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				Date of Report PRISCA	22-01-2025 5.2.0.13	
Patient Data						
Name	MRS. TANVI SH	RIVASTAVA	Patient ID		12501200195	
Birthday		26-12-199	1 Sample ID		11959679	
Age at Sample date		33.	1 Sample Date		20-01-2025	
Gestational age		13+	2			
Correction factors				1		
Fetuses	1 IVF		unknown	Previous trisomy 21	unknown	
Weight in kg	57.2 Diabetes		NO	Pregnancies	unknown	
Smoker	NO Origin		Asian			
Biochemical Data			Ultrasound D	Ultrasound Data		
Parameter	Value	Corr Mom	Gestational ag	e	12+4	
PAPP-A	6.7 mIU/ml	0.88	Method		CRL (<>Robinson)	
fb-hCG	23.5 ng/ml	0.77	Scan date		16-01-2025	
Risks at sampling date			Crown rump length in mm 61.2			
Age Risk		1:413	Nuchal translu	Icency MoM	0.81	
Biochemical T21 risk		1:3469	Nasal bone		PRESENT	
Combined trisomy 21 risk	κ.	<1:10000	Sonographer		DR.	
Trisomy 13/18 + NT		<1:10000	Qualifications	in measuring NT	MBBS	
Risk			Down's Syndrome Risk (Trisomy 21 Screening)			
1:10 1:20 1:20 1:20 1:20 1:20 1:100 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20 1:20			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. 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 risk assessment! Calculated risks have no diagnostic values			
which indicates a low risk	omy 13/18 (with NT) Above Cut Off	is <1:10000,	-	Calculated risks have no o	-	