

which indicates a low risk

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Date of Report 05-08-2024 PRISCA 5.2.0.13

				PRISCA	5.2.0.13
Patient Data					
Name MRS. RASHMI KUMARI			Patient ID		12408040032
Birthday		24-07-1988	Sample ID		11787190
Age at Sample date 36.0			Sample Date		04-08-2024
Gestational age 13+0					
Correction factors					
Fetuses	1 IVF		unknown	Previous trisomy 21	unknown
Weight in kg	57.5 Diabe	tes	NO	Pregnancies	unknown
Smoker	NO Origin	1	Asian		
Biochemical Data			Ultrasound Data		
Parameter	Value	Corr Mom	Gestational ag	e	12+6
PAPP-A	4.68 mIU/1	ml 0.69	Method		CRL (<>Robinson)
fb-hCG	36.2 ng/ml	1.09	Scan date		03-08-2024
Risks at sampling date			Crown rump length in mm 66.2		
Age Risk	ge Risk 1:219		Nuchal translucency MoM 0.71		
Biochemical T21 risk 1:476		Nasal bone		PRESENT	
Combined trisomy 21 risk 1:2643			Sonographer		DR.
Trisomy 13/18 + NT <1:10000		Qualifications	in measuring NT	MBBS	
Risk		Down's Syndrome Risk (Trisomy 21 Screening)			
1:10 1:100 1:250 1:1000 1:1000 13 15 17 19 21 23 25 27 Trisomy 13/18+NT		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 2643 women with the same data, there is one woman with a trisomy 21 pregnancy and 2642 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			
The calculated risk for Trisomy 13/18 (with NT) is <1:10000, which indicates a low risk			risk assessment! Calculated risks have no diagnostic values		