**Name: Mrs. Date : -2-2021**

**Age & Sex : Y/F Ref. by.Dr:**

# **ANTENATAL SCANNING**

***LMP: LMP Gestation:***

Single live active fetus in presentation with spine towards left Anterior.

## Placenta - Anterior upper segment grade I maturity.

***LIQUOR : ADEQUATE .***

|  |  |  |
| --- | --- | --- |
| BPD |  mm |  weeks days |
| HC |  mm |  weeks days  |
| AC |  mm |  weeks days |
| FL |  mm |  weeks days |
| **FETAL WEIGHT** |  |  **gms** |
| **FHR** |  |  **Bpm.** |

Gestation age as per fetal parameter is **: weeks days.**

**USG EDD:**

Fetal Skull, spine, nasal bones, limbs and face upto the extent visualized are normal.

 **[[[**

***No obvious fetal abnormality seen.***

Cervical length measures cm.

**IMPRESSION:**

## Single live intrauterine pregnancy of weeks days +/- 1 week gestation in presentation.

##

 **Suggested TIFFA scan**

**DECLARATION OF DOCTOR/ PERSON CONDUCT ULTRASONOGRAPHY/ IMAGE SCANNING**

I declare that while conducting sonography/ image scanning on I have neither detected nor disclosed the sex of the foetus to anybody in any manner.

All Congenital anomalies Cannot be DETECTED BY Ultrasonography

**Dr.Pavankumar Dr.K.Mohan**

**Radiologist Radiologist**