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

5.0.2.37

Date of report: 02-04-2019

Prisca

Patient data					
Name	MRS. NITU DEVI		Patient ID		
Birthday	25-12-1989		Sample ID 01190401		
Age at sample date	29.3	Sample Date 01-04		01-04-2019	
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 data			
Parameter Value	Corr. MoM Gestational age		age	12 + 2	
PAPP-A 5.83 mIU/m	ıl 1.49	Method		CRL Robinson	
fb-hCG 150 ng/ml	3.58	3.58 Scan date 30-03-20		30-03-2019	
Risks at sampling date		Crown rump length in mm 60.		60.3	
Age risk	1:705	Nuchal translucency MoM		1.02	
Biochemical T21 risk	1:388	Nasal bone		present	
Combined trisomy 21 risk 1:1395		Sonographer			
Trisomy 13/18 + NT	<1:10000		ns in measuring NT	MD	
T tion			risomy 21 The calculated risk for Trisomy 21 (with nuchal		
1:100   1:250 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   1:10000, 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 1395 women with the same data, there is one woman with a trisomy 21 pregnancy and 1394 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 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