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				Date of Report PRISCA	09-01-2024
Patient Data				PRISCA	5.2.0.13
Name		MRS NEHA	Patient ID		022401050004
Birthday			Sample ID		11815078
Age at Sample date			Sample Date		05-01-2024
Gestational age 12+4			_		
Correction factors					
Fetuses	1 IVF		unknown	Previous trisomy 21	unknown
Weight in kg	47.6 Diabetes		NO	Pregnancies	unknown
Smoker	NO Origin		Asian		
Biochemical Data			Ultrasound Data		
Parameter	Value	Corr Mom	Gestational age	2	12+4
PAPP-A	6.58 mIU/ml	0.91	Method		CRL (<>Robinson)
fb-hCG	138.2 ng/ml	3.45	Scan date		05-01-2024
Risks at sampling date			Crown rump length in mm 61.8		
Age Risk		1:705	Nuchal translucency MoM 0.0		0.69
Biochemical T21 risk		1:163	Nasal bone PRESEN		PRESENT
Combined trisomy 21 risk		- 1:983	Sonographer DR MEENU SOL		DR MEENU SOLANKI
Trisomy 13/18 + NT		<1:10000	Qualifications	in measuring NT	RADIOLOGIST
Risk			Down's Syndrome Risk (Trisomy 21 Screening)		
1:10 1:100 1:250 1:10000 1:10000 </td <td>27 29 31 33 35 37 39 4 omy 13/18 (with NT) 5</td> <td>Age</td> <td colspan="3">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 983 women with the same data, there is one woman with a trisomy 21 pregnancy and 982 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</td>	27 29 31 33 35 37 39 4 omy 13/18 (with NT) 5	Age	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 983 women with the same data, there is one woman with a trisomy 21 pregnancy and 982 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		
	x Above Cut Off		Risk above Age	e Risk	Risk below Age risk