

The calculated risk for Trisomy 13/18 (with NT) is <1:10000,

which indicates a low risk

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Date of Report 28-07-2024

risk assessment! Calculated risks have no diagnostic values

			I	PRISCA	5.2.0.13
Patient Data					
Name . K	HUSBU W/O NAV	EEN YADAV	Patient ID		12407270140
Birthday		10-11-2000	Sample ID		11884194
Age at Sample date		23.7	Sample Date		27-07-2024
Gestational age		12+3			
Correction factors					
Fetuses	1 IVF		unknown I	Previous trisomy 21	unknown
Weight in kg	44.4 Diabetes		NO I	Pregnancies	unknown
Smoker	NO Origin		Asian		
Biochemical Data			Ultrasound Data		
Parameter	Value	Corr Mom	Gestational age		11+6
PAPP-A	4.9 mIU/ml	0.66	Method		CRL(<>Robinson)
fb-hCG	41.7 ng/ml	0.97	Scan date		23-07-2024
Risks at sampling date			Crown rump lei	ngth in mm	51.9
Age Risk		1:1006	Nuchal transluc	ency MoM	1.44
Biochemical T21 risk		1:2554	Nasal bone		present
Combined trisomy 21 ris	sk	1:2436	Sonographer		DR. VIKASH
Trisomy 13/18 + NT		<1:10000	Qualifications in	n measuring NT	MD
Risk			Down's Syndron	me Risk (Trisomy 21 S	creening)
1:100			The calculated risk for Trisomy 21 test (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 amog 2436 women with the same data, there is one woman with a trisomy 21 pregnancy and 2435 women with not affected pregnancis. The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician. Please note that		
1:1000 1:10000 13 15 17 19 21 23 25 3 Trisomy 13/18 + NT			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		