

MOLQ LABORATORY (A UNIT OF MOLECULAR QUEST HEALTHCARE PVT. LTD.)

Triple Screen

PATIENT INFORMATION
NAME MRS NEFTU

PATIENT CODE: 011807130049

DOB: 29/07/90 (DDMMYY)

LMP: 21/04/18 EDD: 17/12/18 PHYSICIAN:

SPECIMEN

SPECIMEN CODE: MOLQ LAB COLLECTION DATE: 18/07/18

RECEIVED: 18/07/18

REFERRING LAB #: MOLQ LAB

REPORTED: 18/07/18

CLINICAL INFORMATION

GESTATIONAL AGE: 18 weeks 2 days by U/S (17 wks 3 days on 12/07/18) MATERNAL AGE AT TERM: 28.4 years

MATERNAL WEIGHT: 66.0 kg MATERNAL RACE: INDIAN

MATERNAL IDDM: Not specified (Non-diabetic assumed)

GESTATION: Twins

SCREENING STATUS: Initial sample

PARA / GRAVIDA: 0 / 1

	Second Trimester	Assay Results	MoM		DS			OSB	T18	
		231.1 ng/mL	4.99		serum screen	age only	serum screen	population prevalence	serum screen	background risk
	uE3	3.51 ng/mL	2.22	1:10						
	hCG	179685 mIU/mI	6.37							
		IIIIU/IIII		1:100						
Risk Assessment (at	term)	Cuto	ff				_			
Down Syndrome `	~1:50000	1:250)	1:1000						
Age alone	1:1130)								
				1:10000						
OSB:	1:85	5 1:310	6(4.27 MoMs)	1.10000						

Interpretation* (based on partial information supplied)

OPEN SPINA BIFIDA SCREEN POSITIVE

The maternal serum AFP result is ELEVATED for a TWIN pregnancy of this gestational age. The risk of an open neural tube defect is GREATER than the TWIN screening cut-off. Twin pregnancies on average have serum AFP concentrations that are twice those seen in singleton pregnancies. Counselling is indicated regarding futher investigations, including a detailed

fetal ultrasound and in some cases amniocentesis.

DOWN SYNDROME Screen Negative

This patient's relative risk for Down syndrome has been determined by dividing the assay results by the average analyte level in twin pregnancies, and then calculating the risk associated with a singleton pregnancy. This relative risk calculation places the patient below the screening cut-off for Down syndrome.

TRISOMY 18 Screen Negative