Prisca 5.2.0.13

Date of report: 6/11/2024

JITM Diagnostics

MRS. SAKSHI	Patient ID		
13/10/1997	Sample ID 2411009705		2411009705/NOD
27.1	•		6/11/2024
13 + 2			
IVF	no	Previous trisomy 21	no
diabetes	no	pregnancies	
Origin	Asian		
	Ultrasound data		
Corr. MoM	Gestational	age	13 + 1
nl 0.68	Method CRL Robin		CRL Robinson
0.61	Scan date 5/11/2024		
	Crown rump length in mm 72.6		
1:878	Nuchal translucency MoM 0.6		0.66
1:6365	Nasal bone		present
<1:10000	• '		DR. NEERJA CHOPRA
<1:10000	Qualifications in measuring NT		M.D
Cut off 85 37 39 41 43 45 47 49 Age 3/18 (with nuchal	Qualifications in measuring NT Trisomy 21 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 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 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 Diagn 18: 511-523 (1998)). The laboratory can not be hold responsible for their impact on the risk assessment! Calculated risks have no diagnostic value!		
	13/10/1997 27.1 13 + 2 IVF diabetes Origin Corr. MoM ml 0.68 0.61 1:878 1:6365 <1:10000 <1:10000 Cut off	IVF no diabetes no Origin Asian Corr. MoM Gestational Method Scan date Crown rump 1:878 Nuchal trans 1:6365 <1:10000 <1:10000	IVF diabetes Origin Origin One IVF Diabetes Origin Asian One IVItrasound data Corr. MoM Method Scan date Crown rump length in mm 1:878 Nuchal translucency MoM Nasal bone Sonographer Qualifications in measuring NT Trisomy 21 The calculated risk for Trisomy translucency) is below the cut low risk. After the result of the Trisomy 21 expected that among more than same data, there is one woman vergenancy. The calculated risk by PRISCA dof the information provided by the Please note that risk calculations approaches and have no diagnos. The patient combined risk presur was done according to accepted 18: 511-523 (1998)). The laboratory can not be hold re on the risk assessment! Calcular diagnostic value!