Prisca 5.2.0.13

Date of report: 14/02/2025

JITM Diagnostics

Patient data						
Name	MRS. IND	RA	Patient ID			
Birthday	8/04/1996		Sample ID			2502020322/NOD
Age at sample date	28.8		Sample Date		11/02/2025	
Gestational age	13 ·	+ 3				
Correction factors						
Fetuses 1	IVF		no	Previous triso	my 21	no
Weight 58.9	diabetes		no	pregnancies		
Smoker no	Origin		Asian			
Biochemical data			Ultrasound da	ta		
Parameter Value	Corr. N	MoM	Gestational	age		13 + 2
PAPP-A 1.31 mIU/m	I ().22	Method CRL Robinsor			
fb-hCG 41.1 ng/ml		1.01	Scan date 10/02/2025			
Risks at sampling date			Crown rump length in mm			7
Age risk	1:	758	Nuchal translucency MoM 0.66			
Biochemical T21 risk	1	1:79	Nasal bone preser			
Combined trisomy 21 risk	1:	588	Sonographe	r	DR. KUSH I	DUGAD MBBS MI
Trisomy 13/18 + NT				Qualifications in measuring NT N Trisomy 21		
1:10 1:00 1:250 Cut off 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 1:1000 Age Trisomy 13/18 + NT The calculated risk for Trisomy 13/18 (with nuchal translucency) is 1:3346, which represents a low risk.			The calculated risk for Trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low risk. After the result of the Trisomy 21 test (with NT) it is expected that among 588 women with the same data, there is one woman with a trisomy 21 pregnancy and 587 women with not affected pregnancies. The PAPP-A level is low. The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician. Please note that risk calculations are statistical approaches and have no diagnostic value! The patient combined risk presumes the NT measurement was done according to accepted guidelines (Prenat Diago 18: 511-523 (1998)). The laboratory can not be hold responsible for their impact on the risk assessment ! Calculated risks have no diagnostic value!			