## KOS DIAGNOSTIC LAB

## 6349/1 NICHOLSON ROAD, AMBALA CANTT

Date of report:	26-07-2022		
Prisca	5.1.0.17		

Patient data				
Name MRS. KAI	VALPREET	Patient ID		2207220673/AMB
Birthday	25-01-1997	Sample ID 2207220673/AMB		2207220673/AMB
Age at sample date	25.5	Sample Date	)	25-07-2022
Gestational age	13 + 3			
Correction factors				
Fetuses 1	IVF	no	Previous trisomy 21	no
Weight 52.3	diabetes	no	pregnancies	
Smoker no	Origin	Asian		
Biochemical data		Ultrasound da	ta	
Parameter Value	Corr. MoM	Gestational age 13 + 0		
PAPP-A 12.5 mIU/m	ıl 1.85	Method CRL Robinson		
fb-hCG 120 ng/ml	2.83	Scan date 22-07-2022		
Risks at sampling date		Crown rump length in mm 70.4		
Age risk	1:968	Nuchal translucency MoM 0.84		
Biochemical T21 risk	1:1472	Nasal bone present		
Combined trisomy 21 risk	1:7029	Sonographer .		
Trisomy 13/18 + NT	<1:10000	Qualifications in measuring NT MD		
Risk 1:10		Trisomy 21	ated risk for Trisomy 21	
translucency) is below the cut off, which indicates low risk. After the result of the Trisomy 21 test (with NT) it is expected that among 7029 women with the same dat there is one woman with a trisomy 21 pregnancy and women with not affected pregnancies. The free beta HCG level is high. The calculated risk by PRISCA depends on the accur 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 measure was done according to accepted guidelines (Prenat E 18: 511-523 (1998)). The laboratory can not be hold responsible for their in on the risk assessment ! Calculated risks have no diagnostic value!				t (with NT) it is with the same data, l pregnancy and 7028 s. ands on the accuracy ferring physician. statistical value! the NT measurement delines (Prenat Diagn onsible for their impact