

Prisca

5.1.0.17

Date of report: 22-05-2024

TANUJA JOSHI

Patient data			
Name	Mrs. GAVANDE SUCHITA		Patient ID
Birth day	09-11-2005		Sample ID
Age at sample date	18.5		Sample Date
Gestational age	13 + 3		
Correction factors			
Fetuses	1	IVF	no
Weight	49.1	diabetes	no
Smoker	no	Origin	Asian
			Previous trisomy 21 pregnancies
			unknown
Biochemical data			Ultrasound data
Parameter	Value	Corr. MoM	Gestational age
PAPP-A	16.89 mIU/mL	2.40	Method
fb-hCG	36.21 ng/mL	1.02	CRL Robinson
Risks at sampling date			Scan date
Age risk			14-05-2024
Biochemical T21 risk			Crown rump length in mm
Combined trisomy 21 risk			68.5
Trisomy 13/18 + NT			Nuchal translucency MoM
			1.27
			Nasal bone
			present
			Sonographer
			NA
			Qualifications in measuring NT
			MD
RISK			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 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