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

Date of report: 18-11-2016

Patient data						
Name	MRS. JASMINE KAUR			Patient ID		1611220282/AMB
Birthday	29-07-1988			Sample ID		1611220282/AMB
Age at sample date	28.3			Sample Date		17-11-2016
Gestational age 12 + 4						
Correction factors						
Fetuses	1	IVF		no	Previous trisomy 21	no
Weight	55	diabetes		no	pregancies	
Smoker	no	Origin		Asian		
Biochemical data				Ultrasound da	ata	
Parameter V	Value Corr. MoM			Gestational	age	12 + 3
PAPP-A 9.8	9.8 mIU/ml 2.51			Method		CRL Robinson
fb-hCG 105				Scan date		16-11-2016
Risks at sampling date				-	length in mm	62
0			Nuchal translucency MoM 1.06			
Biochemical T21 risk				•		present
-			Sonographe		DR. NIHA MD	
				Qualifications in measuring NT MD		
Risk 1¦10				Trisomy 21 The calculated risk for Trisomy 21 (with nuchal		
1:100 1:250 Cut off 1:000 1:1000 1:1000 1:1000 1:1000 1:1000 Trisomy 13/18 + NT The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.				translucency) is below the cut off, which indicates a low risk. After the result of the Trisomy 21 test (with NT) it is expected that among 3785 women with the same data, there is one woman with a trisomy 21 pregnancy and 3784 women with not affected pregnancies. The free beta HCG level is high. The PAPP-A level is high. 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! The patient combined risk presumes the NT measurement was done according to accepted guidelines (Prenat Diagn 18: 511-523 (1998)). The laboratory can not be hold responsible for their impact on the risk assessment ! Calculated risks have no diagnostic value!		

Sign of Physician

above cut off