Sarita Vihar

Prisca 5.1.0.17

Date of report: 08-08-2019

Patient data				
Name N	MRS. HARPAL KAUR		1908220432/AMB	
Birthday	08-01-1986	Sample ID	1908220432/AMB	
Age at delivery	34.1	Sample Date	e 07-08-2019	
Gestational age	13 + 1			
Correction factors				
Fetuses 1	IVF	no	Previous trisomy 21 no	
Weight 63	diabetes	no	pregnancies	
Smoker no	Origin	Asian		
Biochemical data	Ultrasound o		ata	
Parameter Value	Corr. MoM	Gestational age 12 + 0		
PAPP-A 2.5 mIU/m	I 0.61	Method CRL Robinson		
fb-hCG 103 ng/ml	3.30	Scan date 30-07-2019		
Risks at term		Crown rump length in mm 56		
Age risk	1:513	Nuchal translucency MoM 0.54		
Biochemical T21 risk	1:53	Nasal bone present		
Combined trisomy 21 risk	risomy 21 risk 1:354		Sonographer .	
Trisomy 13/18 + NT	<1:10000	3		
Risk 1:10		Trisomy 21	ated risk for Trisomy 21 (with nuchal	
1:1000 1:250 1:10000 1:10000 1:10000 1:10000 1:10000 1:10000 13 15 17 19 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49 Age Trisomy 13/18 + NT The calculated risk for trisomy 13/18 (with nuchal translucency) is < 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 354 women with the same data, there is one woman with a trisomy 21 pregnancy and 353 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

below cut off Below Cut Off, but above Age Risk

above cut off