

Prisca 5.1.0.17
Date of report: 21-01-2026

Patient data			
Name	Mrs. BINA SINGH	Patient ID	0472601200098
Birthday	09-07-1992	Sample ID	D0003797
Age at sample date	33.5	Sample Date	20-01-2026
Gestational age	12 + 6		
Correction factors			
Fetuses	1	IVF	no
Weight	40	diabetes	no
Smoker	no	Origin	Asian
		Previous trisomy 21 pregnancies	unknown
Biochemical data		Ultrasound data	
Parameter	Value	Corr. MoM	Gestational age
PAPP-A	2.75 mIU/mL	0.38	12 + 6
fb-hCG	39 ng/mL	0.87	Method
			CRL Robinson
			Scan date
			20-01-2026
Risks at sampling date			Trisomy 21
Age risk		1:372	Crown rump length in mm
Biochemical T21 risk		1:283	66.9
Combined trisomy 21 risk		1:1776	Nuchal translucency MoM
Trisomy 13/18 + NT		<1:10000	0.53
			Nasal bone
			present
			Sonographer
			NA
			Qualifications in measuring NT
			Sonographer
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 1776 women with the same data, there is one woman with a trisomy 21 pregnancy and 1775 women with not affected pregnancies. The PAPP-A level is low. 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