

Mrs. NYEMTAN Age : 39 Yrs Gender : Female PID : 2800250115001971 VID : 2800L20251150020	Collected at: Apex Diag Clinic and Research Center ABC Bldg Opp. Hollotoli School Naharbari Dimapur Nagaland 797112 Ph 7636914202 Processed at: Pathkind Labs Gurugram, Plot No. 55 56 Udhog Vihar Ph IV 122015, Ph 7500075111	Collected : 15/01/2025 11:51 AM Reported : 16/01/2025 05:46 PM Report Status : Final Ref. By : APEX
Barcode: 80009505665		

Test Name	Result	Biological Ref. Interval	Unit
 Double Marker Test Sample : Serum			
Weight Method : Manual	56.00		—
H/O Smoking Method : Manual	No		—
H/O Diabetes Method : Manual	No		—
H/O IVF Method : Manual	No		—
Ethnic Origin Method : Manual	Indian		—
Date of Ultrasound Method: Manual	14.01.2025		
Method of GA Estimation Method : Manual	CRL		—
Sonologist Method: Manual			
Foetus (No's) Method : Manual	1.00		NOS
GA on the Day of Ser Method: Manual	12 Weeks+ 3 Days		
CRL Value (Foetus 1) Method : CLIA	60.20	-	mm
Nuchal Translucency (Foetus 1) Method : CLIA	1.00	-	mm
F.HCG Method : CLIA	137.10		ng/mL
Pregnancy Associated Plasma Protein-A (PAPP-A)	2.97	-	mIU/mL

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Test Name	Result	Biological Ref. Interval	Unit
Method : CLIA			
Free Beta HCG MOM (Foetus 1) Method : CLIA	3.94		—
PAPP- A MOM (Foetus 1) Method : CLIA	0.90		—
NT MOM (Foetus 1) Method : CLIA	0.64	-	—
Trisomy 21 Risk (Foetus 1) Method: Calculated	1/101 The calculated risk for Trisomy21 is above cut off (CUT OFF LEVEL 1:250) which indicates a high risk.		
Trisomy 13/18 Risk (Foetus 1) Method: Calculated	<1/100000 The calculated risk for Trisomy13/18 is below cut off (CUT OFF LEVEL 1:100) which represents a low risk.		

Authenticated by



Dr Aarti Nagpal
MBBS, DNB (Pathology)
Regn # DMC/R/865
HOD- Hemat & Biochem

Dr. Samiksha Ahlawat
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Regn # DMC 99860
Consultant- Hematology

Note: Tests marked with NABL symbol are accredited by NABL vide Certificate No. MC- 3055

Interpretation

Double Marker Test

Screening tests are based on statistical analysis of patient demographic and biochemical data. They simply indicate a high or low risk category. Confirmation of screen positives is recommended by invasive diagnostic tests. The interpretive unit is MoM (Multiples of Median) which considers variables such as gestational age (ultrasound), Nuchal translucency, maternal weight, race, insulin dependent Diabetes, multiple gestation, IVF (Date of Birth of Donor, if applicable), smoking & previous history of Down syndrome.

Accurate availability of this data for Risk Calculation is critical.

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Test Name	Result	Biological Ref. Interval	Unit
Please find PAPP-A Median used at Pathkind labs for reference:			
Weeks of Gestation	PAPP-A Median		
9	0.9		
10	1.4		
11	2.19		
12	3.42		
13	5.35		





First Trimester Screening results

Patient data

Name and surname:	NYEMTAN .	Weight:	56 Kg.
PID:	80009505665	Race/Ethnicity:	INDIAN
Date of birth:	07-09-1985 (39 years in the DoB)	Diabetes:	No
		Smoker:	No

Biochemical data

Extraction date:	14-01-2025	Gestational age:	12 weeks and 3 days
Free beta hCG 1T:	137.1 ng/ml		3.94 MoM
PAPP-A:	2.97 mIU/ml		0.9 MoM

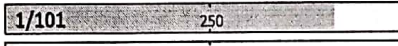
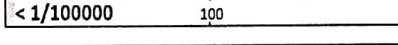
Ultrasound data

Ultrasound date:	14-01-2025	Gestational age:	12 weeks and 3 days
CRL:	60.2 mm		
Nuchal Translucency:	1 mm		0.64 MoM (Truncated at 0.78 MoMs)

Dichotomous markers

Absent nasal bones=No.

Risk report (At screening date)

Risk type	Probability	Result	Graphic representation
Trisomy 21 age risk:	1/80		
Trisomy 21:	1/101	Positive risk	
Trisomy 18/13:	< 1/100000	Low Risk	

Observations

Additional studies are recommended.

The risk index is a statistical calculation and has no diagnostic value.

FMF certified reagents are being used for analysis.

The calculated risk by the software depends on the accuracy of USG details and patient details Provided.

Printing date: 16-01-2025



Evita GyneCare Hospital & Research Institute

ULTRASONOGRAPHY REPORT

Patient Information:

- Name : Nyemtan
- Age/Sex : 39 years, Female
- Date of Examination : 14-01-2025
- Address : Longleng
- LMP : 20-10-2024

Indication for Examination: Routine First Trimester Ultrasound Protocol

Examination Information: Level 1 screening with GE Voluson P8, using 4C-RS Convex Probe

Findings:

- CRL measures 60.2 mm corresponding to 12w4d
- EDD **25-07-2025**
- FHR 172 bpm, regular
- Anterior wall placentation; No retroplacental lesion
- Liquor uniformly distributed
- Normal cervical length; os closed
- No adnexal mass or free fluid in pelvis

1. **Nuchal Translucency (NT):** The nuchal translucency measurement is 1.0 mm, which is within normal limits for the gestational age.
2. **Fetal Anatomy:**
 - **Cranium and Brain:** normal cranium; symmetrical choroid plexus
 - **Nasal bone** visible; Intact ICT
 - **Spine:** Appears intact and straight.
 - **Abdominal Wall:** Intact with no evidence of exomphalos.
 - **Limb Buds:** Present and appropriately formed for gestational age.
3. **Ductus Venosus** doppler shows normal wave-form

Impression:

- Single live intrauterine gestation at 12w4d
- **NT measures 1.0 mm**, which is within normal limits, corresponding to low risk for chromosomal anomalies at this stage. No structural abnormalities detected in the fetus.

Comments:

- Recommended follow-up with Level 2 anomaly screen as per standard ANC schedule.
- Continue routine prenatal care and follow up on any maternal health concerns.

Dr. Emmanuel L Yanthan

(MS OB/GYN)

Consultant Gynaecologist

FOGSI Certified OB/GYN Sonologist



