

which indicates a low risk

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Date of Report 21-09-2024 PRISCA 5.2.0.13

					PRISCA	5.2.0.13	
Patient Data							
Name	MRS. MAMTA			Patient ID		12409190100	
Birthday	01-01-1993			Sample ID		11860358	
Age at Sample date 31.7				Sample Date		19-09-2024	
Gestational age 12+2							
Correction factors							
Fetuses	1	IVF		unknown	Previous trisomy 21	unknown	
Weight in kg	63	Diabetes		NO	Pregnancies	unknown	
Smoker	NO Origin			Asian			
Biochemical Data				Ultrasound Data			
Parameter	Value		Corr Mom	Gestational age	e	12+1	
PAPP-A	4.8	mIU/ml	1.03	Method		CRL (<>Robinson)	
fb-hCG	54.3 a	ng/ml	1.39	Scan date		18-09-2024	
Risks at sampling date				Crown rump length in mm 57			
Age Risk			1:503	Nuchal translu	icency MoM	0.89	
Biochemical T21 risk			1:1556	Nasal bone		PRESENT	
Combined trisomy 21 risk			1:7528	Sonographer		DR. ARSHBIR SINGH	
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 1:1(000) 1:1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				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 7528 women with the same data, there is one woman with a trisomy 21 pregnancy and 7527 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!	risk assessment! Calculated risks have no diagnostic values		