

Prisca 5.1.0.17
Date of report: 23-11-2023

Patient data					
Name	Mrs. AMRUTA KAVALE TWIN B		Patient ID	0742311180051	
Birthday	18-10-1999		Sample ID	24454548	
Age at sample date	24.1		Sample Date	18-11-2023	
Gestational age	11 + 5				
Correction factors					
Fetuses	2	IVF	no	Previous trisomy 21 pregnancies	unknown
Weight	65	diabetes	no		
Smoker	no	Origin	Asian		
Biochemical data			Ultrasound data		
Parameter	Value	Corr. MoM	Gestational age	11 + 5	
PAPP-A	1.56 mIU/mL	0.33	Method	CRL Robinson	
fb-hCG	41.56 ng/mL	0.39	Scan date	18-11-2023	
Risks at sampling date			Crown rump length in mm	52.4	
Age risk	1:968		Nuchal translucency MoM	0.79	
Biochemical T21 risk	1:2290		Nasal bone	present	
Combined trisomy 21 risk	<1:10000		Sonographer	NA	
Trisomy 13/18 + NT	1:4450		Qualifications in measuring NT	MD	
Risk			Trisomy 21		
			<p>The calculated risk for Trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low risk.</p> <p>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.</p> <p>The free beta HCG level is low. The PAPP-A level is low.</p> <p>The risk for this twin pregnancy has been calculated for a singleton pregnancy with corrected MoMs.</p> <p>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!</p> <p>The patient combined risk presumes the NT measurement was done according to accepted guidelines (Prenat Diagn 18: 511-523 (1998)).</p> <p>The laboratory can not be hold responsible for their impact on the risk assessment ! Calculated risks have no diagnostic value!</p>		
Trisomy 13/18 + NT					
<p>The calculated risk for Trisomy 13/18 (with nuchal translucency) is 1:4450, which represents a low risk.</p>					

Sign of Physician