

Prisca 5.1.0.17
Date of report: 21-02-2025

NA

Patient data				
Name	Mrs. SHITAL ABHIJIT SHINDE		Patient ID	0662502200199
Birthday	17-05-1990		Sample ID	A2029507
Age at sample date	34.8		Sample Date	20-02-2025
Gestational age	12 + 5			
Correction factors				
Fetuses	1	IVF	no	Previous trisomy 21 pregnancies
Weight	77	diabetes	no	
Smoker	no	Origin	Asian	
Biochemical data			Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age	12 + 5
PAPP-A	3.82 mIU/mL	1.21	Method	CRL Robinson
fb-hCG	43.41 ng/mL	1.17	Scan date	20-02-2025
Risks at sampling date			Crown rump length in mm	66
Age risk	1:288		Nuchal translucency MoM	0.82
Biochemical T21 risk	1:1853		Nasal bone	present
Combined trisomy 21 risk	1:8987		Sonographer	NA
Trisomy 13/18 + NT	<1:10000		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 8987 women with the same data, there is one woman with a trisomy 21 pregnancy and 8986 women with not affected pregnancies. 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 < 1:10000, which represents a low risk.				

Sign of Physician