Sample Collection date 1 2 0 4 1 6 2 3 Sample Collection time::  Sample Collection from: V2 2 10 4 10 11 C Sample Collected By::	am/pm	Requisition form for Prenatal Screening					
Patient Details:  Name 1996 POOG  Address #199 Sec-40 A CHD  Pincode:  City CHANDIGAR State UT  Benail ID:  DOB PINOV 999 Weight 62 kg Height & 6 & m  Ethnicity: South Asian East Asian Caucasian African Other Smoking status Requesters Information:	Ultrasound History First trimester ultrasound de USG date USO 412 CRL:52-6_mm NT:1	USG DCD DCD CRL	pregnancy ultras- date DDM A MCDA Twin A	MCMA Twin B	Second trimester USG date BPD FL HC	ultrasound details	
Name of Hospital/ Aut   Debd   Alace   TV   O   Dotted of to tTD C		Continuescentral	TEST REQU	IESTEN		1	
Collection Centre  City  Name of Ordering Physician  Name of Sonographer  FMF code (if available)  Pregnancy Details:  LMP Q 0 M 2 0 2 3  LMP certainty: Regular  Unknown  Obstetric History:	1. Combined First Trimester Screening 2. First Trimester Screening + Pre-eclampsia (with PIGF) 3. First Trimester Screening + Pre-eclampsia (with PIGF) 4. Early Biochemistry 5. Only Biochemistry values 6. Biochemistry values 6. Biochemistry Only 7. First Trimester Enhanced  STS cannot be performed in twin pregnar.  9. Triple marker test 10. Quadruple marker test 11. Quadruple- Integrated Screening 1. NT+ Free β-hCG + PAPP-A 2. NT+ Free β-hCG + PAPP-A 3. NT+ Free β-hCG + PAPP-A 4. Free β-hCG + PAPP-A 5. Free β-hCG + PAPP-A 7. Free β-hCG + PAPP-A 9. Free β-hCG + PAPP-A 10. Fre			10. Quadruple marker test  11. Quadruple- Integrated Screening  1. NT+ Free β-hCG + PAPP-A  2. NT+ Free β-hCG + PAPP-A  3. NT+ Free β-hCG + PAPP-A + AFP + PIGF + MAP + UAD  4. Free β-hCG + PAPP-A  4. Free β-hCG + PAPP-A  5. Free β-hCG + PAPP-A + AFP + PIGF + MAP + UAD  9. Free β-hCG + AFP + UE3 + Inhibin A  10. Free β-hCG + AFP + UE3 + Inhibin A			
Parity (pregnancy at ≥24 weeks) Gravida Abortion Live  Details of last pregnancy at ≥ 24 weeks  PE: Yes No Date of delivery D M M Y Y Y Y  GA at delivery: Weeks Days				rity			
Present pregnancy: Singleton Twin Vanishing Twin	Markers	, Lef	t arm	Rig	ht arm		
Type of Conception: Natural Assisted Ovulation drugs  If assisted reproduction, kindly mention the type of procedure  Extraction date DDMMYYYYY  Transfer date DDMMYYYYYY	Blood pressure (mm/Hg) First reading Second reading	Systolic BP	Diastolic BP	Systolic BP	Diastolic BP	MAP	
Egg source: Self/ donor. If donor, then donor's age/DOB  Diabetes: Yes No If Yes, Type: Gestational Type 1 Type 2  Treatment method: No treatment / Insulin / Metformin / Insulin+Metformin / Diet Control  If on Insulin, Insulin start date: DDMMYYYYY  Patient on hCG: Yes No If yes, latest date of hCG intake	Family History of Pre-eclamp Chronic Hypertension: Uterine Artery pulsative inde: Previous small baby: Yos No	Not known Not known X (UAD-PI): Right F	No No	Medic	cation Unti		
Bleeding/Spotting in last two weeks: Yes HG	Thalassemia Screening	Thalassemia (H	HPLC) Iron Therapy	/ - Yes/No (Kindly send	CBC/DOC, Blood trai	nsfusion History)	
Previous pregnancy History:  History of Down Syndrome    Yes   No	Laboratory. If sample found unfit  Signature of the Patient:	for processing, the healt	thcare professional wil	Signature of Orderin	ttach relevant copy(s) of d	cation at our lagnostic report(s).	

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For Lilac	Insights
PAPP-A:	
β-hCG:	
AFP:	
PIGF:	
uE3:	
Inhibin A:	
sFlt-1:	

LIEVTRF1021

NAME	:	MRS. POOJA
AGE / GENDER	:	28Y / FEMALE
INVESTIGATION	:	USG OBS. (NT/ NB Scan)
DATE	:	18-Apr-23

LMP : 25/01/2023 POG : 11 weeks 6days EDD (LMP) : 01/11/2023 EDD (USG) : 31/10/2023

## Observations:

Gravid uterus shows a single regular gestational sac. Fetal pole is seen in it.
Cardiac activity is seen at present.
HR = 167bpm

Gestational age:

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CRL	52.6	mm	12	weeks	0	days		

NT is 1.4 mm.

Nasal bone appears normal.

Ductus venosus shows normal spectral wave form with no reversal of a wave.

No subchorionic bleed noted

Internal os is closed.

No obvious adnexal mass or free fluid seen in pelvis at present

## Impression:

Single Live I/Ut. Gestation corresponding to MGA of 12 Weeks 0 Day.

Advised: - Follow up U/s to see interval growth & to R/o CMF.

I, Dr. Geetika Jain declare that while conducting Ultrasonography/image scanning on Mrs. POOJA, I have neither detected nor disclosed the sex of her foetus to anybody in any manner. However, 2-5% congenital malformations can be missed on ultrasound.

Please correlate clinically.

DR. GEETIKA JAIN (Consultant Radiologist) Regd. No. 37806

Disclaimer: It is an online interpretation of medical imaging based on clinical data. All modern machines/ procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose. In case of any discrepancy due to typing error or machinery error please get it rectified immediately.