



Patient ID SA00101926	Patient Name TESTINGRNV, QUAD1ABNORMAL	Birth Date 1989-06-07	Gender F	Age 28
Order Number SA00101926	Client Order Number SA00101926	Ordering Physician CLIENT, CLIENT	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 21 Dec 2017 04:00		

QUAD SCRIN (2nd Tri) Maternal, S

Results Summary



Abnormal risk

Abn

Down syndrome screen risk estimate

1/3,300

Down syndrome maternal age risk

1/930

Trisomy 18 screen risk estimate



1/5

High

Neural tube defect risk estimate

1/2

AFP

122.0 ng/mL

AFP MoM



3.39 MoM

High

uE3

0.30 ng/mL

uE3 MoM

0.38 MoM

SDL

SDL

Reference Value
<1/270

SDL

SDL

Reference Value
<1/100

SDL

SDL

SDL

Reference Value
<2.50

SDL

SDL

hCG, TOTAL

11.0 IU/mL

hCG, TOTAL MoM

0.25 MoM

INHIBIN MoM

2.79 MoM

INHIBIN

488 pg/mL

INTERPRETATION

SCREEN POSITIVE for neural tube defects. INCREASED RISK for trisomy 18. Screen negative for Down syndrome.

RECOMMENDED FOLLOW UP

Consider ultrasound and a genetic consultation. Pregnancies with trisomy 18 tend to be small for gestational age. Therefore, revising with an earlier gestational age is not advised, as that would increase the chance of a false negative result.

Additional comments

In diabetic pregnancies, the risk of Down syndrome is approximated by adjusting analyte medians for diabetic status.

Specimen collection date

12/21/17

Maternal date of birth

06/07/89

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Performing Site Legend

Code	Laboratory	Address	Lab Director	CLIA Certificate
SDL	Mayo Clinic Laboratories - Rochester Superior Drive	3050 Superior Drive NW, Rochester MN 55901	William G. Morice M.D. Ph.D	24D1040592

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Calculated age at EDD	SDL	Prev Down (T21) / Trisomy Pregnancy	SDL
28 years		Yes	
Maternal Weight	SDL	Prev Pregnancy w/ Neural Tube Defect	SDL
133 lbs		One	
Insulin dependent diabetes	SDL	Patient or father of baby has a NTD	SDL
Yes		Yes	
Patient race	SDL	Initial or repeat testing	SDL
Black		Initial testing	
Current cigarette smoking status	SDL	Physician Phone Number	SDL
Not provided by client; non-smoker assumed		Not provided	
EDD by LMP	SDL	GENERAL TEST INFORMATION	1 SDL
06/07/2018		This screening provides an estimation of risk, not a diagnosis. Incorrect or incomplete information may significantly alter results. Risks are adjusted for donor eggs, frozen embryos, and IVF.	
GA on collection by dates	SDL	Results may be unreliable in twin pregnancies with a fetal demise. Results are not available for pregnancies with triplets and higher-order multiples.	
16,0 wk,d		A positive result occurs when the risk for Down syndrome equals or exceeds 1 in 270, when the risk for trisomy 18 equals or exceeds 1 in 100, or when the AFP MoM equals or exceeds 2.5.	
GA used in risk estimate	SDL	Screen results and family history influence individual risk. If there is a family history of a neural tube defect, chromosome abnormality, or other inherited condition, consider the option of a genetic consultation.	
Dates estimate		For further information, please contact the maternal screening laboratory at 1-800-533-1710.	
Number of Fetuses	SDL	IVF Egg Donor Date of Birth	SDL
Not provided by client; singleton assumed		10/06/1990	
Number of Chorions	SDL		
Not provided by client			
IVF pregnancy	SDL		
Yes			

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IVF Egg or Embryo Freeze Date

SDL

06/05/2012

Received: 21 Dec 2017 20:06

Reported: 21 Dec 2017 20:35

Laboratory Notes

- 1 This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

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