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# Date of report:

Prisca

# 9/07/2024

5.2.0.

below cut off Below Cut Off, but above Age Risk above cut off

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| Patient data | | Ultrasound data | | |
| Name MRS. PARVEEN AKHTER  Birthday 10/04/1992  Age at sample date 32.2  Patient ID | | Gestational age at sample date 11 + 2 Method CRL Robinson  Scan date 6/07/2024 | | |
| Correction factors |  | |  | |
| Fetuses 2  Weight in kg 65  Smoker no | IVF no  diabetes no  Origin Asian | | Previous trisomy 21 no pregnancies | |
| Pregnancy data | | Parameter | Value | Corr. MoM |
| Sample Date 8/07/2024 | | PAPP-A  fb-hCG | 10.1mIU/ml 375 ng/ml | 2.73  3.44 |
| Risks at sampling date | | | | |
| Age risk at sampling date 1:442  Overall population risk 1:600 | | Trisomy 21 1:445  Trisomy 13/18 <1:10000 | | |
| Risk  1:10  1:100  1:250 Cut off  1:1000  1:10000  13 15 17 19 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49  Age | | Trisomy 21 | | |
| **The calculated risk for Trisomy 21 is below the cut off which represents a low risk.**  After the result of the Trisomy 21 test it is expected that among 445 women with the same data, there is one woman with a trisomy 21 pregnancy and 444 women with not affected pregnancies.  The free beta HCG level is high. The PAPP-A 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! | | |
| Trisomy 13/18 | |
| **The calculated risk for trisomy 13/18 is < 1:10000, which indicates a low risk.** | |  | | |

**Sign of Physician**