Prisca 5.2.0.13

Date of report: 11/05/2024

Patient data				
Name	MRS. BALWINDER		Patient ID	
Birthday	9/12/1992	Sample ID	2405220547/AN	ИΒ
Age at sample date	31.4	Sample Date	e 10/05/20.	24
Gestational age	12 + 5			
Correction factors				
Fetuses 1	IVF	no		no
Weight 47	diabetes	no	pregnancies	
Smoker no	Origin	Asian		
Biochemical data		Ultrasound data		
Parameter Value	Corr. MoM	Gestational	age 12 +	3
PAPP-A 10.1 mIU/m	nl 1.75	Method	CRL Robins	son
fb-hCG 112 ng/ml	2.34	Scan date	8/05/20	24
Risks at sampling date		Crown rump length in mm 61.4		[
Age risk			Nuchal translucency MoM 0.88	
Biochemical T21 risk	1:1232		prese	ent
Combined trisomy 21 risk 1:5618		Sonographer		
-		Qualifications in measuring NT		
Risk 1:10		Trisomy 21	ated risk for Trisomy 21 (with nuchal	
1:1000 1:250 1:10000 13 15 17 19 21 23 25 27 29 31 33 3 Trisomy 13/18 + NT The calculated risk for trisomy 13 translucency) is < 1:10000, which risk.	Age 8/18 (with nuchal	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 5618 women with the same data, there is one woman with a trisomy 21 pregnancy and 5617 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!		17 / ent gn

Sign of Physician