

Patient: [REDACTED]
 DOB: [REDACTED] Age: [REDACTED] Gender: [REDACTED]
 Patient Identifiers: [REDACTED]
 Visit Number (FIN): [REDACTED]

Client: [REDACTED]
 Physician: [REDACTED]

ARUP Test Code: 0080269
 Collection Date: 11/21/2016
 Received in Lab: 11/26/2016
 Completion Date: 12/02/2016

Patient Information Used in Risk Calculations

Maternal Age at Delivery: [REDACTED] yr
 Estimated Due Date: 04/25/2017
 Gestational Age at Draw: 17 Weeks 6 Day(s)
 Maternal Weight: 200 lbs
 Maternal Race: [REDACTED]
 Number of Fetuses: One
 Family History of Neural Tube Defects: No
 Family History of Aneuploidy: No
 Patient is medication-dependent diabetic: No
 Dating method: LMP CONF by US
 Specimen: First

Marker	Measurement	MoM
AFP	16 ng/mL	0.47
hCG	29724 IU/L	1.55
uE3	0.53 ng/mL	0.41
Inhibin A	119 pg/mL	0.85

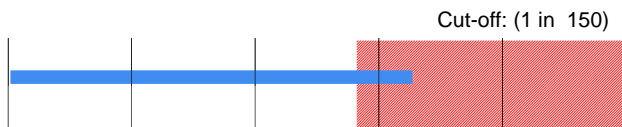
Interpretation

ABNORMAL DOWN SYNDROME RISK

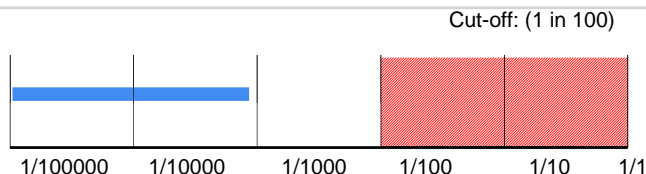
Open Neural Tube Defects **Normal**
 Risk before test: 1 in 900
 Risk after test: <1 in 10000



Down Syndrome **Abnormal**
 Risk before test: 1 in 530
 Risk after test: 1 in 51 *



Trisomy 18 **Normal**
 Risk before test: 1 in 5300
 Risk after test: 1 in 1100



NOTE: * symbol indicates abnormal result

Comments

Assuming the patient information listed is correct, this maternal serum screen is ABNORMAL. Other outcomes of abnormal screens include normal pregnancies, over-estimated gestational age, and intra-uterine fetal demise or missed abortion. If you have questions regarding this screen, please call Genetics at 800-242-2787 ext 2141.



Patient: [REDACTED]
 ARUP Accession: 16-326-141277