Prisca 5.1.0.17

Date of report: 01/10/20

Patient data

Name	Mrs. KAVITHA Fetus:B	Patient ID	0012009290149
Birthday	16/10/83	Sample ID	20018423
Age at sample date	37.0	Sample Date	29/09/20
Gestational age	11 + 6		

Correction factors

Fetuses	2	IVF	no	Previous trisomy 21 pregnancies	unknown
Weight	83	diabetes	no		
Smoker	no	Origin	Caucasian		

Biochemical data

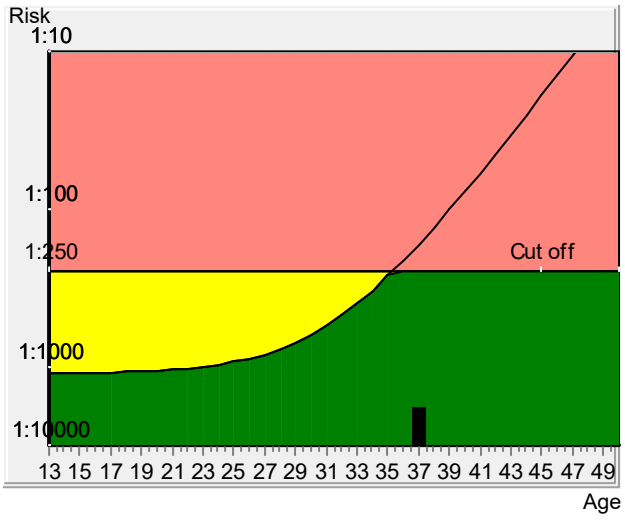
Parameter	Value	Corr. MoM
PAPP-A	10.9 mIU/mL	3.12
fb-hCG	38.7 ng/ml	0.45

Ultrasound data

Gestational age	11 + 5
Method	CRL Robinson
Scan date	28/09/20
Crown rump length in mm	51.7
Nuchal translucency MoM	0.72
Nasal bone	unknown
Sonographer	NA
Qualifications in measuring NT	NA

Risks at sampling date

Age risk	1:168
Biochemical T21 risk	<1:10000
Combined trisomy 21 risk	<1:10000
Trisomy 13/18 + NT	<1:10000



Trisomy 13/18 + NT

The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.

Trisomy 21

The calculated risk for Trisomy 21 (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 more than 10000 women with the same data, there is one woman with a trisomy 21 pregnancy.
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!
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

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