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Date of Report 19/4/2022 PRISCA 5.1.0.17

					PRISCA	5.1.0.17
Patient Data						
Name	MRS. RACHNA				Patient ID	012204180142
Birthday			12/10/1995		Sample ID	11451560
Age at delivery	26.11				Sample Date	18/04/2022
Correction factors						
Fetuses	1	IVF		unknown	Previous trisomy 21	unknown
Weight in kg	71	Diabetes		unknown	Pregnancies	unknown
Smoker	Unknown	Origin		Asian		
Biochemical Data				Risks at sampling date		
Parameter	Value	Cor	тт МоМ	Age Risk		1:1184
AFP	12.8 1	ng/ml	0.46	Trisomy 21 ris	sk	1:4079
uE3	0.37 ng/ml 1.21		Neural tube defects risk		1:2755	
hCG	19989.2 mIU/ml 0.47		Trisomy 18		<1:10000	
Ultrasound Data				Down's Syndre	ome Risk (Trisomy 21	Screening)
WOP	14+3			The calculated risk for Trisomy 21 (with NT) is below the cut off which indicates a low risk.		
Method	BPD (<>Hadlock)			After the result of the Trisomy 21 test it is expected		
			that among 4079 women with the same data, there is one woman with a trisomy 21 pregnancy and 4078			
Risk					ot affected pregnancies.	
Nisk				The calculated risk by PRISCA depends on the accuracy of the		
1:10				information provided by the referring physician. Please note that the risk calculations are statistical aapproaches and have no		
				diagnostic valu		51 0 de 110
		/				
1:100						
1:250			Out off	Trisomy 18		
1:1000				The calculated	l risk for Trisomy 18 is	s <1·10000 which
1:1000				The calculated risk for Trisomy 18 is <1:10000, which indicates a low risk		
1:10000			www.	Neural Tube 1	Defect (NTD) Screenir	ng

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

area for neural tube defects.

The corrected MoM for AFP (0.46) is located in the low risk