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

Prisca 5.0.2.37

Date of report: 04-08-2017

Birthday         05-08-1988         Sample ID         1708220095/AM           Age at sample date         29.0         Sample Date         03-08-201           Gestational age         12 + 2         Value         Veright         Veright         10 VF         Unknown unknown unknown         Previous trisomy 21 pregancies         Unknown pregancies           Biochemical data         Ultrasound data           Parameter         Value         Corr. MoM Gestational age         12 +           PAPP-A         7.43 mIU/ml         1.91 Method         CRL Robinson Crush of Crus	Patient data						
Age at sample date  Gestational age  12 + 2  Correction factors  Fetuses  1   VF   unknown   Origin   Asian  Biochemical data  Parameter   Value   Corr. MoM   PAPP-A   7.43 mIU/ml   1.91   1.91   1.718   1.665   1.33.3 ng/ml   3.45   1.665   1.33.17   1.718   1.33.17   1.718   1.33.17   1.718   1.33.17   1.718   1.718   1.718   1.718   1.718   1.718   1.718   1.719   1.71	Name	MRS. SHEENA AHUJA			Patient ID		1708220095/AMB
Gestational age 12 + 2  Correction factors  Fetuses 1   VF   Unknown Weight 50 diabetes   Unknown Smoker   Unknown Origin   Asian    Biochemical data   Ultrasound data    Parameter   Value   Corr. MoM   Gestational age   12 + 1    PAPP-A   7.43 mIU/ml   1.91	Birthday	05-08-1988			Sample ID		1708220095/AMB
Correction factors  Fetuses 1 IVF unknown Previous trisomy 21 unknown pregancies  Smoker unknown Origin Asian  Biochemical data  Parameter Value Corr. MoM Gestational age 12 + PAPP-A 7.43 mIU/ml 1.91 Method CRL Robinson Scan date 02-08-201 Crown rump length in mm 57 Risks at sampling date  Age risk 1:718 1665 Combined trisomy 21 risk 1:3317 Sonographer Unknown Value Value Value Crown rump length in mm 57 Risks at sampling date 1:10000 Risk 1:10 Value V	Age at sample date	29.0			Sample Date 03-08-2017		
Fetuses 1   IVF   unknown   Previous trisomy 21   unknown   Pregancies   unknown   Unkn	Gestational age	12 + 2					
Weight Smoker unknown Origin Asian  Biochemical data  Parameter Value Corr. MoM Gestational age 12 + PAPP-A 7.43 mIU/ml 1.91 Method CRL Robinsot Scan date 02-08-201  Risks at sampling date Crown rump length in mm 5-77  Age risk 1:505  Age risk 1:665  Combined trisomy 21 risk 1:3317  Risk 1:1000  Risk 1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  Trisomy 13/18 + NT Cut off  Cut off  Cut off  Cut off  Cut off  Trisomy 13/18 + NT  Trisomy 13/18 + NT  Cut off  Cut off  Cut off  Trisomy 13/18 + NT  Trisomy 21 test (with NT) it is expected that among 3317 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with the same data, there is one woman with a trisomy 21 feet with NT) it is expected that among 3317 women	Correction factors						
Smoker unknown Origin Asian  Biochemical data  Parameter Value Corr. MoM Gestational age 12 +  PAPP-A 7.43 mIU/ml 1.91  fb-hCG 135.3 ng/ml 3.45  Scan date 02-08-201  Risks at sampling date  1:718  Biochemical T21 risk 1:665  Combined trisomy 21 risk 1:3317  Trisomy 13/18 + NT < 1:10000  1:250 Cut off  1:1000  1:250 Cut off  1:1000  1:1000  1:1000  1:11	Fetuses	1	IVF		unknown	Previous trisomy 21	unknown
Biochemical data  Parameter Value Corr. MoM Gestational age 12 + PAPP-A 7.43 mIU/ml 1.91 Method CRL Robinso fb-hCG 135.3 ng/ml 3.45 Scan date 02-08-201 Risks at sampling date  Age risk 1:718 Biochemical T21 risk 1:655 Combined trisomy 21 risk 1:3317 Trisomy 13/18 + NT < 1:10000  1:250 Cut off  1:1000  1:250 Cut off  Trisomy 13/18 + NT  1:10000  1:1000  1:1000  1:1000  1:1000  1:10000  1:1000  1:10000  1	Weight	50	diabetes		unknown	pregancies	
Parameter Value Corr. MoM PAPP-A 7.43 mIU/ml 1.91 fb-hCG 135.3 ng/ml 3.45 Risks at sampling date  Age risk 1:718 Biochemical T21 risk 1:665 Combined trisomy 21 risk 1:3317 Risk 1:1000 Risk 1:10  1:1000 13.15 Parameter Value Corr. MoM Risk 1:1000 13.15 Parameter Value Corr. MoM Risk 1:3317 Cut off  Cut off  Trisomy 13/18 + NT The calculated risk for trisomy 13/18 twith nuchal translucency) is <1:1000  13.15 T7 19 21 23 25 27 7 31 33 35 37 39 41 43 45 47 49 Trisomy 13/18 + NT The calculated risk for trisomy 13/18 (with nuchal translucency) is <1:10000, which represents a low	Smoker	unknown	Origin		Asian		
PAPP-A 7.43 mIU/ml 1.91 fb-hCG 135.3 ng/ml 3.45 Risks at sampling date  Age risk 1:718 Biochemical T21 risk 1:665 Combined trisomy 21 risk 1:3317 Risk 1:1000 Risk 1:10  1:100  1:250  Cut off  Cut off  Trisomy 13/18 + NT  Tricaculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low	Biochemical data				Ultrasound da	ata	
fb-hCG 135.3 ng/ml 3.45  Risks at sampling date  Age risk 1:718  Biochemical T21 risk 1:665  Combined trisomy 21 risk 1:3317  Trisomy 13/18 + NT  1:100  1:1000  1:10000  1:110000  1:110000  1:110000  1:110000  1:110000  1:110000  1:110000  1:110000  1:11110000  1:11110000  1:11110000  1:11110000  1:111110000  1:11111111	Parameter	Value	С	orr. MoM	Gestational	age	12 + 1
Risks at sampling date  Age risk  Biochemical T21 risk  Combined trisomy 21 risk  1:3317  Trisomy 13/18 + NT  Risk  1:40  Cut off  Cut off  Cut off  Cut off  Councided trisomy 21 risk  1:300  Cut off  Cut off  Cut off  Trisomy 13/18 + NT  The calculated risk for trisomy 13/18 (with nuchal trianslucency) is < 1:10000, which represents a low  Trisomy 13/18 + NT  The calculated risk for trisomy 13/18 (with nuchal trianslucency) is < 1:10000, which represents a low	PAPP-A	7.43 mIU/ml		1.91	Method		CRL Robinson
Age risk Biochemical T21 risk Combined trisomy 21 risk Trisomy 13/18 + NT  1:10  Risk  1:10  Cut off  1:10  Cut off  1:10  Cut off  Trisomy 13/18 + NT  Trisomy 13/18 + NT  1:10  Cut off  Trisomy 13/18 + NT  Trisomy 13/18 + NT  1:10  Cut off  Trisomy 13/18 + NT  The calculated risk for trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low  1:10  Cut off  Cut off  Trisomy 13/18 + NT  The calculated risk for trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low  1:10  Cut off  Cut off  Cut off  Trisomy 13/18 + NT  The calculated risk for trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low  Trisomy 13/18 + NT  The calculated risk for trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low  Trisomy 13/18 + NT  The calculated risk for trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low  Trisomy 21  Trisomy 21  The calculated risk for Trisomy 21 (with nuchal 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 3317 women with a trisomy 21 pregnancy and 331 women with not affected pregnancies.  The free beta HCG 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 measureme was done according to accepted guidelines (Prenat Diagnostic value!  The patient combined risk for trisomy 13/18 (with nuchal translucency) is elaw for Trisomy 21 (with nuchal translucency) is elaw for Tr	fb-hCG	135.3 ng/ml		3.45	Scan date		02-08-2017
Biochemical T21 risk Combined trisomy 21 risk Trisomy 13/18 + NT  Risk  1:10  Risk  1:10  Cut off  1:250  Cut off  1:10  Cut off  Trisomy 13/18 + NT  Trisomy 13/18 + NT  1:10  Cut off  Trisomy 21  The calculated risk for Trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low  Cut off  Cut off  Trisomy 21  The calculated risk for Trisomy 21 test (with NT) it is expected that among 3317 women with net aeme data, there is one woman with a trisomy 21 pregnancy and 331 women with not affected pregnancies.  The free beta HCG 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 measureme was done according to accepted guidelines (Prenat Diag 18: 511-523 (1998)).  Trisomy 13/18 + NT  The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low	Risks at sampling date				Crown rump	length in mm	57.1
Combined trisomy 21 risk  Trisomy 13/18 + NT  Risk  1:10  1:100  1:100  Cut off  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:1000  1:11000  1:11000  1:11000  1:11000  1:11000  1:11000  1:11000  1:11000  1:11000  1:11000  1:110000  1	Age risk			1:718	Nuchal trans	slucency MoM	0.80
Trisomy 13/18 + NT  Risk  1:10  Qualifications in measuring NT  Mrisomy 21  The ealculated risk for Trisomy 21 (with nuchal 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 3317 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with not affected pregnancies. The free beta HCG 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 measureme was done according to accepted guidelines (Prenat Diag 18: 511-523 (1998)).  The laboratory can not be hold responsible for their impa on the risk assessment! Calculated risks have no diagnostic value!  Trisomy 13/18 + NT  The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low	Biochemical T21 risk			1:665	Nasal bone		unknown
Trisomy 21  The calculated risk for Trisomy 21 (with nuchal 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 3317 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with not affected pregnancies.  The free beta HCG 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 measureme was done according to accepted guidelines (Prenat Diag 18: 511-523 (1998)).  The laboratory can not be hold responsible for their impa on the risk assessment! Calculated risks have no diagnostic value!	Combined trisomy 21	risk		1:3317	Sonographe	er	
Trisomy 13/18 + NT  The calculated risk for Trisomy 21 (with nuchal translucency) is elow the cut off, which indicates a low risk.  After the result of the Trisomy 21 test (with NT) it is expected that among 3317 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with not affected pregnancies. The free beta HCG 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 measureme was done according to accepted guidelines (Prenat Diag 18: 511-523 (1998)). The laboratory can not be hold responsible for their impa on the risk assessment! Calculated risks have no diagnostic value!	Trisomy 13/18 + NT		<	:1:10000	Qualification	ns in measuring NT	MD
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 3317 women with the same data, there is one woman with a trisomy 21 pregnancy and 331 women with not affected pregnancies. The free beta HCG 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 measureme was done according to accepted guidelines (Prenat Diag 18: 511-523 (1998)).  The laboratory can not be hold responsible for their impa on the risk assessment! Calculated risks have no diagnostic value!					1		
	1:250  1:10000  1:10000  13 15 17 19 21 23 25  Trisomy 13/18 + NT  The calculated risk 1  - translucency) is < 1:	for trisomy 13	37 39 41 43	45 47 49 ************************************	translucen low risk.  After the re expected th there is one women with The free be The calcula of the inforr Please note approaches The patient was done a 18: 511-523 The laborat on the risk	sult of the Trisomy 21 tes nat among 3317 women we woman with a trisomy 2' in not affected pregnancies at HCG level is high. Ited risk by PRISCA dependation provided by the reference that risk calculations are and have no diagnostic combined risk presumes according to accepted guid (1998)).	t (with NT) it is with the same data, if pregnancy and 3316 is. Inds on the accuracy ferring physician. It is statistical value! If the NT measurement delines (Prenat Diagnonsible for their impact

Sign of Physician

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