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					Date of Report PRISCA	10-10-2023 5.2.0.13	
Patient Data					Thubert	0.2.0.10	
ame MRS KAJAL KUMARI				RI Patient ID		012310090178	
Birthday			11-03-20	05 Sample ID		11521516	
Age at Sample date			1	8.6 Sample Date		09-10-2023	
Gestational age 13+1				3+1			
Correction factors					•		
Fetuses	1	IVF		unknown	Previous trisomy 21	unknown	
Weight in kg	45	Diabetes		NO	Pregnancies	unknown	
Smoker	NO	Origin		Asian			
Biochemical Data				Ultrasound D	Ultrasound Data		
Parameter	Value		Corr Mom	Gestational ag	e	12+3	
PAPP-A	4.57	mIU/ml	0.48	Method		CRL (<>Robinson)	
fb-hCG	29.2	ng/ml	0.84	Scan date		04-10-2023	
Risks at sampling date				Crown rump l	Crown rump length in mm 61		
Age Risk			1:1127	Nuchal translu	acency MoM	1.14	
Biochemical T21 risk	emical T21 risk		1:1742	Nasal bone	Nasal bone PRESEN		
Combined trisomy 21 risk			1:5237	Sonographer		DR DEEPIKA	
Trisomy 13/18 + NT			<1:10000	Qualifications	in measuring NT	MD	
Risk				Down's Syndr	ome Risk (Trisomy 21	Screening)	
1:10 1:10 1:100 1:250 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:100 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:250 1:100 1:100 1:250 1:1000 1:100		Ag	cut off, which After the result expected that and there is one wor 5236 women wi The calculated r information pro- the risk calculati diagnostic value The patient con done according 1998). The laboratory	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 5237 women with the same data, there is one woman with a trisomy 21 pregnancy and 5236 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! The patient combined risk presumes that NT measurement was done according to accepted guidelines (Prenat Diagn 18:511-523; 1998). The laboratory cannot be hold responsible for their impact on the risk assessment! Calculated risks have no diagnostic values			
which indicates a low risk Risk	Above Cu	ıt Off		Risk above Ag		Risk below Age risk	