InsighT (NIPS) Report for Fetal Chromosomal Aneuploidies in Singleton Pregnancies

Patient Information	
Name: Mrs. DEEPA SONKAR	**Patient ID: 160245277**
Date of Birth: 20/09/1997	**Sample ID: 2400090761**
Gestation age by Ultrasound: 16 Weeks + 6 days	**Hospital ID: P030823LKO0008718**
Referring Doctor: Dr. Pawan Yadav	**Sample collected on: 03/06/2024**
Hospital Name: Indira Path Lab-Lucknow	**Sample received on: 06/06/2024**
Sample Type: Blood	**Report released on: 12/06/2024**
Referral Reason: USG at 16 weeks 6 days shows echogenic intracardiac focus in left ventricle.	

Methodology

The InsighT (MPSS) test works by isolating the cf-DNA (including both maternal and fetal-DNA) from a maternal blood sample and performing low-coverage whole genome sequencing using Next-Generation Sequencing technology. The unique reads of each chromosome are calculated and compared to an optimal reference control sample. Data is analysed using the laboratory's proprietary bioinformatics algorithms and a risk score and/or assessment is produced for the conditions that are tested for. This test confers an accuracy and detection rate (sensitivity) of up to 99%. Results should always be reviewed by a qualified healthcare professional.

Test Results

CONDITIONS	RISK ASSESSMENT
Trisomy 21	Low Risk
Trisomy 18	Low Risk
Trisomy 13	Low Risk

It is advised that high risk results should be followed by confirmatory diagnostic testing.

SEX CHROMOSOME ANEUPLOIDIES	RISK ASSESSMENT
XO	Low Risk
XXY/XYY	Low Risk
XXX	Low Risk

Sex of the Fetus cannot be revealed as per PCPNDT Act 2003.

Fetal cfDNA Percentage	12.95%

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Phone: +91 22 41841438; Website: www.lilacinsights.com; For queries or complaints, please email: info@lilacinsights.com | CIN - U85191MH2011PTC217513

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Reference:

1. Bianchi DW, Platt LD, Goldberg JD, Abuhamad AZ, Sehnert AJ, Rava RP. Genome-wide fetal aneuploidy detection by maternal plasma DNA sequencing. Obstetrics & Gynecology. 2012 May 1;119(5):890-901.
2. Chiu RW, Akolekar R, Zheng YW, Leung TY, Sun H, Chan KA, Lun FM, Go AT, Lau ET, To WW, Leung WC. Non-invasive prenatal assessment of trisomy 21 by multiplexed maternal plasma DNA sequencing: large scale validity study. Bmj. 2011 Jan 11;342.
3. Kappou D, Papadopoulou E, Sifakis S. Non Invasive Prenatal Diagnosis of Down Syndrome. InPrenatal Diagnosis and Screening for Down Syndrome 2011 Aug 17. IntechOpen.
4. Rose NC, Kaimal AJ, Dugoff L, Norton ME, American College of Obstetricians and Gynecologists. Screening for fetal chromosomal abnormalities: ACOG practice bulletin, number 226. Obstetrics & Gynecology. 2020 Oct 1;136(4):e48-69.

Disclaimer:

1. The InsighT (MPSS) test is NOT a diagnostic test. It is a screening test, therefore false-positive and false-negative results can occur.
2. Potential sources of an inaccurate test result may include but are not limited to: maternal, fetal and/or placental mosaicism, low fetal fraction, blood transfusion, transplant surgery and stem cell therapy.
3. This test assumes that the blood and DNA samples belong to the specified patient as it is claimed; the result is therefore specific to the tested sample.
4. The fetal fraction (%) has been estimated in an algorithm based on global model fitting.
5. This test is not intended to identify pregnancies at risk for open neural tube defects.
6. Test results should always be interpreted by a qualified healthcare professional in the context of other clinical and/or family information of the patient.
7. The results should be communicated in a setting that includes appropriate genetic counseling.
8. The results of the test do not eliminate the possibility of other abnormalities of the tested chromosomes and/or other genetic disorders or birth defects.
9. This test has been performed at our partner lab.

Pallavi Kadam

Verified By

Scientific Officer

Genomics

Pusalkar

Dr. Madhavi Pusalkar, Ph.D.

General Manager

Genomics

----------***End of The Report***----------

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