

 Date of Report
 20/3/2023

 PRISCA
 5.2.0.13

1 IVF 47 Diabetes O Origin  1e .2 mIU/ml		Sample ID Sample Date  unknown  NO Asian	Previous trisomy 21 unk Pregnancies unk	60034 63974 /2023 nown	
Diabetes O Origin  Le L2 mIU/ml	25.2 13+3	Sample Date  unknown  NO  Asian	Previous trisomy 21 unk Pregnancies unk	/2023 nown	
Diabetes O Origin  Le L2 mIU/ml	13+3	unknown NO Asian	Previous trisomy 21 unk Pregnancies unk	nown	
Diabetes O Origin  Le L2 mIU/ml		unknown NO Asian	Pregnancies unk		
Diabetes O Origin  Le L2 mIU/ml	Corr Mom	NO Asian	Pregnancies unk		
Diabetes O Origin  Le L2 mIU/ml	Corr Mom	NO Asian	Pregnancies unk		
O Origin  Le  .2 mIU/ml	Corr Mom	Asian		nown	
ie .2 mIU/ml	Corr Mom		ata		
.2 mIU/ml	Corr Mom	Ultrasound Da	ata		
.2 mIU/ml	Corr Mom		Ultrasound Data		
				13+0	
- / -	0.62	Method	CRL (<>Robin	nson)	
.7 ng/ml	1.65	Scan date	13/3/	/2023	
		Nuchal translu	cency	1.28	
	1:998	Nuchal translu	cency MoM	0.9	
	1:639	Nasal bone	Pr	esent	
	1:3417				
	<1:10000				
		Down's Syndro	ome Risk (Trisomy 21 Screening)		
	Age	cut off, which a After the result expected that a same data, then pregnancy and The calculated the information note that the richave no diagno	represents a low risk.  It of the Trisomy 21 with NT test it is among 3417 women with the re is one woman with a trisomy 21 3416 women with not affected pregnancied risk by PRISCA depends on the accuracy in provided by the referring physician. Pleatisk calculations are statistical aapproaches a postic value!	es. 7 of se and	
v	13/18 (with	<1:10000  Cut off  33 35 37 39 41 43 45 47 49  Age  13/18 (with NT) is	Cut off  Cut off  Cut off  Cut off  The calculated cut off, which After the result expected that a same data, their pregnancy and The calculated the information note that the rihave no diagnotic that the risk association on the risk association of the risk association.	Down's Syndrome Risk (Trisomy 21 Screening)  The calculated risk for Trisomy 21(with NT) is below the cut off, which represents a low risk.  After the result of the Trisomy 21with NT test it is expected that among 3417 women with the same data, there is one woman with a trisomy 21 pregnancy and 3416 women with not affected pregnancie. The calculated risk by PRISCA depends on the accuracy the information provided by the referring physician. Plea note that the risk calculations are statistical aapproaches a have no diagnostic value!  The laboratory cannot be hold responsible for their impart on the risk assessment! Calculated risks have no diagnostic values	