P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

A PIONEER DIAGNOSTIC CENTRE

0171-2532620, 8222896961 pkrjainhealthcare@gmail.com

TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.

NAME	**: Mrs. BINDU**		
AGE/ GENDER	: 27 YRS/FEMALE	**PATIENT ID**	: 1361907
COLLECTED BY	:	**REG. NO./LAB NO.**	**: 122410210009**
REFERRED BY	:	**REGISTRATION DATE**	: 21/Oct/2024 10:16 AM
BARCODE NO.	: 12505265	**COLLECTION DATE**	: 21/Oct/2024 10:21AM
CLIENT CODE.	: P.K.R JAIN HEALTHCARE INSTITUTE	**REPORTING DATE**	: 22/Oct/2024 11:42AM
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA		

ENDOCRINOLOGY

QUADRUPLE MARKER MATERNAL SCREENING

Test Name	Value	Unit	Biological Reference interval
QUADRUPLE MARKER			
PATEINT SPECIFICATIONS			
DATE OF BIRTH	1-10-1996		
MATERNAL AGE	28.4	YEARS	
WEIGHT	66	Kg	
DATE OF LMP	07-06-2024		
ETHNIC ORIGIN	ASIAN		ASIAN
H/O IVF	ABSENT		
H/O INSULIN DEPENDANT DIABETES	ABSENT		
H/O SMOKING	ABSENT		
H/O TRISOMY 21 SCREENING	ABSENT		
ULTRA SOUND SCAN DETAILS			
DATE OF ULTRASOUND *by ULTRASOUND SCAN*	19-10-2024		
METHOD FOR GESTATION AGE ESTIMATION *by ULTRASOUND SCAN*	ULTRASOUND SCAN DETAILS		
FOETUS (NOS) *by ULTRASOUND SCAN*	1		
GA ON THE DAY OF SAMPLE COLLECTION *by ULTRASOUND SCAN*	19.6	WEEKS	
BIPARIETAL DIAMETER (BPD) *by ULTRASOUND SCAN*	45.8	mm	26 - 52
GESTATIONAL AGE BY BPD *by ULTRASOUND SCAN*	20.1		
QUADRUPLE TEST - BIOCHEMICAL MARKERS			
ALPHA FETO PROTEIN (AFP) PRENATAL SCREENING: SERUM *by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)*	99.1	ng/mL	
ESTRIOL (uE3) UNCONJUGATED	3.37	ng/mL	

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NOT VALID FOR MEDICO LEGAL PURPOSE

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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Test Name	Value	Unit	Biological Reference interval
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
BETA HCG	15151	mIU/mL	
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
INHIBIN A	247.6	pg/mL	
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
MULTIPLE OF MEDIAN (MOM) VALUES			
AFP MOM	1.76		
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
ESTRIOL (uE3) MOM	1.65		
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
BETA HCG MOM	0.89		
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
INHIBIN A MOM	1.55		
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
TRISOMY 21 SCREENING (DOWNS SYNDROME) RISK ASSESSMENT			
TRISOMY 21 SCREENING RISK RESULT	NEGATIVE (-ve)		NEGATIVE (-ve)
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
TRISOMY 21 AGE RISK	1:1125 NEGATIVE (-ve)		
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
TRISOMY 21 BIOCHEMICAL RISK	1:7122 NEGATIVE (-ve)		RISK CUT OFF 1:270
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
TRISOMY 18 SCREENING RISK ASSESSMENT			
TRISOMY 18 AGE RISK	NEGATIVE (-ve)		
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
TRISOMY 18 SCREENING RISK	< 1:10000 NEGATIVE (-ve)		RISK CUT OFF 1:100
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
NEURAL TUBE DEFECTS SCREENING RISK ASSESSMENT			
NEURAL TUBE DEFECT SCREENING RISK	NEGATIVE (-ve)		RISK CUT OFF 1:50
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			
SPINA BIFIDA/ANENCEPHALY SCREENING RISK	< 1:10000 NEGATIVE (-ve)		RISK CUT OFF 1:50
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			

INTERPRETATION:

1.Multiple marker serum has become standard tool used in obstetrica care to identify pregnancies that may have increased risk for certain birth defects such as NEURALTUBE DEFECTS (NTD'S), DOWN'S SYNDROME (TRISOMY 21) AND TRISOMY 18. The screen is performed by measuring analytes in maternal serum that are produced by the fetus and the placenta. The analytes values along with maternal demographic information

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Test Name	Value	Unit	Biological Reference interval

such as age, weight , gestational age, diabetic status, and race are used together in mathematical model to derive risk estimate.
2.The laboratory establishes a specific cut off for each condition, which classifies each screen as either screen-positive or screen-negative.
3.A screen-positive result indicates that the value obtained exceeds the established cut off.
4.The estimated risk calculation and screen results are dependant on accurate information for gestation, maternal age, race, IDD, and weight.Inaccurate information can lead to significant alterations in the estimated risk. In particular, erroneous assessment of gestational age can result in false-positive or false-negative screen results. Because of its increased accuracy, we therefore recommend determination of gestational age by ultrasound, rather than by last menstural period (LMP), When possible.

4.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.
5.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.

NOTE:

1.Triplet and higher multiple pregnancies cannot be interpreted

2.The reportable range for Trisomy 21, Trisomy 18 and NTD : >1:50 to < 1:10000

3.TRISOMY 21: HIGH RISK: >1:50 - 1:250

4.TRISOMY 18: HIGH RISK: >1:50 - 1:100

5.NEURAL TUBE DEFECT (NTD'S): HIGH RISK: >1:50

6.Biological markers evaluated in this test have marked as H(HIGH) or L(LOW) since there is wide variation in Alpha Fetoprotein, HCG and Unconjugated Estriol ranges depending upon gestational age. "In Range" and "Out of Range" columns are not applicable for the parameters appearing in Multiple of Median (MoM) and Risk calcultion.

7.Individually, Alpha Fetoprotein or HCG or unconjugated Estriol levels do not correlate with risk assessment of Trisomy 18, Trisomy 21 or Neural Tube Defects

*** End Of Report ***

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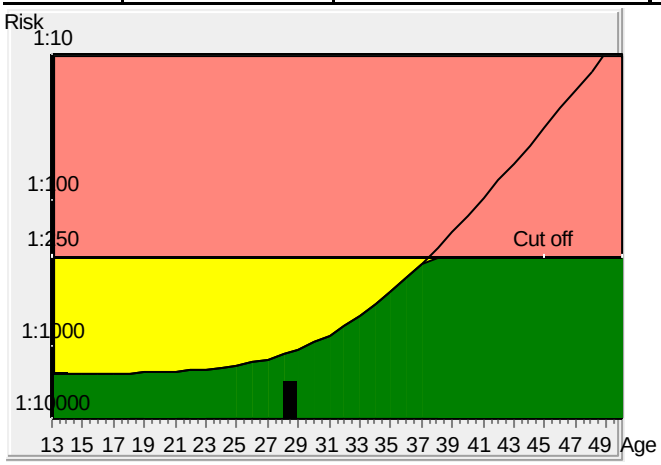
KOS DIAGNOSTIC LAB 6349/1, NICHOLSON ROAD,
AMBALA CANTT

Result Down's syndrome screening

Name	MRS. BINDU	Sample ID	2410220462/AMB	diabetes	no
Patient ID		D.O.B.	1/10/1996	Fetuses	1
Day of serum taking	21/10/2024	Age at delivery	28.4	Smoker	no
Date of report:	22/10/2024	Weight [kg]	66 kg	IVF	no
Previous trisomy 21 pregnancies	no			Ethnic origin	Asian

Corrected MoM's and calculated risks

AFP	99.1	ng/ml	1.76	Corr. MoM	Gestational age at sample date	20 + 1
uE3	3.37	ng/ml	1.65	Corr. MoM	determination method	BPD Hadlock
HCG	15151	mIU/ml	0.89	Corr. MoM	Physician	KOS DIAG LAB
Inh-A	247.6	pg/ml	1.55	Corr. MoM		



Tr.21 risk
at term
1:7122

Age risk
at term
1:1125

Down's Syndrome Risk

The calculated risk for Trisomy 21 is below the cut off which represents a low risk.
After the result of the Trisomy 21 test it is expected that among 7122 women with the same data, there is one woman with a trisomy 21 pregnancy and 7121 women with not affected pregnancies.
The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician.
Please note that risk calculations are statistical approaches and have no diagnostic value!

Neural tube defects risk

The corrected MoM AFP (1.76) is located in the low risk area for neural tube defects.

Risk for trisomy 18

The calculated risk for trisomy 18 is < 1:10000, which indicates a low risk.

below cut off | Below Cut Off, but above Age Risk | above cut off