

Prisca 5.1.0.17
Date of report: 26-05-2025

NA

Patient data			
Name	Mrs. G.SARASWATHI TWIN-2	Patient ID	0902505260009
Birthday	20-03-1998	Sample ID	A1971414 TWIN-2
Age at sample date	27.2	Sample Date	26-05-2025
Gestational age	12 + 1		
Correction factors			
Fetuses	2	IVF	no
Weight	41.15	diabetes	no
Smoker	no	Origin	Asian
		Previous trisomy 21 pregnancies	unknown
Biochemical data		Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age
PAPP-A	12.96 mIU/mL	1.34	12 + 1
fb-hCG	44.5 ng/mL	0.39	Method
			CRL Robinson
			Scan date
			26-05-2025
Risks at sampling date			Trisomy 21
Age risk	1:837		Crown rump length in mm
Biochemical T21 risk	<1:10000		58
Combined trisomy 21 risk	<1:10000		Nuchal translucency MoM
Trisomy 13/18 + NT	<1:10000		0.79
			Nasal bone
			present
			Sonographer
			NA
			Qualifications in measuring NT
			NA
			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 free beta HCG 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 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

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