## JITM DIAGNOSTIC

Date of report:	9/11/2024
Prisca	5.2.0.13

Patient data			
Name	MRS. SHAGUN	Patient ID	
Birthday	18/11/1996	Sample ID	2411015769/NOD
Age at sample date	28.0	Sample Date	e 8/11/2024
Gestational age	12 + 1		
Correction factors			
Fetuses 1	IVF	no	Previous trisomy 21 no
Weight 54.6	diabetes	no	pregnancies
Smoker no	Origin	Asian	
Biochemical data		Ultrasound da	ata
Parameter Value	Corr. MoM	Gestational age 12 + 0	
PAPP-A 1.72 mIU/m	ol 0.46	Method CRL Robinson	
fb-hCG 28.9 ng/ml	0.60	Scan date 7/11/2024	
Risks at sampling date		Crown rump length in mm 56.3	
Age risk	1:786	Nuchal translucency MoM 0.81	
Biochemical T21 risk	1:2134	Nasal bone present	
Combined trisomy 21 risk	<1:10000	Sonographer DR. (MRS.) NEERJA CHOPRA	
Trisomy 13/18 + NT	<1:10000	Qualifications in measuring NT MD	
Misk Trisomy 21   1:10 The calculated risk for Trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low risk.   1:1000 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.   1:1000 The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician.   1:1000 The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician.   1:1000 The calculated risk presumes the NT measurement was done according to accepted guidelines (Prenat Diagn 18: 511-523 (1998)).   1:10000 The laboratory can not be hold responsible for their impact on the risk assessment ! Calculated risks have no diagnostic value!   Trisomy 13/18 + NT The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.			

Sign of Physician