

N A

Patient data				
Name	Mrs. ANKITA KALE TWIN B		Patient ID	0662408260146
Birthday	13/10/95		Sample ID	A0974462
Age at sample date	28.9		Sample Date	26/08/24
Gestational age	12 + 2			
Correction factors				
Fetuses	2	IVF	no	Previous trisomy 21 pregnancies
Weight	61	diabetes	no	
Smoker	no	Origin	Asian	
Biochemical data			Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age	12 + 2
PAPP-A	10.51 mIU/mL	1.60	Method	CRL Robinson
fb-hCG	53.67 ng/mL	0.56	Scan date	26/08/24
Risks at sampling date			Crown rump length in mm	59
Age risk	1:727		Nuchal translucency MoM	0.71
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 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