Prisca
 5.2.0.13

 Date of report:
 3/12/2024

JITM Diagnostics

Patient data					
Name MR	MRS. HIMANSHI SINGHLA		Patient ID		
Birthday	6/08/1994		Sample ID		2412001879/NOD
Age at sample date 30.3		Sample Date		2/12/2024	
Gestational age 13 + 3					
Correction factors					
Fetuses	1 IVF		no	Previous trisomy 21	no
Weight 79.	4 diabetes		no	pregnancies	
Smoker n	o Origin		Asian		
Biochemical data	-		Ultrasound da	ata	
Parameter Value		Corr. MoM	Gestational age		13 + 3
PAPP-A 2.85 ml	/ml	0.70	Method		CRL Robinson
fb-hCG 12.3 ng/i	nl	0.33			2/12/2024
Risks at sampling date		Crown rump length in mm		75.7	
Age risk 1:640		Nuchal translucency MoM		0.70	
Biochemical T21 risk <1:10000		Nasal bone		present	
Combined trisomy 21 risk <1:10000		Sonographer		DR. NEERJA CHOPRA	
Trisomy 13/18 + NT <1:10000		Qualifications in measuring NT		M.D	
Risk 1:10 1:00 1:250 Cut off 1:1000 1:1000 1:10000 1:10000 1:10000 1:110000 1:10000 Trisomy 13/18 + NT The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.			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 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