

Patient data						
Name	Mrs. ANKITA MORE	Patient ID	0662411270127			
Birthday	25-06-2000	Sample ID	A1371512			
Age at sample date	24.4	Sample Date	27-11-2024			
Gestational age	12 + 1					
Correction factors						
Fetuses	1	IVF	no	Previous trisomy 21 pregnancies	unknown	
Weight	50	diabetes	no			
Smoker	no	Origin	Asian			
Biochemical data			Ultrasound data			
Parameter	Value	Corr. MoM	Gestational age			11 + 6
PAPP-A	3.54 mIU/mL	0.77	Method			CRL Robinson
fb-hCG	45.29 ng/ml	0.99	Scan date			25-11-2024
Risks at sampling date			Crown rump length in mm			53.8
Age risk		1:971	Nuchal translucency MoM			0.77
Biochemical T21 risk		1:3435	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 graph illustrates the relationship between maternal age and the risk of Trisomy 21. The risk increases exponentially with age. At age 25, the calculated risk is approximately 1:1000, which falls into the low-risk category (green area).			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.						

 below cut off
  Below Cut Off, but above Age Risk
  above cut off