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

5.1.0.17

Date of report: 11-09-2019

Prisca

Patient data				
Name	MRS. SHEETAL			1909220559/AMB
Birthday	15-12-1989			1909220559/AMB
Age at delivery 30.2		Sample Date 10-09-2019		
Gestational age 13 + 2				
Correction factors				
Fetuses 1	IVF	no	Previous trisomy 21	no
Weight 58	diabetes	no pregnancies		
Smoker no	Origin	Asian		
Biochemical data		Ultrasound data		
Parameter Value	Corr. MoM	Gestational	al age 12 + 5	
PAPP-A 2.98 mIU/m	I 0.63	0.63 Method CRL Robinso		CRL Robinson
fb-hCG 72.5 ng/ml	2.32	2.32 Scan date 06-09-201		06-09-2019
Risks at term		Crown rump	length in mm	66.1
Age risk	1:937	Nuchal trans	slucency MoM	1.19
Biochemical T21 risk	1:263	Nasal bone		present
Combined trisomy 21 risk 1:627		Sonographer		
Trisomy 13/18 + NT	<1:10000	Qualification	ns in measuring NT	MD
Risk Trisomy 2 1:10 The ca			ated risk for Trisomy 21 (w	
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 1:1000 Intrisomy 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 627 women with the same data, there is one woman with a trisomy 21 pregnancy and 626 women with not affected pregnancies. 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