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Patient Data Name Mrs.RATI YADAV Patient ID 0119030 Name Mrs.RATI YADAV Sample ID 104 Birthday 29-07-91 Sample ID 104 Age at delivery 27.6 Sample Date 02 Gestational age by 12+1 Correction factors 02 Fetuses 1 IVF unknown Previous trisomy 21 un Weight in kg 76.2 Diabetes no Pregnancies 02 Smoker no Origin Asian Pregnancies 02 Biochemical Data Ultrasound Data Ultrasound Data 02 CRL (~He PAPP-A 1.54 mIU/ml 0.50 Scan Date 02 CRL measurments Risk at sampling date Nuchal translucency MoM Nasal bone 102 CRL measuring NT MBI Risk at sampling date 1:21773 Sonographer DR.SAHIL LC Qualifications in measuring NT MBI Trisomy 13/18 <1:1000 Trisomy 21 Risk <1:1000 Trisomy 21 (with nuchal translucency) is below the cut off, which indicates a ow wrisk.						Date of Report PRISCA	04-03-19 5.0.2.37
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Risks at sampling date Nuchal translucency MoM Age Risk 1:815 Biochemical T21 Risk 1:2773 Combined Trisomy 21 Risk <1:1000	fb-hCG	26.98	ng/ml	0.60	Scan Date		02-03-19
Age Risk 1:815 Biochemical T21 Risk 1:2773 Combined Trisomy 21 Risk <1:10000					CRL measurm	ents	55.5
Biochemical T21 Risk 1:2773 Sonographer DR.SAHIL LC Combined Trisomy 21 Risk <1:10000	Risks at sampling date				Nuchal translucency MoM 0.55		
Combined Trisomy 21 Risk <1:10000	Age Risk			1:815	Nasal bone		Present
Trisomy 13/18 <1:10000	Biochemical T21 Risk			1:2773	Sonographer		DR.SAHIL LOOMBA
Risk The calculated risk for Trisomy 21 Screening) 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 calculated risk by PRISCA depends on the accuracy the information provided by the referring physician. Ple note that risk calculations are statistical approach and had diagnostic values! The patient combined risk presumes the NT	Combined Trisomy 21 Ris	k		<1:10000	Qualifications	in measuring NT	MBBS,DNB
Risk 1:10 1:10	Trisomy 13/18			<1:10000			
 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 calculated risk by PRISCA depends on the accuracy the information provided by the referring physician. Ple note that risk calculations are statistical approach and ha diagnostic values! The patient combined risk presumes the NT 							
Trisomy 13/18 + NT The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.	1:10 1:100 1:250 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:100 1:250 1:100 1:100 1:250 1:100 1:100 1:250 1:100 1:100 1:100 1:100 1:100 1:100 1:100 1:100 1:100 1:100 1:1000	omy 13/18	5 37 39 41 4 8 (with nuc	Cut off 13 45 47 49 Age	translucency) low risk. After the resul expected that a same data, then pregnancy. The calculated the information note that risk c diagnostic valu The patient cor	t of the Trisomy 21 tes among more than 1000 re is one woman with a l risk by PRISCA depe n provided by the refer calculations are statistic ues! nbined risk presumes th	which indicates a st (with NT) it is 0 women with the a trisomy 21 ends on the accuracy of tring physician. Please cal approach and have no