

JITM Diagnostics

Patient data			
Name		MRS. ANKITA	Patient ID
Birthday		15/11/1996	Sample ID
Age at sample date		28.4	Sample Date
Gestational age		12 + 5	17/04/2025
Correction factors			
Fetuses	1	IVF	no
Weight	70	diabetes	no
Smoker	no	Origin	Asian
		Previous trisomy 21 pregnancies	no
Biochemical data			Ultrasound data
Parameter	Value	Corr. MoM	Gestational age
PAPP-A	1.43 mIU/ml	0.40	12 + 0
fb-hCG	25.8 ng/ml	0.62	Method
Risks at sampling date			CRL Robinson
Age risk	1:771		Scan date
Biochemical T21 risk	1:1320		12/04/2025
Combined trisomy 21 risk	1:7808		Crown rump length in mm
Trisomy 13/18 + NT	<1:10000		56
			Nuchal translucency MoM
			0.68
			Nasal bone
			present
			Sonographer
			DR. ANURAG BATT
			Qualifications in measuring NT
			M.D
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 7808 women with the same data, there is one woman with a trisomy 21 pregnancy and 7807 women with not affected pregnancies. The PAPP-A 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!
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