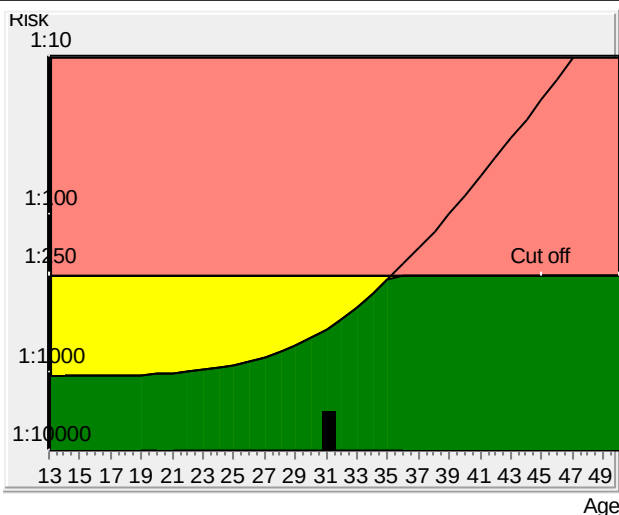


Prisca

5.1.0.17

Date of report: 04-04-2024

Patient data					
Name	Mrs. SUHASINI CHINTAGUNTLA TWIN A		Patient ID	0662404020206	
Birthday	17-02-1993		Sample ID	A0198698	
Age at sample date	31.1		Sample Date	02-04-2024	
Gestational age	11 + 3				
Correction factors					
Fetuses	2	IVF	no	Previous trisomy 21 pregnancies	unknown
Weight	55.3	diabetes	no		
Smoker	no	Origin	Asian		
Biochemical data			Ultrasound data		
Parameter	Value	Corr. MoM	Gestational age	11 + 3	
PAPP-A	22.28 mIU/mL	4.47	Method	CRL Robinson	
fb-hCG	59.87 ng/mL	0.51	Scan date	02-04-2024	
Risks at sampling date			Crown rump length in mm	48.1	
Age risk	1:532		Nuchal translucency MoM	0.92	
Biochemical T21 risk	<1:10000		Nasal bone	present	
Combined trisomy 21 risk	<1:10000		Sonographer	N A	
Trisomy 13/18 + NT	<1:10000		Qualifications in measuring NT	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 risk for this twin pregnancy has been calculated for a singleton pregnancy with corrected MoMs. 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

 below cut off

 Below Cut Off, but above Age Risk

 above cut off