

Patient data				
Name	Mrs. ASHWINI SHINDE		Patient ID	0662307040168
Birthday	26-09-1992		Sample ID	24544657
Age at sample date	30.8		Sample Date	04-07-2023
Gestational age	12 + 5			
Correction factors				
Fetuses	1	IVF	no	Previous trisomy 21 pregnancies
Weight	69	diabetes	no	
Smoker	no	Origin	Asian	
Biochemical data			Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age	12 + 5
PAPP-A	1.39 mIU/mL	0.38	Method	CRL Robinson
fb-hCG	38.66 ng/mL	1.01	Scan date	04-07-2023
Risks at sampling date			Crown rump length in mm	66
Age risk	1:588		Nuchal translucency MoM	0.71
Biochemical T21 risk	1:326		Nasal bone	unknown
Combined trisomy 21 risk	1:2088		Sonographer	NA
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 2088 women with the same data, there is one woman with a trisomy 21 pregnancy and 2087 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