

Trisomy 13/18+NT

1:6442, which indicates a low risk

The calculated risk for Trisomy 13/18 (with NT) is

Risk Above Cut Off



The laboratory cannot be hold responsible for their impact

on the risk assessment! Calculated risks have no diagnostic

Risk below Age risk

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				Date of Report PRISCA	1/5/2022 5.1.0.17
Patient Data					
Name	MRS. M	ANITA DEVI	Patient ID		052204300038
Birthday		27/12/1986	Sample ID		11459466
Age at term		35.09	Sample Date		30/4/2022
Gestational age		13+2			
Correction factors	<u> </u>				
Fetuses	1 IVF		unknown	Previous trisomy 21	unknown
Weight in kg	71 Diabetes		NO	Pregnancies	unknown
Smoker	NO Origin		Asian		
Biochemical Data			Ultrasound Data		
Parameter	Value	Corr Mom	Gestational ago	2	12+2
PAPP-A	$3.4~\mathrm{mIU/ml}$	0.53	Method		CRL (<>Robinson)
fb-hCG	38.1 ng/ml	0.78	Scan date		23/4/2022
Risks at sampling date			Nuchal Translucency 2		
Age Risk		1:260	Nuchal Transl	ucency MoM	1.33
Biochemical T21 risk		1:609	Nasal Bone		Present
Combined T21 risk		1:935			
Trisomy 13/18+NT		1:6442			
Risk			Down's Syndrome Risk (Trisomy 21 Screening)		
Risk 1:10			The calculated risk for Trisomy 21 (with NT) is below the cut off, which represents a low risk.		
1:1000 1:1000 1:10000 13 15 17 19 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49			After the result of the Trisomy 21 test it is expected that among 935 women with the same data, there is one woman with a trisomy 21 pregnancy 934 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!		

values

Risk above Age Risk