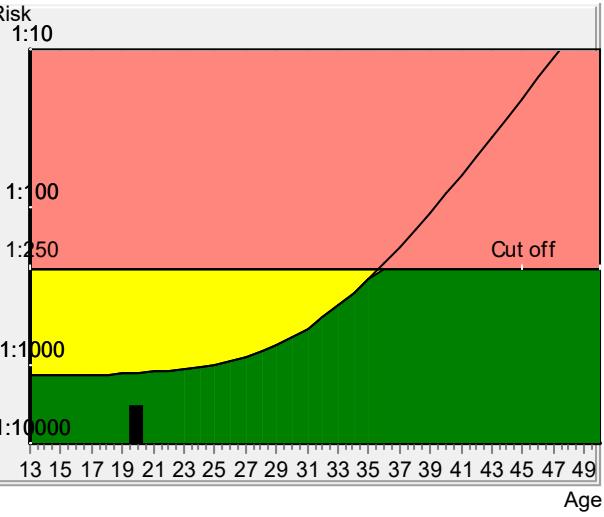


Prisca 5.1.0.17

Date of report: 11/01/25

N A

Patient data			
Name	Mrs. NIKITA SHITOLE TWIN A	Patient ID	0662501060280
Birthday	03/02/05	Sample ID	A1373227
Age at sample date	19.9	Sample Date	06/01/25
Gestational age	13 + 6		
Correction factors			
Fetuses	2	IVF	no
Weight	61	diabetes	no
Smoker	no	Origin	Asian
Biochemical data			
Parameter	Value	Corr. MoM	Ultrasound data
PAPP-A	3.52 mIU/mL	0.30	Gestational age 12 + 3
fb-hCG	39.1 ng/mL	0.62	Method CRL Robinson
Risks at sampling date			
Age risk	1:1137		Scan date 27/12/24
Biochemical T21 risk	1:828		Crown rump length in mm 61
Combined trisomy 21 risk	1:3840		Nuchal translucency MoM 1.01
Trisomy 13/18 + NT	1:6285		Nasal bone present
Sonographer N A			
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 3840 women with the same data, there is one woman with a trisomy 21 pregnancy and 3839 women with not affected pregnancies.			
The PAPP-A level is low.			
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 held 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 1:6285, which represents a low risk.			
			

Sign of Physician

 below cut off

 Below Cut Off, but above Age Risk

 above cut off