

Prisca 5.1.0.17
Date of report: 17-05-2023

A M RAILKAR

Patient data			
Name	Mrs. SARITA KAMTHE		Patient ID 0662305160059
Birthday	27-09-1998		Sample ID 24269175
Age at sample date	24.6		Sample Date 16-05-2023
Gestational age	12 + 0		
Correction factors			
Fetuses	1	IVF	no
Weight	48	diabetes	no
Smoker	no	Origin	Asian
			Previous trisomy 21 pregnancies unknown
Biochemical data			Ultrasound data
Parameter	Value	Corr. MoM	Gestational age 11 + 6
PAPP-A	1.33 mIU/mL	0.32	Method CRL Robinson
fb-hCG	45.27 ng/mL	0.89	Scan date 15-05-2023
Risks at sampling date			Crown rump length in mm 54.7
Age risk	1:958		Nuchal translucency MoM 0.97
Biochemical T21 risk	1:422		Nasal bone present
Combined trisomy 21 risk	1:2190		Sonographer A M RAILKAR
Trisomy 13/18 + NT	<1:10000		Qualifications in measuring NT MD
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 2190 women with the same data, there is one woman with a trisomy 21 pregnancy and 2189 women with not affected pregnancies. The PAPP-A level is low. 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!
Trisomy 13/18 + NT			
The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.			

Sign of Physician