

which indicates a low risk

\*Free Home Sample Collection 9999 778 778



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Date of Report 18-09-2024 PRISCA 5.2.0.13

					PRISCA	5.2.0.13
Patient Data						
Name	MRS. ROHINI			Patient ID		12409170194
Birthday	13-10-1995			Sample ID		11994367
Age at Sample date 28.9				Sample Date		17-09-2024
Gestational age			13+1			
Correction factors						
Fetuses	1	IVF		unknown	Previous trisomy 21	unknown
Weight in kg	67	Diabetes		NO	Pregnancies	unknown
Smoker	NO	Origin		Asian	ı	
Biochemical Data				Ultrasound Data		
Parameter	Value		Corr Mom	Gestational ag	e	13+0
PAPP-A	6.3	mIU/ml	1.05	Method		CRL (<>Robinson)
fb-hCG	37.4	ng/ml	1.23	Scan date		16-09-2024
Risks at sampling date				Crown rump length in mm 68		
Age Risk			1:744	Nuchal translu	icency MoM	1.14
Biochemical T21 risk			1:3197	Nasal bone		PRESENT
Combined trisomy 21 risk			1:8557	Sonographer		DR. SHRUTI
Trisomy 13/18 + NT			<1:10000	Qualifications	in measuring NT	MD
Risk				Down's Syndrome Risk (Trisomy 21 Screening)		
1:100 1:250 Cut off 1:1000 1:10000 1:10000 1:10000 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 8557 women with the same data, there is one woman with a trisomy 21 pregnancy and 8556 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		