

SAGEPATH LABS PVT LTD.,

Prisca

5.1.0.17

Date of report:

25-03-2024

RASHMI KUMARI (MD)

Patient data			
Name	Mrs. KALESHWARI DEVI		Patient ID
Birth day	29-09-1999		Sample ID
Age at sample date	24.5		Sample Date
Gestational age	10 + 6		
Correction factors			
Fetuses	1	IVF	no
Weight	44	diabetes	no
Smoker	no	Origin	Asian
		Previous trisomy 21 pregnancies	unknown
Biochemical data		Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age
PAPP-A	10.48 mIU/mL	4.04	10 + 6
fb-hCG	58.64 ng/mL	0.89	Method
			CRL Robinson
			Scan date
			23-03-2024
Risks at sampling date			Crown rump length in mm
			42
Age risk			Nuchal translucency MoM
1:921			1.02
Biochemical T21 risk			Nasal bone
<1:10000			present
Combined trisomy 21 risk			Sonographer
<1:10000			RASHMI KUMARI (MD)
Trisomy 13/18 + NT			Qualifications in measuring NT
<1:10000			MD
			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 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!
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