMAL COLOUR AND PULSED DOPPLER STUDY AS DESCRIBED ABOVE.**
- **THERE IS DISCREPANCY OF FETAL AGE PARAMETERS OF 2 WEEKS FROM THE DATE OF L.M.P ----? WRONG DATES.**

Note:-- I Dr. Atima Srivastava, declare that while conducting ultrasound study of Mrs. Cbandni, 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]
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Transcribed By: Purvi

*** End Of Report ***

