

JITM Diagnostics

| Patient data   |                   |  |                                   |
|--|-------------------|--|-----------------------------------|
| Name   | MRS. HEMA NEGI(B) | Patient ID   |                                   |
| Birthday   | 8/06/1991         | Sample ID  | 2505045310/NOD(B)                 |
| Age at sample date   | 34.0              | Sample Date  | 23/05/2025                        |
| Gestational age  | 13 + 0            |  |                                   |
| Correction factors   |                   |  |                                   |
| Fetuses  | 2                 | IVF  | no                                |
| Weight   | 88                | diabetes   | no                                |
| Smoker   | no                | Origin   | Asian                             |
|  |                   | Previous trisomy 21 pregnancies  | no                                |
| Biochemical data   |                   | Ultrasound data  |                                   |
| Parameter  | Value             | Corr. MoM  |                                   |
| PAPP-A   | 10.1 mIU/ml       | 1.78   | Gestational age 12 + 5            |
| fb-hCG   | 245 ng/ml         | 2.97   | Method CRL Robinson               |
| Risks at sampling date   |                   |  | Scan date 21/05/2025              |
| Age risk   |                   | 1:344  | Crown rump length in mm 65.2      |
| Biochemical T21 risk   |                   | 1:431  | Nuchal translucency MoM 0.83      |
| Combined trisomy 21 risk   |                   | 1:2111   | Nasal bone present                |
| Trisomy 13/18 + NT   |                   | <1:10000   | Sonographer ..                    |
|  |                   |  | Qualifications in measuring NT .. |
| Risk   |                   | Trisomy 21   |                                   |
|  |                   | <p><b>The calculated risk for Trisomy 21 (with nuchal translucency) is below the cut off, which indicates a low risk.</b></p> <p>After the result of the Trisomy 21 test (with NT) it is expected that among 2111 women with the same data, there is one woman with a trisomy 21 pregnancy and 2110 women with not affected pregnancies.</p> <p>The free beta HCG level is high.</p> <p>The risk for this twin pregnancy has been calculated for a singleton pregnancy with corrected MoMs.</p> <p>The calculated risk by PRISCA depends on the accuracy of the information provided by the referring physician.</p> <p>Please note that risk calculations are statistical approaches and have no diagnostic value!</p> <p>The patient combined risk presumes the NT measurement was done according to accepted guidelines (Prenat Diagn 18: 511-523 (1998)).</p> <p>The laboratory can not be hold responsible for their impact on the risk assessment ! Calculated risks have no diagnostic value!</p> |                                   |
| Trisomy 13/18 + NT   |                   |  |                                   |
| <p><b>The calculated risk for trisomy 13/18 (with nuchal translucency) is &lt; 1:10000, which represents a low risk.</b></p> |                   |  |                                   |

Sign of Physician