

**SequentialScreen** *First Trimester*  
*Down Syndrome, Trisomy 18*

**Patient Name:** Sample Patient  
**Referring Physician:** John Doe, M.D.  
**Specimen #:** 10000000  
**Patient ID:** 20000000-1

**Client #:** 12345

City Hospital  
1 Main Street  
Anywhere, USA

DOB: 00/00/1975      Date Collected: 09/25/2012  
SSN: \*\*\*-\*\*-\*\*\*\*      Date Received: 09/26/2012  
Lab ID:  
Hospital ID:  
Specimen Type: Serum

**Genetic Counselor:** Joanne Meister,

CC: James Smith, M.D.

**Pregnancy information used in risk calculations:**

US Date: 9/25/2012    NT: 2.1 mm      CRL: 67.5 mm      Gest. Age: 12.9 wks  
Sonographer: Jane Doe

# of Fetuses: 1      Weight: 113 LBS      Race: White  
Age At Term: 37.9      IDDM: No      DS Hx: No

**Results:**      **Nuchal Translucency**      **PAPP-A**      **hCG**  
1.40 MoM      0.17 MoM      2.52 MoM

**INTERPRETATION : Screen Positive - Increased risk of Down Syndrome and Trisomy 18**

	Screening Risk	Age Related Risk	Risk Cutoff
Down Syndrome	1:5	1:100	1:50
Trisomy 18	1:19	1:350	1:100

Genetic counseling, high resolution ultrasound, and/or consideration of a diagnostic procedure are recommended. Second trimester screening for Down syndrome is NOT indicated.

Risk assessment for open neural tube defects (ONTD) is not available in the first trimester.

Maternal screening has some level of inherent false negative and false positive results and is not a substitute for diagnostic testing. It remains standard of care to offer prenatal diagnosis to women age 35 or older at term.

Please check the patient information used in this risk assessment and call with any corrections.

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Under the direction of:

Date: 09/28/2012

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