Date of Report
 23/6/2022

 PRISCA
 5.1.0.17

					PRISCA	5.1.0.17
Patient Data	Value					
Name	MRS. RAJNI			[Patient ID	012206220213
Birthday	19-6-1994				Sample ID	11604104
Age at delivery	28.11				Sample Date	22/06/2022
Correction factors						
Fetuses	1	IVF		unknown	Previous trisomy 21	unknown
Weight in kg	43	Diabetes		NO	Pregnancies	unknown
Smoker	NO	Origin		Asian		
Biochemical Data				Risks at sampl	ling date	
Parameter	Value	Co	отт МоМ	Age Risk	-	1:1120
AFP	14.9 n	ıg/ml	0.41	Biochemical T	risomy 21 Risk	1:945
uE3	0.53 n	ng/ml	1.21	Neural Tube I	Defect R isk	Low risk area
hCG	38358.9 n	m I U/ml	0.77	Trisomy 18		<1:10000
Inhibin	287.3 I	U/ml	1.38			
Ultrasound Data				Down's Syndr	ome Risk (Trisomy 2	21 Screening)
Gestational age	1	4+6			d risk for Trisomy 21	is below the cut off
Method	BPD (<>Hadlock)			which represents a low risk. After the result of the Trisomy 21 test it is expected that		
-		,	- ,	among 945 wo	omen with the same d	ata, there is one woman
Risk				with a trisomy affected pregna	21 pregnancy and 94- ancies.	4 women with not
Risk 1:10				The calculated risk by PRISCA depends on the accuracy of		
1.10				the information provided by the referring physician. Please note that the risk calculations are statistical aapproaches and		
				have no diagno		usucai aapproacnes and
		/				
1: 00						
1:250 Cut off				Trisomy 18		
				The calculated risk for Trisomy 18 is <1:10000, which		
1:1000				indicates a low risk		
				Neural Tube 1	Defect (NTD) Screen	ing
1:10000				The corrected	MoM for AFP (0.41) is located in the low
13 15 17 19 21 2	3 25 27 29 31 33 35	37 39 41 43 4	5 47 49 Age		eural tube defects.	, is received in the low
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The laboratory can not be held responsible for their impact on the risk assessment! Calculated value has no diagnostic value!