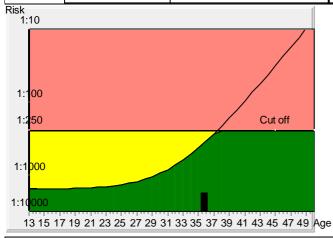
## JITM DIAGNOSTICS

Result Down's syndrome screening								
	Sample ID	2506021288/NOD(B)	diabetes	no				
ANGEETA(B)	D.O.B.	1/02/1990	Fetuses	2				
	Age at delivery	35.8	Smoker	no				
13/06/2025	Weight [kg]	57 kg	IVF	no				
14/06/2025			Ethnic origin	Asian				
no								
	ANGEETA(B) 13/06/2025 14/06/2025	ANGEETA(B) Sample ID D.O.B. Age at delivery Weight [kg]	ANGEETA(B) Sample ID 2506021288/NOD(B) D.O.B. 1/02/1990 Age at delivery 35.8 Weight [kg] 57 kg	ANGEETA(B) Sample ID 2506021288/NOD(B) diabetes  D.O.B. 1/02/1990 Fetuses  Age at delivery 35.8 Smoker  Weight [kg] 57 kg  14/06/2025 Ethnic origin				

Corrected MoM's and calculated risks							
AFP	132.1	ng/ml	1.13	Corr. MoM	Gestational age at sample date	19 + 1	
uE3	3.7	ng/ml	1.19	Corr. MoM	determination method	BPD Hadlock	
HCG	54178	mIU/mI	1.35	Corr. MoM	Physician	JITM Diagnostics	
Inh-A	364	pg/ml	1.13	Corr. MoM			



Tr.21 risk at term

1:1839

Age risk at term

1:363

## **Down's Syndrome Risk**

The calculated risk for Trisomy 21 is below the cut off which represents a low risk.

After the result of the Trisomy 21 test it is expected that among 1839 women with the same data, there is one woman with a trisomy 21 pregnancy and 1838 women with not affected pregnancies.

The risk for this twin pregnancy has been calculated for a singleton pregnancy with corrected MoMs.

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!

Neural tube defects risk	Risk for trisomy 18
The corrected MoM AFP (1.13) is located in the low risk area for neural tube defects.	The calculated risk for trisomy 18 is < 1:10000, which indicates a low risk.