



# SOUND DIAGNOSTICS OF NORTHWEST FLORIDA

1414 Clayton Road  
Chipley, Florida 32428  
850-258-1580

## Early Obstetrical (1<sup>st</sup> Trimester) Ultrasound Report

Name: \_\_\_\_\_ MR# \_\_\_\_\_ Exam Date.: \_\_\_\_\_  
Doctor \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ LMP: \_\_\_\_\_ G: \_\_\_\_\_ P: \_\_\_\_\_ A: \_\_\_\_\_  
Bleeding: Y / N Diabetes: Y / N Hypertension: Y / N Fetal Movement: Y / N Previous Scan: \_\_\_\_\_  
Indication: \_\_\_\_\_

### Ultrasound Findings

#### Descriptive Data: Fetal Description

#### Placenta and Amniotic Fluid

Number: \_\_\_\_\_

\*\*Placenta Location: Anterior / Posterior / Fundal / Previa

Presentation: \_\_\_\_\_

Uterine Abnormality: Yes / No. Describe: \_\_\_\_\_

Adnexal Mass: Yes / No. Describe: \_\_\_\_\_

Fetal Abnormal Anatomy Seen or Suspected: Yes No

Describe: \_\_\_\_\_

### MEASUREMENTS:

Yolk Sac: Yes / No

Gestational Sac: L x W x H ÷ 3 = average diameter \_\_\_\_\_ cm. = \_\_\_\_\_ wks.

CRL: \_\_\_\_\_ cm. = \_\_\_\_\_ wks.

Fetal Heart Rate \_\_\_\_\_ bpm.

Average Ultrasound Dates: \_\_\_\_\_ weeks, (+/- \_\_\_\_\_ weeks)

Estimated Fetal Weight: \_\_\_\_\_ grams, (+/- \_\_\_\_\_ grams)

Ultrasound EDC: \_\_\_\_\_ EDC By LMP: \_\_\_\_\_

Fetal Spine to Maternal \_\_\_\_\_

