

# State Hygienic Laboratory

## The University of Iowa

ANYTOWN HOSPITAL
1000 MEDICAL ST
ANYTOWN, IA 52999

Accession Number 235924 DOE, JANE Patient Date Collected 2017-05-04 09:45 Date Received 2017-05-04 14:20 1995-06-30 Birth Date Gender Female Address 1234 MAIN ST ANYTOWN, IA 52999 Project Client Reference 9787453245

Provider | 9787453245 WELBY, MARCUS

#### **Results of Analyses**

#### Maternal Screen Quad, Enzyme Immunoassay

Analyst	MBH	Verifier	DU	
Units			2017-05-18 15:22	
Sample Type	Serum specimen	Analyzed In	Coralville	

Analyte	Result	Unit		
Egg Donor	No			
Egg's Age				
Maternal Age At Delivery	22.3	years		
Maternal Weight	143.4	lbs		
Maternal Race Black	Yes			
Number of Fetuses	1			
Insulin Dependent Diabetic	No			
Family History of NTD	No			
LMP	2017-01-10			
Ultrasound	2017-04-01			
CRL				
BPD	25	mm		
Weeks & Days				

Analyte	Result	Determined By		
Gestational Age	133 days (19w0d)	Ultrasound		
Analyte	Result	Screen Cutoff	Interpretation	Recommended Action
AFP MoM	0.81	NTD >= 2.2	Negative	No further action
Estriol (uE3) MoM	0.88			
HCG MoM	0.95			
Inhibin MoM	0.88			
Age Related DS Risk	1:1200			
Down Syndrome (DS) Risk	1:6100	>=1:150	Negative	No further action
Trisomy 18 Risk	<1:99000	>=1:100	Negative	No further action

*Note:* Screening will detect approximately 79% of fetuses with Down syndrome, 80% of fetuses with Trisomy 18 and 85% of fetuses with open neural tube defects in a singleton pregnancy. This test does not reliably detect other chromosomal abnormalities. Maternal screening has some level of inherent false negative and false positive results and is not a substitute for diagnostic testing. This report is based on the clinical information provided. Missing or incorrect data will result in an inaccurate interpretation. Please review and call Program Medical Consultant at 319-356-8892 with questions.

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