UNIVERSITY OF WASHINGTON MEDICAL CENTER
PRELIMINARY OB ULTRASOUND REPORT

Patient Name: **MRN:** **Exam date:**
DOB: **Sonographer:**

Indication:

EDD **EGA** **wks**

FETUS		**PLACENTA**		**AMNIOTIC FLUID**		**MATERNAL STRUCTURES**	
Number		Location		MVP	cm	Cervical length	cm
Position		Previa		AFI	cm	UT	
FHR	bpm	Cord Origin		Q1	Q2	Rt Adnx	
		3VC		Q3	Q4	Lt Adnx	

BIOMETRY			**DOPPLERS**		
BPD	cm	wks	UA S/D		
HC	cm	wks	MCA	PS	MoM
AC	cm	wks			
FL	cm	wks	**BPP**		
HL	cm	wks	Breathing ☐	Tone ☐	
COMPOSITE AGE		wks	Movement ☐	Fluid ☐	
EFW	gms	%			

ANATOMY

LV	cm	Long Spine	☐	Situs	☐	Rt femur	☐
CP	☐	C Spine	☐	4CH	☐	Rt T/F	☐
Falx	☐	T Spine	☐	LVOT	☐	Rt foot	☐
CSP	☐	L Spine	☐	RVOT	☐	Rt humerus	☐
CB	cm	S Spine	☐	3VV	☐	Rt R/U	☐
CM	cm	CI	☐	3VT	☐	Rt hand	☐
Neck	cm	Stomach	☐	AA	☐	Lt femur	☐
Vermis	☐	Rt Kidney	☐	DA	☐	Lt T/F	☐
N/L	☐	Lt Kidney	☐	SVC/IVC	☐	Lt foot	☐
Profile	☐	Renal Arts	☐	Rt Lung	☐	Lt humerus	☐
NB	cm	Bladder	☐	Lt Lung	☐	Lt R/U	☐
Orbits	☐	Genitalia	☐	Diaphragm	☐	Lt hand	☐
Maxilla	☐						
Mandible	☐						

FIRST TRIMESTER

Cardiac activiity: present ☐	absent ☐			GS Size	mm	mm	mm
FHR	bpm			MSD	mm	+30/7=	wks
CRL	mm	wks		Yolk Sac	mm		
NT	mm						
Likelihood Ratio:							
Sono/FMF#							
Choroid	☐	Bladder	☐				
Stomach	☐	Upper Ext	☐				
Cord Insert	☐	Lower Ext	☐				