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| --- | --- | --- | --- |
| **Patient Name:**  | **Mrs.** | **Age:**  |  **Y/F** |
| **Ref By** | **Dr** | **Visit Date:** |  |

**DETAILED FETAL ECHO**

Period of gestation (calculated from LMP) : Weeks and days

FHR: bpm

Cardiac Rhythm: Normal.

Cardiac situs: Normal

Cardiac axis: Normal

Cardiac size: Normal

4 Chamber: Normal

Veno atrial concordance: seen and normal

Atrio-Ventricular concordance: seen and normal

Ventriculo- arterial concordance: seen and normal

Systemic venous drainage: Normal

Pulmonary venous drainage: Normal (2 pulmonary veins seen draining into left atrium)

**Cardiac biometry**

Mitral valve: mm Ascending Aorta: mm

Tricuspid Valve: mm Main Pulmonray Artery: mm

Aortic Valve: mm Arterial Duct: mm

Pulmonary Valve: mm Aortic Isthmus: mm

PFO: mm

**Ventricular function:**

Right ventricle at systole: mm Left ventricle at systole: mm

Right ventricle at diastole: mm Left ventricle at diastole: mm

**Cardiac doppler study**

Flow across Mitral valve: Non aliasing non turbulent flow, No regurgitation

Peak E: 0. m/s

Peak A: 0. m/s

Ratio: 0.

Flow across Tricuspid valve: Non aliasing non turbulent flow, No regurgitation

Peak E: 0. m/s

Peak A: 0. m/s

Ratio: 0.

Flow across Aortic valve: Non aliasing non turbulent flow

LVOT Vmax: 0. m/s

Flow across pulmonary valve: Non aliasing non turbulent flow

RVOT Vmax: 0. m/s

**IMPRESSION:**

* **NORMAL FETAL ECHO STUDY.**

**Please note:**

All abnormalities and genetic syndromes cannot be ruled out by ultrasound examination.

Ultrasound examination has its own limitations. Some abnormalities evolve as the gestation advances. The detection rate of abnormality depends on gestational age of the fetus, fetal position, tissue penetration of sound waves, and patient’s body habitus.

**Declaration:**

I Dr. declare that while conducting ultrasonography on this woman, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

**Dr.**

**MBBS.DMRD.DNB**

**Consultant Radiologist**