Prisca 5.1.0.17

Date of report: 06-06-2023

Patient data					
Name MRS. SANDEEP KAUR (B)		Patient ID			
Birthday	22-08-1989			2306220109/AMB (B)	
Age at sample date	33.8	Sample Date	9	05-06-2023	
Gestational age	12 + 0				
Correction factors					
Fetuses 2	IVF	yes	Previous trisomy 21	no	
Weight 58	diabetes	no	pregnancies		
Smoker no	Origin	Asian			
Biochemical data			Ultrasound data		
Parameter Value	Corr. MoM	M Gestational age		11 + 5	
PAPP-A 7.56 mIU/m	1.24	Method		CRL Robinson	
fb-hCG 375 ng/ml	3.60	Scan date		03-06-2023	
Risks at sampling date			length in mm	51.58	
Age risk	1:343	Nuchal translucency MoM		0.58	
Biochemical T21 risk	1:133			present	
Combined trisomy 21 risk	1:744	"		DR. SAMEER GARG	
Trisomy 13/18 + NT	<1:10000 Qualifications in measuri		s in measuring NT	M.D	
T tion			Trisomy 21 The calculated risk for Trisomy 21 (with nuchal		
1:1000 1:10000 1:10000 13 15 17 19 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49 Age Trisomy 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 744 women with the same data, there is one woman with a trisomy 21 pregnancy and 743 women with not affected pregnancies. The free beta HCG level is high. 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

