Priscamp 5.0.2.37

Date of report: **09-06-2019**

Patient data			
Name	MRS. RAJWINDER	Patient ID	1906220232/AMB
Birthday	04-02-1990	Sample ID	1906220232/AMB
Age at sample date	29.3	Sample Date	08-06-2019
Gestational age	13 + 0		

Correction factors					
Fetuses	1	IVF	no	Previous trisomy 21 pregancies	no
Weight	45.5	diabetes	no		
Smoker	no	Origin	Asian		

Biochemical data			Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age	12 + 3
PAPP-A	7.28 mIU/ml	1.28	Method	CRL Robinson
fb-hCG	121 ng/ml	2.86	Scan date	04-06-2019

Risks at sampling date		Ultrasound data	
		Crown rump length in mm	61
Age risk	1:709	Nuchal translucency MoM	0.82
Biochemical T21 risk	1:546	Nasal bone	present
Combined trisomy 21 risk	1:2890	Sonographer	.
Trisomy 13/18 + NT	<1:10000	Qualifications in measuring NT	MD

Risk

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 2890 women with the same data, there is one woman with a trisomy 21 pregnancy and 2889 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!

Trisomy 13/18 + NT

The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.

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Sign of Physician

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