

SUDHAMANI K N

Date of birth: 05 April 1998 Examination date: 05 June 2024

Address: Bangalore Hospital no.: 2410014495

Referring doctor: Dr Kalyani Reddy

Address: Bangalore

Maternal characteristics and history

Ethnic origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 0.

Maternal weight: 39.5 kg; Height: 145.5 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no;

Antiphospholipid syndrome: no; Family history of PE: none.

Conception: spontaneous;

last period: 04 March 2024 EDD by dates: 09 December 2024

First Trimester Ultrasound

Gestational age: 12 weeks + 5 days from CRL EDD by scan: 13 December 2024

Fetal heart activity visualised
FHR 154 bpm
Crown-rump length (CRL) 63.2 mm

Nuchal translucency (NT) 1.70 mm

Chromosomal markers:

Nasal bone: present.

Maternal Serum Biochemistry

Sample 2410014495, taken on: 05 June 2024, analysed on: 08 June 2024.

Free ß-hCG 124.10 IU/I Roche equivalent to 2.875 MoM PAPP-A 4.856 IU/I Roche equivalent to 0.774 MoM

Biophysical Markers

Uterine artery mean PI: 3.150 equivalent to 1.793 MoM
Mean Arterial Pressure: 73.333 mmHg equivalent to 0.9293 MoM

FMF Operator: RAJA MUNIREDDY, FMF Id: 126105

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 Condition
 Background risk
 Adjusted risk

 Trisomy 21
 1 in 1273
 1 in 3925

 Trisomy 18
 1 in 15022
 <1 in 20000</td>

 Trisomy 13
 <1 in 20000</td>
 <1 in 20000</td>

Preeclampsia before 37 weeks 1 in 85
Fetal growth restriction before 37 weeks 1 in 31

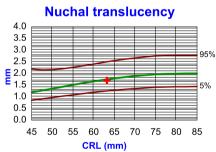
The background risk for aneuploidies is based on maternal age (26 years). The adjusted risk is the risk at term, calculated on the basis of the background risk, ultrasound factors (fetal nuchal translucency thickness, nasal bone, fetal heart rate) and maternal serum biochemistry (PAPP-A, free beta-hCG).

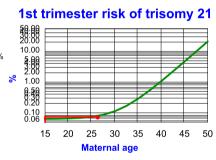
Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history, mean arterial pressure (MAP), uterine artery Doppler and serum PAPP-A.

Biophysical and biochemical marker medians used to calculate MoMs are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2018 software (version 4.6) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www. fetalmedicine.org).







Comments

INTERPRETATION: The first trimester screening risk assessment for the given sample is **SCREEN NEGATIVE for Aneuploidies** and **High risk for late onset Pre-eclampsia**.

Please Note: The above interpretation is based on a cut off of 1:250 for T21, 1:100 for T13 & T18

SUGGESTION:

In view of free beta HCG MoMs observed in the mother, kindly consider correlation with fetal growth and well being scan at 28 - 30 weeks.

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Reviewed By

Dr. Suresh Bhanushali MD (Path) Consultant Pathologist

Notes

- 1.Quality of the Down's syndrome screening program (Biochemical values, MoMs and Risk assessments) monitored by UKNEQAS on an ongoing basis
- 2. This interpretation assumes that patient and specimen details are accurate and correct
- 3.Lilac Insights does not bear responsibility for the NT & CRL measurements.
- 4. This is a risk estimation test and not a diagnostic test. An increased risk result does not mean that the fetus is affected and a low risk result does not mean that the fetus is unaffected.
- 5.Pre-eclampsia risk stratification is done using a cut-off of 1:100 as per ASPRE study.

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