



PKR JAIN HEALTHCARE INSTITUTE NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

A PIONEER DIAGNOSTIC CENTRE

■ 0171-2532620, 8222896961 **■** pkrjainhealthcare@gmail.com

NAME : Mrs. SEEMA

AGE/ GENDER : 34 YRS/FEMALE **PATIENT ID** : 1625329

COLLECTED BY : 122409250017 REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 25/Sep/2024 04:11 PM BARCODE NO. : 12504930 **COLLECTION DATE** : 25/Sep/2024 04:16PM CLIENT CODE. : P.K.R JAIN HEALTHCARE INSTITUTE REPORTING DATE : 26/Sep/2024 02:58PM

CLIENT ADDRESS : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

Value Unit **Biological Reference interval** Test Name

ENDOCRINOLOGY DUAL MARKER MATERNAL SCREENING

DUAL MARKER TEST

PATEINT SPECIFICATIONS

DATE OF BIRTH 1989-12-26

MATERNAL AGE 35.27 YEARS WEIGHT 68 Kg

ETHNIC ORIGIN **ASIAN ASIAN**

H/O IVF **ABSENT** H/O SMOKING **ABSENT** H/O INSULIN DEPENDANT DIABETES ABSENT H/O TRISOMY 21 SCREENING **ABSENT**

ULTRA SOUND SCAN DETAILS

2024-09-23 DATE OF ULTRASOUND

by ULTRASOUND SCAN

ULTRASOUND SCAN DETAILS METHOD FOR GESTATION AGE ESTIMATION by ULTRASOUND SCAN

FOETUS (NOS) by ULTRASOUND SCAN

GA ON THE DAY OF SAMPLE COLLECTION 12.6 WFFKS

by ULTRASOUND SCAN 38 - 84 CROWN RUMP LENGTH (CRL) 62 mm

by ULTRASOUND SCAN **GESTATIONAL AGE BY CRL** 12.6

by ULTRASOUND SCAN

NUCHAL TRANSLUCENCY (NT) 0.9 0.1 - 6.0mm by ULTRASOUND SCAN

NUCHAL TRANSLUCENCY (NT) MOM 0.56 by ULTRASOUND SCAN

DUAL MARKER - BIOCHEMICAL MARKERS

PREGNANCY ASSOCIATED PLASMA 3066.47 mIU/L



CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY)



440 Dated 17.5.2012 u/s 80 G OF INCOME TAX ACT. PAN NO. AAAAP1600. REPORT ATTRACTS THE CONDITIONS PRINTED OVERLEAF (P.T.O.)





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: P.K.R JAIN HEALTHCARE INSTITUTE

Test Name	Value	Unit	Biological Reference interval
PROTEIN A (PAPP-A) by CLIA (CHEMILUMINESCENCE IMMUNOASSAY) BETA HCG - FREE: SERUM	32.8	ng/mL	
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY) MULTIPLE OF MEDIAN (MOM) VALUES			
PAPP-A MOM by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)	0.69		
BETA HCG - FREE MOM by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)	0.78		
TRISOMY 21 SCREENING (DOWNS SYNDROME) RISK A	ASSESSMENT		
TRISOMY 21 SCREENING RISK RESULT by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)	NEGATIVE (-ve)		NEGATIVE (-ve)
TRISOMY 21 AGE RISK by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)	1:403 NEGATIVE (-ve)		
TRISOMY 21 BIOCHEMICAL RISK by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)	1:8221 NEGATIVE (-ve)		RISK CUT OFF 1:150
TRISOMY 21 COMBINED RISK (BIOCHEMICAL + NT)	< 1:10000 NEGATIVE (-v	e)	RISK CUT OFF 1:150

by CLIA (CHEMILUMINESCENCE IMMUNOASSAY) TRISOMY 18 SCREENING RISK ASSESSMENT

TRISOMY 18 AGE RISK **NEGATIVE** (-ve)

by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)

RISK CUT OFF 1:300 < 1:10000 NEGATIVE (-ve) TRISOMY 13/18 SCREENING RISK

by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)

INTERPRETATION:

1.Double marker test (maternal serum screen – first trimester) is a prenatal test to screen for Trisomy 21 (down's syndrome) and Trisomy 13/18 during gestational period 8 – 13 weeks.

2.Besides the biochemical markers tested - maternal pregnancy associated plasma protein a (papp-a) & maternal free beta hcg, the risk is calculated combining usg measurement of nuchat translucency (nt), gestational age at the time of sample with other maternal factors as age, weight, h/o diabetes, smoking, race, twin pregnancies, use of assissted reproductive technologies (IVF).



DR.VINAY CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

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Test Name Value Unit **Biological Reference interval**

NOTE:

1. This is only screening test based purely on statistical analysis which is further based on the data submitted; hence the correctness of data is vital for risk analysis

2.A negative screen indicates a lower probability of having a baby with trisomy 21 ,trisomy 18 and neural tube defects, but does not completely exclude the possibility.

3.A positive screen on the contrary only indicates a higher probability of having a baby with trisomy 21, trisomy 18 and neural tube defects, and needs confirmation by cytogenetic studies and/or level ii scan.

4. The detection rate by this test is about 60%, with 5% false positive rate when assessment is done for only biochemical parameters and increase to 85 % with 5% false positive rate when both biochemical parameters and nt are combined for analysis.

5. Correlation with patient history, family history and detailed USG scan is required to decide further course of action in cases who have high risk test its labely applicable to the state of the s

statistically calculated by this test.

End Of Report



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Weight: 68.00 Kg Race: Asian Birthdate: Twins: No Sender: Age of EDC: 35.27 Year GA calc method: CRL Robinson Sample information Send time: 2024-09-26 Sample NO:: 12504930 Scan Date: 2024-09-23 Lab: Sample Date: 2024-09-25 GGA: 12+6 BPD: - mm CRL length: 62.00 mm NT length: 0.90 mm Assay NO. Item abbr Result Unit MOM Reference range 1 free-β-HCG 32.80 ng/ml 0.78 2 PAPP-A 3066.47 mlU/L 0.69 3 NT 0.90 mm 0.56 3k calculate Age risk: 1:403 Parameter: Trisomy21 Risk: 1:8221 Cut Off: (<1:150) Screaning Result: Negative Parameter: Trisomy18/13 Risk: 1:68258 Risk: 1:68258 Cut Off: (<1:300) Risk above cut off You risk 1:>>10000	Name: 9	SEEMA	Co	ontact:			Gender: Female
Race: Asian Twins: No GA calc method: CRL Robinson			Birthdate: 1989-12-26		Age of EDC: 35.27 Year		
LMP Day: Sender: Sample information Sample NO.: 12504930 Scan Date: 2024-09-23 Lab: Sample Date: 2024-09-25 GA: 12+6 BPD: mm CRL length: 62.00 mm NT length: 0.90 mm Assay NO. Item abbr Result Unit MOM Reference range 1 free-β-HCG 32.80 ng/ml 0.78 0.78 2 PAPP-A 3066.47 mIU/L 0.69 3 NT 0.90 mm 0.56 sk calculate Age risk: 1:403 Parameter: Trisomy21 Risk: 1:8221 Total Cut Off: (<1:150)		•					
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Lab: Sample Date: 2024-09-25 GA: 12+6 BPD: - mm	-						
NO. Item abbr Result Unit MOM Reference range	Send time: 2	2024-09-26	Sample NO.: 12504930		Scan Date:	2024-09-23	
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Screening Result: Negative >5000					-		Y ou risk 1: >10000
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Advice: Diagnostic results with less risk

Parameter:

Doctor:

Note: *The basic information on the basis of Down's risk assessment in this report is provided at the time of your onsite. When you get this report, please first check whether your relevant information is correct. If there is any discrepancy, please contact your doctor in time, so as to feedback us the correct information and documents, then obtain the correct report.

*The high risk and borderline risk of trisomy 21 or trisomy 18 requires further interventional prenatal diagnosis (from fetuses

*The high risk and borderline risk of trisomy 21 or trisomy 18 requires further interventional prenatal diagnosis (from fetuses such as villus, amniotic fluid, cord blood, etc.); high risk of neural tube defect (NTD), please go to ultrasound prenatal diagnosis qualified hospitals use ultrasound to exclude.

Cut Off:

Print date: 2024-09-26 14:55:36

Screening Result:

^{*}The risk of NTD is only calculated at 14-22 weeks.

^{*}The screening result with low risk only shows that the chance of this kind of congenital abnormality in your fetus is less, and the possibility of this kind of abnormality or other abnormalities cannot be completely ruled out. Please consult a doctor in time after you get the report, and the doctor will follow your Risks and other conditions (whether you are older than 35 years old, whether you have had more than one child with other deformities, or have other diseases such as tumors) are comprehensively considered to suggest whether you need to take further examination to confirm the diagnosis.

^{**}This report only can be reference and assistant for doctor, cannot directly give conclusion by this **