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

5.1.0.17

Date of report: 13-08-2019

Prisca

Patient data				
Name	MRS. RAJVIR (A)		1908220701/AMB (A)	
Birthday	15-04-1991	Sample ID	1908220701/AMB (A)	
ge at delivery 28.9		Sample Date 12-08-2019		
Gestational age 12 + 3				
Correction factors				
Fetuses 2	IVF	no	Previous trisomy 21 no	
Weight 68.6	diabetes	no	pregnancies	
Smoker no	Origin	Asian		
Biochemical data		Ultrasound data		
Parameter Value	Corr. MoM	Gestational	age 12 + 0	
PAPP-A 10.1 mIU/m	l 1.91	1 Method CRL Robinson		
fb-hCG 53.1 ng/ml	0.71 Scan date 09-08-2019			
Risks at term			Crown rump length in mm 55.75	
Age risk	1:1084			
Biochemical T21 risk	<1:10000	Nasal bone	•	
		Sonographer .		
5		Qualifications in measuring NT MD		
			Trisomy 21 The calculated risk for Trisomy 21 (with nuchal	
1:100   1:250   Cut off   1:000   1:100   1:1000   1:1000   1:1000   1:1000   1:1000   1:1000   1:1000   1:1000   1:1000   1:1000   1:10000   1:10000   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 more than 10000 women with the same data, there is one woman with a trisomy 21 pregnancy. The risk for this twin pregnancy has been calculated for a singleton pregnancy with corrected MoMs. 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