

which indicates a low risk

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Date of Report 28-07-2024 PRISCA 5.2.0.13

					PRISCA	5.2.0.13
Patient Data						
Name	MRS. YASHIKA			Patient ID		22407270011
Birthday	07-07-1998			Sample ID		11872752
Age at Sample date	ate 26.1					27-07-2024
Gestational age 13+4						
Correction factors						
Fetuses	1	IVF		unknown	Previous trisomy 21	unknown
Weight in kg	56.2	Diabetes		NO	Pregnancies	unknown
Smoker	NO	Origin		Asian		
Biochemical Data				Ultrasound Data		
Parameter	Value		Corr Mom	Gestational age	e	13+4
PAPP-A	7.5	mIU/ml	0.88	Method		CRL(<>Robinson)
fb-hCG	16.4	ng/ml	0.59	Scan date		27-07-2024
Risks at sampling date				Crown rump l	ength in mm	74.8
Age Risk			1:944	Nuchal translu	icency MoM	0.71
Biochemical T21 risk			<1:10000	Nasal bone		present
Combined trisomy 21 risk			<1:10000	Sonographer		DR. MEENU SOLANKI
Trisomy 13/18 + NT			<1:10000	Qualifications	in measuring NT	
Risk				Down's Syndrome Risk (Trisomy 21 Screening)		
1:10		/	Cut off	the cut off, who After the result of amog more than	nich represents a low ri	th NT) it is expected that
1:1,000				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		
13 15 17 19 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49 Trisomy 13/18 + NT				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		