

- ☐ Non-Invasive Prenatal Test - NIPT  
☐ Non-Invasive Prenatal Test - NIPT Microdeletion

(To be filled in by patient)

Vial ID:

Patient	Name	Tame Julee		Date of Birth	DD/MM/YYYY 04/07/1989	ID/Passport No	5349 4450 8629
	Address	The Sector Nimguli				Contact number	7085750170
	Weight	62 kg	Blood Type	(A+ve) Positive	Inherited Disease	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	
Pregnancy	Gestation Period	13 Weeks		Pregnancy type	<input checked="" type="checkbox"/> Singleton <input type="checkbox"/> Multiple		
	Past history of Gestation Abnormality <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						

(To be filled in by Clinical/Medical Institution)

Pregnancy profile	Doctor	Dr. Mukesh Fogla		Undergoing IVF	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Number of embryos: Implantation _____ Blighted ovum _____ Fetal reduction _____)			
	Down Syndrome test	<input type="checkbox"/> none so far <input type="checkbox"/> NT _____ Notes: T21 _____ T18 _____ T13 _____						
Sample info	Medical Institution	Ultracare Diagnostic Centre	Contact number	8453036343	Blood taken by	Himadree Gogoi	Blood quantity	10 ml
	Blood collection date	02/10/23		Blood pick up date	02/10/23			
Collection agent			Condition of blood	Good	Blood ID	Tame Julee		

**Purpose and method of the test**

The Firstvue NIPT (Non Invasive Prenatal Testing) was developed by PathCare Labs. This test is designed to screen for Trisomy 13 (Patau syndrome), Trisomy 18 (Edwards syndrome) and Trisomy 21 (Down syndrome). The test is performed by first collecting a 10 ml blood sample from an expecting mother at least 10 weeks into the pregnancy. Cell-free fetal DNA is then extracted from the blood sample for subsequent DNA sequencing. Through innovative next-generation DNA sequencing technology, and specialized bioinformatics analysis, this test platform has a detection rate of over 99.9% for the above-mentioned genetic anomalies.

**Recommended use of this test:**

The Firstvue NIPT should be considered after close consultation with your physicians and if possible a genetic counselor.

The test is recommended in cases where:

1. Patients are concerned about the risk of invasive prenatal diagnosis; and/or
2. Patients have unusual ultrasonography findings which suggest chromosome abnormality; and/or
3. Patients are of advanced maternal age and/or have a higher risk of their fetus being diagnosed with Down syndrome.

**Test Results:**

The test report will indicate a Positive (aneuploidy detected) or Negative (aneuploidy not detected) result for each of the conditions listed above.

this NIPT serve as a reference for your physicians to suggest further treatment.

The accuracy and quality of the test may be adversely affected by improper blood sample collection, storage and transportation. The accuracy and quality of the test may also be adversely affected by samples taken from patients that have received medical treatment including allogeneic blood transfusion, transplant operations, and stem cell therapy within 30 days of sample collection.

**This test is not suitable for:**

- Patients with dizygotic multiple gestation.
- Patients with diagnostic results that have revealed chromosomal aneuploidy.
- Patients who have previously accepted blood transfusions from other than themselves, or have undergone transplantation surgery, stem cell therapy or egg donation.
- Patients at less than 10 weeks gestation.
- Patients who have tested positive for HIV and/or Hepatitis B C.

**Limitations of the test:**

Chromosomal abnormalities such as chromosomal rearrangements, duplications, copy number variations, balanced translocations, inversions, imbalanced translocations, uniparental disomy, mosaicism etc., are not within the scope of detection. Therefore, this test does not guarantee that a fetus will be free from a genetic disease. NIPT Microdeletion test: is a risk assessment test only and does not guarantee that a fetus will be free from genetic microdeletion.

**Informed consent:**

If the NIPT test result is high risk, PathCare will reimburse the cost of further confirmatory diagnostic tests including amniocentesis and chromosome fluorescence in situ hybridization (FISH).



## **OBSTETRICAL SONOGRAPHY**

***Name of Patient : Tame Julee***

***Date : 02.10.2023***

*A live intrauterine fetus is seen in a gestational sac.*

*CRL measures : 73.2mm, Corresponding to 13weeks 3days.*

*Fetal heart rate : 154bpm*

*Placenta on the anterior wall*

*Nuchal translucency : 2.8mm*

*Cervical length : 47.4mm*

*Both ovaries appears normal*

A handwritten signature in blue ink, consisting of a large, stylized 'S' shape with a small loop at the top and a short horizontal stroke at the bottom.

***Signature***