

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

which indicates a low risk

\*Free Home Sample Collection 9999 778 778



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Date of Report 16-08-2024

risk assessment! Calculated risks have no diagnostic values

				PRISCA	5.2.0.13
Patient Data					
Name	MRS. RO	OPA TIWARI	Patient ID		12408130260
Birthday		12-12-1998	Sample ID		11859328
Age at Sample date		25.7	Sample Date		13-08-2024
Gestational age		13+4			
Correction factors					
Fetuses	1 IVF		unknown	Previous trisomy 21	unknown
Weight in kg	64 Diabetes	S	NO	Pregnancies	unknown
Smoker	NO Origin		Asian		
Biochemical Data			Ultrasound Data		
Parameter	Value	Corr Mom	Gestational ago	e	13+1
PAPP-A	6.9 mIU/ml	0.94	Method		CRL (<>Robinson)
fb-hCG	35.7 ng/ml	1.33	Scan date		11-08-2024
Risks at sampling date			Crown rump length in mm 65		
Age Risk 1:964			Nuchal translucency MoM 0.84		
Biochemical T21 risk		1:2740	Nasal bone		PRESENT
Combined trisomy 21 risk		<1:10000	Sonographer		DR. SHRUTI SANGWAN
Trisomy 13/18 + NT		<b>-</b> <1:10000	Qualifications	in measuring NT	MBBS
Risk		Down's Syndrome Risk (Trisomy 21 Screening)			
1:10			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 more than 10000 women with the same data, there is one woman with a trisomy 21 pregnancy.		
1:1000			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		