

Prisca

5.1.0.17

Date of report:

30/09/23

Patient data			
Name	Mrs. ROHINI SHINDE	Patient ID	0662309290065
Birthday	01/05/04	Sample ID	24749115
Age at sample date	19.4	Sample Date	29/09/23
Gestational age	12 + 2		
Correction factors			
Fetuses	1	IVF	no
Weight	39.9	diabetes	no
Smoker	no	Origin	Asian
		Previous trisomy 21 pregnancies	unknown
Biochemical data		Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age
PAPP-A	14.93 mIU/mL	2.61	12 + 0
fb-hCG	49.55 ng/mL	0.96	Method
			CRL Robinson
			Scan date
			27/09/23
			Crown rump length in mm
			55.9
			Nuchal translucency MoM
			0.81
			Nasal bone
			present
			Sonographer
			N A
			Qualifications in measuring NT
			MD
Risks at sampling date		Trisomy 21	
Age risk	1:1087	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 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!	
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.			

Sign of Physician

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