Prisca 5.2.0.13

Date of report: 17/04/2025

Patient data				
Name	MRS. KAVITA		Patient ID	
Birthday	12/09/1998	Sample ID	2504033821/NOD	
Age at sample date	26.6	Sample Date	e 16/04/2025	
Gestational age	nge 12 + 3			
Correction factors				
Fetuses 1	IVF	no	Previous trisomy 21 no	
Weight 52	diabetes	no	pregnancies	
Smoker no	Origin	Asian		
Biochemical data		Ultrasound data		
Parameter Value	Corr. MoM	Gestational age 12 + 2		
PAPP-A 4.8 mIU/m	1.06	Method CRL Robinson		
fb-hCG 17.8 ng/ml	0.37	Scan date 15/04/2025		
Risks at sampling date			Crown rump length in mm 60.5	
Age risk	1:880	1		
Biochemical T21 risk	<1:10000	l ' '		
Combined trisomy 21 risk			Sonographer	
Trisomy 13/18 + NT	<1:10000 Qualifications in measuring NT			
KISK 1:10		Trisomy 21	ated risk for Trisomy 21 (with nuchal	
1:1000 1:10000 1:10000 13 15 17 19 21 23 25 27 29 31 33 33 Trisomy 13/18 + NT The calculated risk for trisomy 13 translucency) is < 1:10000, which risk.	Age	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 free beta HCG 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 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!		

Sign of Physician