

Prisca 5.1.0.17
Date of report: 22-09-2024

N A

Patient data			
Name	Mrs. YOGITA SATPUTE		Patient ID
Birthday	13-10-1997	Sample ID	
Age at sample date	26.9	Sample Date	
Gestational age	12 + 3		
Correction factors			
Fetuses	1	IVF	no
Weight	61	diabetes	no
Smoker	no	Origin	Asian
		Previous trisomy 21 pregnancies	unknown
Biochemical data		Ultrasound data	
Parameter	Value	Corr. MoM	
PAPP-A	20.34 mIU/mL	5.44	
fb-hCG	53.69 ng/mL	1.26	
Risks at sampling date			
Age risk	1:860	Crown rump length in mm	60
Biochemical T21 risk	<1:10000	Nuchal translucency MoM	0.90
Combined trisomy 21 risk	<1:10000	Nasal bone	present
Trisomy 13/18 + NT	<1:10000	Sonographer	N A
		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 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