Prisca 5.2.0.13

Date of report: 3/12/2024

JITM Diagnostics

Patient data					
Name MRS. HIMANSHI SINGHLA			Patient ID		
Birthday	6/08/1994		Sample ID		2412001879/NOD
•			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 no	Origin		Asian		
Biochemical data			Ultrasound da	ata	
Parameter Value	(Corr. MoM	Gestational	age	13 + 3
PAPP-A 2.85 mIU/m	nl	0.70	Method		CRL Robinson
fb-hCG 12.3 ng/ml		0.33	Scan date		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			Nasal bone		present
Combined trisomy 21 risk <1:10000			3 1		DR. NEERJA CHOPRA
Trisomy 13/18 + NT <1:10000			Qualifications in measuring NT M.D Trisomy 21		
1:1000 1:10000 1:10000 1:110000 1:10000 1:10000 Age Trisomy 13/18 + NT The calculated risk for trisomy 13/18 (with nuchal translucency) is < 1:10000, which represents a low risk.			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