SAMPLE FIRST TRIMESTER ULTRASOUND REPORT

(This is the report you would use if you send the same ultrasound report to both the Laboratory and to the LMC)

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Exam Date:						
Referrer						
(name and address)						
Delieut					1	
Patient:						
DOB:						
NHI:						
INDICATION	Nicola al tuana di casa a		Fau finat tuina			
INDICATION:	Nuchal translucency scan. For first trimester combined					
History	screening.					
History:						
Maternal age:	31 years					
Last period:	15 May 2010					
	T40 5 1 2044 500 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
EDD by ultrasound:	13 February 2011			19 February 2010		
Gestational age:	13 weeks + 1 day	Gestational age by dates 2 W + 2 D				
First Trimester Ultrasou		1.114				
Transabdominal US with			ound view:	Good	 	
Fetal heart action present		Freque	ency	150	bpm	
Crown-rump length (CRL)				73.4	mm	
Biparietal diameter (BPD)				23.5	mm	
Nuchal translucency (NT)				1.90	mm	
Nasal bone (tick one or leave blank)		Not looked for √				
		Present				
			1 100011			
			Absent			
			Absent			
			NI (II (
		Not able to be visualised for				
The state of the s			technical reasons			
Fatal anatomy						
Fetal anatomy:						
Skull/brain appears normal, heart not examined, spine appears normal, abdomen						
7000 Annual Control of the Control o	n visible, bladder visible, hands both visible, feet both visible. Anterior					
Placenta:						
Amniotic fluid:	Normal					
Maternal Structures:						
	normal marphalage	,				
Right ovary:	normal morphology normal morphology					
Left ovary:	normal morphology	<u>/</u>				
Summary:						
Normal appearances. First trimester combined screening is planned, therefore risk						
assessment has not been performed. Suggest next scan at 18-20 weeks.						
13 weeks 1 day +/- 7 days by scan today.						
Name of Specialist:						
Sonographer Initials:						
January Interest of						