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

Prisca 5.0.2.37

Date of report: 17-02-2019

Patient data				
lame	MRS. SARBANI			1902220555/AMB
irthday	25-05-1988	Sample ID 190222		1902220555/AMB
ge at sample date	30.7	Sample Date		16-02-2019
Sestational age	11 + 1			
Correction factors				
etuses	IVF	no	Previous trisomy 21	no
Veight 50	diabetes	no	pregancies	
moker no	Origin	Asian		
Biochemical data		Ultrasound data		
Parameter Value	Corr. MoM	Gestational age 11 + 1		
PAPP-A 0.77 mIU	ml 0.33	Method CRL Robinson		
o-hCG 23.5 ng/n	0.49			
Risks at sampling date			Crown rump length in mm 4-	
age risk	1:555	Nuchal translucency MoM 0.80		
siochemical T21 risk	1:861	Nasal bone present Sonographer .		
Combined trisomy 21 risk				
risomy 13/18 + NT	1:3902			
Risk 1:10		Trisomy 21 The calculated risk for Trisomy 21 (with nuchal		
1:100 1:250 Cutoff 1:1000 1:10000 1:110000 1:110000 Age Trisomy 13/18 + NT The calculated risk for Trisomy 13/18 (with nuchal translucency) is 1:3902, 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 5185 women with the same data, there is one woman with a trisomy 21 pregnancy and 5184 women with not affected pregnancies. The PAPP-A level is low. 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