

Date of Report 08-09-2023  
 PRISCA 5.2.0.13

| Patient Data       |            |
|--------------------|------------|
| Name               | MRS RADHA  |
| Birthdate          | 24-08-1996 |
| Age at Sample date | 27         |
| Gestational age    | 13+2       |

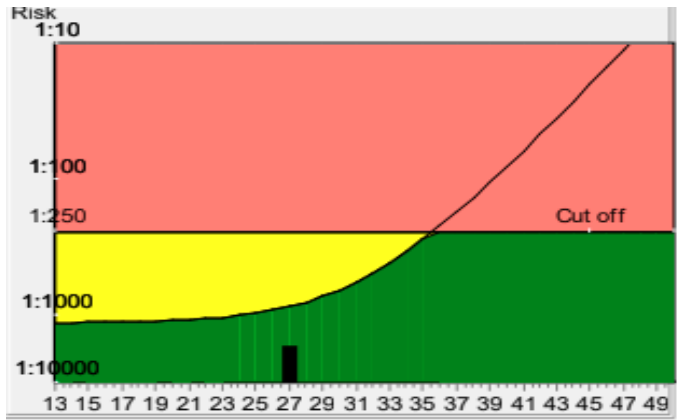
| Correction factors |               |
|--------------------|---------------|
| Fetuses            | 1 IVF         |
| Weight in kg       | 50.9 Diabetes |
| Smoker             | NO Origin     |

|         |                     |         |
|---------|---------------------|---------|
| unknown | Previous trisomy 21 | unknown |
| NO      | Pregnancies         | unknown |
| Asian   |                     |         |

| Biochemical Data |             |          | Ultrasound Data |                  |
|------------------|-------------|----------|-----------------|------------------|
| Parameter        | Value       | Corr Mom | Gestational age | 13+1             |
| PAPP-A           | 4.63 mIU/ml | 0.53     | Method          | CRL (<>Robinson) |
| fb-hCG           | 50.7 ng/ml  | 1.6      | Scan date       | 06-09-2023       |

| Risks at sampling date   |          |  | Ultrasound Data                |             |
|--------------------------|----------|--|--------------------------------|-------------|
| Age Risk                 | 1:880    |  | Crown rump length in mm        | 70          |
| Biochemical T21 risk     | 1:416    |  | Nuchal translucency MoM        | 1.02        |
| Combined trisomy 21 risk | 1:1734   |  | Nasal bone                     | PRESENT     |
| Trisomy 13/18 + NT       | <1:10000 |  | Sonographer                    | DR.HARENDER |
|                          |          |  | Qualifications in measuring NT | MBBS        |

| Risk |  | 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 21 test (with NT) it is expected that among 1734 women with the same data, there is one woman with a trisomy 21 pregnancy and 1733 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 approaches and have no diagnostic value!  
 The patient combined risk presumes that NT measurement was done according to accepted guidelines (Prenat Diagn 18:511-523; 1998).  
 The laboratory cannot be held responsible for their impact on the risk assessment! Calculated risks have no diagnostic values

**Trisomy 13/18+NT**  
 The calculated risk for Trisomy 13/18 (with NT) is <1:10000, which indicates a low risk

Risk Above Cut Off
  Risk above Age Risk
  Risk below Age risk