

Prisca 5.1.0.17
Date of report: 11-07-2024

Patient data						
Name	Mrs. SHUBHANGI SHINDE		Patient ID	0442407090019		
Birthday	20-11-1994		Sample ID	a0622391		
Age at sample date	29.6		Sample Date	08-07-2024		
Gestational age	11 + 4					
Correction factors						
Fetuses	1	IVF	no	Previous trisomy 21 pregnancies	unknown	
Weight	58	diabetes	no			
Smoker	no	Origin	Asian			
Biochemical data			Ultrasound data			
Parameter	Value	Corr. MoM	Gestational age			11 + 4
PAPP-A	3.14 mIU/mL	1.16	Method			CRL Robinson
fb-hCG	45.65 ng/mL	0.88	Scan date			08-07-2024
Risks at sampling date			Crown rump length in mm			50
Age risk	1:651		Nuchal translucency MoM			0.89
Biochemical T21 risk	1:7378		Nasal bone			present
Combined trisomy 21 risk	<1:10000		Sonographer			NA
Trisomy 13/18 + NT	<1:10000		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