Date of Report	23-06-2021
PRISCA	5.0.2.37

Mane MRS ANUBHA Patient ID 012106200021 Birthday 21-09-1986 Sample ID 10872922 Age at delivery 35.2 Sample Date 20/06/2021 Correction factors Fetuses 1 IVF unknown Weight in kg 78 Diabetes unknown Origin Asian Biochemical Data Parameter Value Corr MoM Age Risk 1:414 AFP 25.6 ng/ml 0.54 Biochemical Trisonny 21 Risk 1:270 ILE3 1.5 ng/ml 1.18 Neural Tube Defect Risk Below the cut off the CG 21011.5 mIU/ml 1.22 Trisomy 18 <1:10000 Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age Method BPD(<>Hadlock) Biochemical Trisony 21 test it is expected that among more than 270 women with tesame data, there is one woman with a trisony 21 pregnancy and 269 women with						PRISCA	5.0.2.37	
Birthday 21-09-1986 Sample ID 10872922 Age at delivery 35.2 Sample Date 20/06/2021 Correction factors Fetuses 1 IVF unknown Previous trisomy 21 unknown Weight in kg 78 Diabetes unknown Pregnancies unknown Smoker Unknown Origin Asian Biochemical Data Parameter Value Corr MoM Age Risk 1:414 AFP 25.6 ng/ml 0.54 Biochemical Trisomy 21 Risk 1:270 Neural Tube Defect Risk Below the cut off Trisomy 18 <1:10000 Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age 19+0 Method BPD(<>Hadlock) BPD(<>Hadlock) The calculated risk for Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancies. The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician. Please note that the risk calculations are statistical aapproaches and have no diagnostic value!	Patient Data	Value						
Age at delivery 35.2 Sample Date 20/06/2021 Correction factors Fetuses 1 IVF unknown Previous trisomy 21 unknown Weight in kg 78 Diabetes unknown Origin Asian Biochemical Data Parameter Value Corr MoM Age Risk 1:414 AFP 25.6 ng/ml 0.54 Biochemical Trisomy 21 Risk 1:270 uE3 1.5 ng/ml 1.18 Neural Tube Defect Risk Below the cut off the CG 21011.5 mIU/ml 1.22 Trisomy 18 < 1:10000 Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age 19+0 BPD(>Hadlock) Method BPD(>Hadlock) Risk After the result of the Trisomy 21 is below the cut off which represents a low risk. After the result of the Trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Name		MRS	ANUBHA	Λ	Patient ID	012106200021	
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Fetuses 1 IVF unknown Previous trisomy 21 unknown Weight in kg 78 Diabetes unknown Smoker Unknown Origin Asian Biochemical Data Parameter Value Corr MoM AFP 2.5.6 ng/ml 0.54 Biochemical Trisomy 21 Risk 1:270 Neural Tube Defect Risk Below the cut off Trisomy 18 <1:10000 Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age 19+0 Method BPD(<>Hadlock) Biochemical Trisomy 21 Screening) The calculated risk for Trisomy 21 iest it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Age at delivery	35.2			Sample Date	20/06/2021		
Weight in kg Total Diabetes Wisks at sampling date Risks at sampling date Parameter Value Corr MoM AFP 25.6 ng/ml 1.5 ng/ml 1.18 Neural Tube Defect Risk Below the cut off Trisomy 21 Risk 1:270 Neural Tube Defect Risk Below the cut off Trisomy 18 Clitrasound Data Gestational age 19+0 Method BPD(>Hadlock) Method BPD(>Hadlock) Risk The calculated risk for Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancies. The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician. Please note that the risk calculations are statistical aapproaches and have no diagnostic value!	Correction factors	S						
Smoker Unknown Origin Asian	Fetuses	1	IVF		unknown	Previous trisomy 21	unknown	
Risks at sampling date Parameter Value Corr MoM AFP 25.6 ng/ml 0.54 Biochemical Trisomy 21 Risk 1:270 nE3 1.5 ng/ml 1.18 Neural Tube Defect Risk Below the cut off hCG 21011.5 mIU/ml 1.22 Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age 19+0 Method BPD(≪Hadlock) BPD(≪Hadlock) Method BPD(≪Hadlock) Risk Trisomy 18 ≤1:10000 The calculated risk for Trisomy 21 Screening) The calculated risk for Trisomy 21 is below the cut off which represents a low risk. After the result of the Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Weight in kg	78	Diabetes	}	unknown	Pregnancies	unknown	
Parameter Value Corr MoM Age Risk 1:414 AFP 25.6 ng/ml 0.54 Biochemical Trisomy 21 Risk 1:270 Neural Tube Defect Risk Below the cut off Trisomy 18 <1:10000 Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age 19+0 Method BPD(<>Hadlock) BPD(<>Hadlock) Risk 1.10 County Syndrome Risk (Trisomy 21 Screening) The calculated risk for Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Smoker	Unknown	Origin		Asian			
AFP 25.6 ng/ml 0.54 Biochemical Trisomy 21 Risk 1:270 Neural Tube Defect Risk Below the cut off Trisomy 18 <1:10000 Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age 19+0 Method BPD(\$Hadlock) BPD(\$Hadlock) BPD(\$Hadlock) Risk 1:270 Neural Tube Defect Risk Below the cut off Trisomy 18 <1:10000 The calculated risk (Trisomy 21 Screening) The calculated risk for Trisomy 21 is below the cut off which represents a low risk. After the result of the Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Biochemical Data	l			Risks at sampl	ing date		
Neural Tube Defect Risk Below the cut off Trisomy 18	Parameter	Value	Co	orr MoM	Age Risk		1:414	
Inhibin 301.2 IU/ml 1.6 Ultrasound Data Gestational age 19+0 Method BPD(<>Hadlock) BPD(<>Hadlock) Risk Trisomy 18	AFP	25.6 1	ng/ml	0.54	Biochemical T	risomy 21 Risk	1:270	
Ultrasound Data Gestational age 19+0 Method BPD(<>Hadlock) Risk 10 Risk 10 Cutoff Down's Syndrome Risk (Trisomy 21 Screening) The calculated risk for Trisomy 21 is below the cut off which represents a low risk. After the result of the Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	uE3	1.5	ng/ml	1.18	Neural Tube I	Defect Risk	Below the cut off	
Ultrasound Data Gestational age 19+0 Method BPD(<>Hadlock) Risk 19+0 Risk The calculated risk for Trisomy 21 is below the cut off which represents a low risk. After the result of the Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	hCG	21011.5	m I U/ml	1.22	Trisomy 18		<1:10000	
Gestational age 19+0 Method BPD(<>Hadlock) The calculated risk for Trisomy 21 is below the cut off which represents a low risk. After the result of the Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Inhibin	301.2	IU/ml	1.6				
which represents a low risk. Method BPD(<>Hadlock) After the result of the Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Ultrasound Data				Down's Syndr	ome Risk (Trisomy 2	21 Screening)	
After the result of the Trisomy 21 test it is expected that among more than 270 women with the same data, there is one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Gestational age	which repre				hich represents a low risk.		
one woman with a trisomy 21 pregnancy and 269 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 the risk calculations are statistical aapproaches and have no diagnostic value!	Method				_			
not affected pregnancies. The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician. Please note that the risk calculations are statistical aapproaches and have no diagnostic value!					_		*	
The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician. Please note that the risk calculations are statistical aapproaches and have no diagnostic value!	Risk						ancy and 209 women with	
note that the risk calculations are statistical aapproaches and have no diagnostic value! 1:100	1:10					•	•	
1:100 1:250						-		
1:250 Cut off			/		have no diagno	ostic value!	• •	
1:250 Cut off Trisomy 18	1: 00							
Trisomy 18	1: 2 50		/ Cu	t off	/D: 10			
					Trisomy 18			
The calculated risk for Trisomy 18 is <1:10000, which indicates a low risk	1:1000							
indicates a low risk Neural Tube Defect (NTD) Screening							ning	

The laboratory can not be held responsible for their impact on the risk assessment! Calculated value has no diagnostic value!

13 15 17 19 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49 Age

risk area for neural tube defects.

The corrected MoM for AFP (0.54) is located in the low