Date of report: 13/05/2025

## JITM Diagnostics

Patient data				
lame MRS. RAJNI		Patient ID		
Birthday	29/10/1992		Sample ID 2505022751/N0	
Age at sample date	32.5		Sample Date 12/05	
Gestational age 13 + 1				
Correction factors				
Fetuses 1	IVF	no Previous trisomy 21 no		
Weight 62.9	diabetes	no pregnancies		
Smoker no	Origin	Asian		
Biochemical data	Ultrasound data			
Parameter Value	Corr. MoM	Gestational age 12 + 5		
PAPP-A 4.68 mIU/m	I 0.96	Method CRL Robinson		
fb-hCG 80.5 ng/ml	1.96	Scan date 9/05/2025		
Risks at sampling date		Crown rump length in mm		66.2
Age risk	1:452		slucency MoM	1.07
Biochemical T21 risk	1:522	Nasal bone present		
Combined trisomy 21 risk	1:1748	Sonographe	r DR. VINC	D KUMAR
Trisomy 13/18 + NT	<1:10000	Qualifications in measuring NT M		M.D
Risk 1:10		Trisomy 21	ited risk for Trisomy 21 (with nucl	
1:1000 1:250 Cut off  1:10000 1:10000 1:10000 13 15 17 19 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49  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 1748 women with the same data, there is one woman with a trisomy 21 pregnancy and 1747 women with not affected pregnancies.  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