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Date of Report	5/9/2022
PRISCA	5.1.0.17

			TMSCA	3.1.0.17
Patient Data				
Name		MRS. ANCHAL	Patient ID	012209020087
Birthday		1/8/1998	Sample ID	11576888
Age at delivery		24.05	Sample Date	3/9/2022
Correction factors				
Fetuses	1	IVF	unknown Previous trisomy 21	unknown

Biochemical Data		Risks at sampling d	late		
Smoker	Unknown	Origin	Asian		
Weight in kg	60.8	Diabetes	unknown Preg	gnancies	unknown
Fetuses	1	IVF	unknown Prev	vious trisomy 21	unknown

Biochemical Data			Risks at sampling date	
Parameter	Value	Corr MoM	Age Risk	1:1403
AFP	33.2 ng/ml	0.8	Trisomy 21 risk	1:5313
uE3	1.2 ng/ml	1.28	Neural tube defects risk	<1:10000
hCG	22027.5 mIU/ml	0.84	Trisomy 18	<1:10000

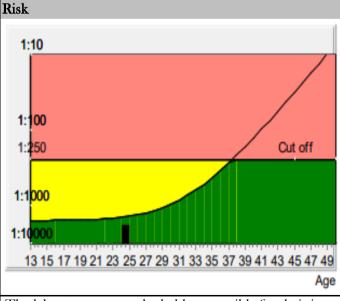
Ultrasound Data		Down's Syndrome Risk (Trisomy 21 Screening)		
WOD	17.0	The calculated risk for Trisomy 21 is below the cut off which		

WOP 17+2 Ine calculated risk for 1 risomy 2 indicates a low risk.

Method BPD (<>Hadlock) After the result of the Trisomy 21 test it is expected that among 5313 women with the same data, there is one woman with a trisomy 21 pregnancy and 5312 women with not afforded prographics.

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!



Trisomy 18

The calculated risk for Trisomy 18 is <1:10000, which indicates a low risk

Neural Tube Defect (NTD) Screening

The corrected MoM for AFP (0.80) is located in the low risk area for neural tube defects.

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

