Prenatal Screen Report Address:							
Medical ID ID number		09060010		port	2020-2-6		
Doctor name Ultrasonic Image							
Name			u-Gestational weeks 12 Week 4 Day				
Date of Birth Age		RITA 06-01-92 28		g Method	ByCRL 05-02-20		
Weight(Kg) Race Number of C Smoke or no	hild	54 YellowRace 1 FALSE		9	59.6 TRUE <b>MoM Cut-off</b>		
	-		NT(mm)	1.26	0.75	<=2.5	
Serological test							
Date of Test		-20 0:00			2 Week	5 Day	
Farame f-B-HC PAPP	G 11.42	ng/m	nl 0.25		<i>Cut-off</i> <=2.11 >0.25		
Risk	Risk of Tris	Risk of Age Risk of Trisomy 21 Risk of Trisomy 18 Risk of NTD		1/1288 1/125000 1/83333			
3/500			Database w	alculated based vith the serologi mage. Referenc	cal test an	d	
1/250			than the thr	drome Syndrome resul eshold value 1/ s at low risk.			
3/1000			Edward Sy	ndrome			
1/500			than the thr	d Syndrome res eshold value 1/ s at low risk.			
1/1000			NTD				
o 10 1	5 20 25 30 35 4	.0 45 50		esult_is lower th he NTD is at lov		eshold	
Apple Tree Prenatal Screen software. v20131216							