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| --- | --- | --- | --- | --- | --- |
| **Patient Name** | **:** | **SAVITA MANE** | **Age/Sex** | **:** | **22 Yrs/F** |
| **Ref. By** | **:** | **Dr. MANE AMIT** | **Date** | **:** | **23-Mar-2019** |

**OBSTETRIC USG (ANOMALY SCAN)**

**LMP: 15/11/2018 GA BY LMP: 34 WEEKS 2 DAYS EDD BY LMP: 22/08/2019**

**GA BY USG: 32 WEEKS 4 DAYS EDD BY USG: 03/09/2019**

* A single live intrauterine fetus is noted in **LONGITUDINAL LIE AND CEPHALIC PRESENTATION** at the time of scan.
* **Fetal cardiac activity is seen. FHR=147 b /min.**
* **Fetal movements appear normal.**
* **Placenta is FUNDO-POSTERIOR, grade I maturity, not low- lying.**
* Amniotic fluid is adequate. **AFI- 17 cm.**
* Internal Os is closed**. Cervical length – 2.9 cm.**

**FETAL GESTATIONAL PARAMETERS ARE:-**

**BPD = 8.30 cms (33 weeks 3 days) HC = 30.94 cms (34 weeks 4 days)**

**AC = 27.55 cms (31 weeks 4 days) FL = 6.41 cms (33 weeks day)**

**HL = 5.32 cms (31 Weeks 0 days)**

**APPROX. FETAL WEIGHT - 1990 + 291gms.**

**Foetal calvarium, brain, face, spine, 4 chambered heart, stomach bubble, both kidneys, urinary bladder, cord insertion, three vessel cord and long bones of all four limbs are visualized and appear normal. No obvious congenital anomalies seen in present study.**

**Both uterine arteries show normal high diastolic flow.**

**IMPRESSION :**

* **A single live intrauterine fetus in LONGITUDINAL LIE AND CEPHALIC PRESENTATION at the time of scan with average gestational age of 32 weeks 4 days.**
* **No obvious congenital anomalies seen at the present age of gestation. However, not all congenital anomalies could be detected due to advanced gestational age.**

**Suggest follow up with clinical correlation.**

***(Report sent with due compliments to Dr)***

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| **DECLARATION OF PREGNANT WOMAN:-**  I, (**MRS.** **RESHMA KHALIFA**) declare that by undergoing ultrasonography / image scanning etc. I do not want to know the sex of my fetus.  Signature of pregnant woman | |
| **Depending on the period of the gestation, fetal position, amount of liquor and maternal abdominal wall thickness, all fetal anomalies may not be seen on USG.**  **Fetal ECHO is not part of this report.**  **During the study I have neither declared nor disclosed the sex of her fetus to anybody in any manner.** | **DR. SEEMAB BANADAR**  **MD (RADIOLOGY)**  **(CONSULTANT RADIOLOGIST)** |