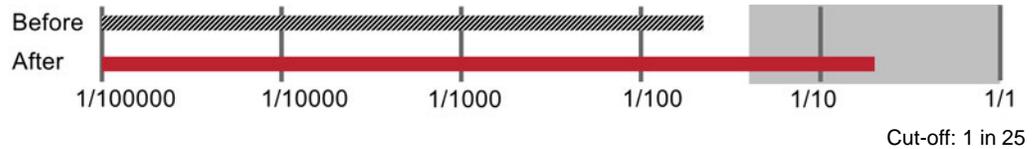


<b>Patient:</b>	Client:	ARUP Test Code: 3000146
DOB:                      Age:                      Sex:		
<b>Patient Identifiers:</b>	Physician:	Collection Date:
		Received in lab:
<b>Visit Number (FIN):</b>		Completion Date:

**Interpretation: SCREEN POSITIVE**  
**Follow-up for risk of Down syndrome is suggested**

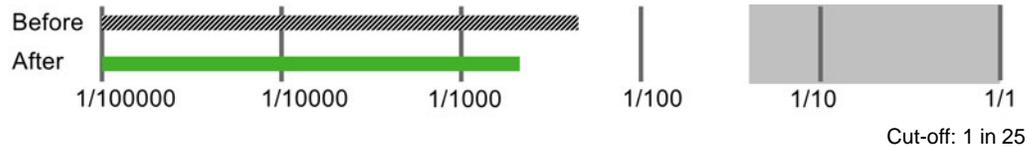
**Down syndrome (DS): Positive**

Risk before test: **1 in 45**  
 Risk after test: **1 in 5**



**Trisomy 18 (T18): Pending**

Risk before test: **1 in 223**  
 Risk after test: **1 in 472**



**Comments:**

The risk of Down syndrome is greater than the screening cut-off. Other outcomes of positive screens include normal pregnancy, over-estimated gestational age, and fetal demise. Genetic counseling regarding the risks and benefits of cell-free DNA (NIPT) and fetal diagnostic testing is suggested. If you have questions regarding this screen, please call Genetics at 800-242-2787 ext 2141.

The patient's trisomy 18 risk, based on NT, PAPP-A, and hCG is less than the screening cut-off at this time.

This result has been reviewed and approved by Jonathan R.

Gestational Age Comment:

Section 79-1 of New York State Civil Rights Law requires informed consent be obtained from patients (or their legal guardians) prior to pursuing genetic testing. These forms must be kept on file by the ordering physician. Consent forms for genetic testing are available at [www.aruplab.com](http://www.aruplab.com). Incidental findings are not reported unless clinically significant but are available upon request.

Marker	Measurement	MoM
PAPP-A	116.1 ng/mL	0.20
hCG	106177 IU/L	1.62
NT	1.30 mm	0.84



Patient:  
 ARUP Accession: 22-333-146371

# Maternal Screening, Sequential, Specimen #1, hCG, PAPP-A, NT

Patient: | Date of Birth: | Sex: | Physician:  
Patient Identifiers: | Visit Number (FIN):

PAPP-A Maternal Compliance Statement: This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

Maternal Screen Interpretation Compliance Statement: This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

## Patient Information Used in Risk Calculations:

Maternal Age at Delivery: 40.8 yr  
Maternal Weight: 310.0 lbs.  
Gestational Age at Draw: 12 wks, 4 days  
Number of Fetuses: Unknown  
Maternal Race: Black  
Current Smoker: No  
Family History of Aneuploidy: No  
Specimen: Initial sample  
Crown Rump Length: 62.9 mm  
Sonographer Certification #:  
Sonographer Name:  
Ultrasound Date: 11-29-22  
Best Date to Draw Sample #2 By: 01-06-23

## Reference Information

The following links or information offer complete and up to date information about this test, including access to ARUP Consult™ disease topics and other supplemental resources.

- [Maternal Screening, Sequential, Specimen #1, hCG, PAPP-A, NT](http://ltd.aruplab.com/tests/pub/3000146)  
(http://ltd.aruplab.com/tests/pub/3000146)
- [Prenatal Aneuploidy Screening](https://www.aruplab.com/genetics/tests/prenatal)  
(https://www.aruplab.com/genetics/tests/prenatal)
- [Additional Technical Information](http://ltd.aruplab.com/Tests/Pdf/311)  
(http://ltd.aruplab.com/Tests/Pdf/311)

