Date of report:	26/03/22	
Prisca	5.1.0.17	

SELF

Patient data				
Name Mrs. RUP	NDER KAUR	Patient ID		01172203250015
Birthday	18/07/94	Sample ID		L3333524
Age at delivery	28.2	Sample Date	Sample Date 25/03/22	
Gestational age	12 + 3			
Correction factors				
Fetuses 1	IVF	no	Previous trisomy 21	unknown
Weight 43	diabetes	no	pregnancies	
Smoker no	Origin	Asian		
Biochemical data		Ultrasound da	ata	
Parameter Value	Corr. MoM	Gestational age 11 + 4		
PAPP-A 2.15 mIU/m	L 0.40	Method		CRL Robinson
fb-hCG 223 ng/mL	4.92	Scan date		19/03/22
Risks at term		Crown rump length in mm 51.3		
Age risk	1:1146	Nuchal translucency MoM 0.73		
Biochemical T21 risk	>1:50	Nasal bone present		
Combined trisomy 21 risk	1:173	Sonographer DR.DEEPAK BANSAL.		
Trisomy 13/18 + NT	<1:10000	Qualifications in measuring NT MD		
Risk 1:10		Trisomy 21	ated risk for Trisomy	
1:100 1:250 1:1000 1:1000 1:10000 13151719212325272931333 Trisomy 13/18 + NT The calculated risk for trisomy 13 translucency) is < 1:10000, which risk.	Age	translucency) is above the cut off, which indicates an increased risk. After the result of the Trisomy 21 test (with NT) it is expected that among 173 women with the same data, there is one woman with a trisomy 21 pregnancy and 172 women with not affected pregnancies. The free beta HCG level is high. The PAPP-A level is low. 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