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

5.1.0.17

Date of report: 20-07-2019

Prisca

## KOS DIAGNOSTIC LAB

Patient data			
Name	MRS. MOHINI	Patient ID	1907221020/AMB
Birthday	14-04-1984	Sample ID	1907221020/AMB
Age at sample date	35.3	Sample Date	e 19-07-2019
Gestational age	13 + 1		
Correction factors		I	
Fetuses 1	IVF	no	Previous trisomy 21 no
Weight 56.9	diabetes	no	pregnancies
Smoker no	Origin	Asian	
Biochemical data	Ultrasound data		
Parameter Value	Corr. MoM	Gestational	age 12 + 6
PAPP-A 4.6 mIU/m	ol 0.99	Method	CRL Robinson
fb-hCG 180 ng/ml	4.71 Scan date 17-07-		17-07-2019
Risks at sampling date		Crown rump	b length in mm 66.9
Age risk	1:263	Nuchal translucency MoM 0.88	
Biochemical T21 risk	>1:50	>1:50 Nasal bone present	
Combined trisomy 21 risk			er .
Trisomy 13/18 + NT	<1:10000 Qualifications in measuring I		ns in measuring NT MD
Risk 1:10		Trisomy 21	ated risk for Trisomy 21 (with nuchal
1:100   1:250 Cut off   1:1000 Cut off   1:10000 Cut off		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 260 women with the same data, there is one woman with a trisomy 21 pregnancy and 259 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