

Patient THATCHER, BECKY 300 3RD AVE ANYTOWN, IA 52999	Birth Date and Gender 1982-03-18 Female	Client Reference 67342567	Accession # 378958
	Collected 2018-02-21 14:30	Received 2018-02-22 06:00	Project
Report To LAB DIRECTOR ANYTOWN HOSPITAL SEND-OUT LAB 1000 MEDICAL ST ANYTOWN, IA 52999	Sample Information		Provider and Phone Number WELBY, MARCUS 319/576-1313.4987
			Sample Type and Source Serum specimen
			Sample Note(s) 1

RESULTS OF ANALYSIS - FINAL REPORT

Report Status: Final Report or Interim Report

TEST

Maternal Screen Quad, Enzyme Immunoassay

Test Name, Method Name

ANALYSIS NOTE(S)

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PATIENT HISTORY

Egg Donor	No	Family History of NTD	No
Egg's Age		LMP	
Maternal Age at Delivery	36.4 years	Ultrasound	2017-12-25
Maternal Weight	145.0 lbs	CRL	23 mm
Maternal Race Black	No	BPD	
Number of Fetuses	1	Week & Days	
Insulin Dependent Diabetic	No	Gestational Age	120 days (17w1d) by Ultrasound

	RESULT	SCREEN CUTOFF	INTERPRETATION	RECOMMENDED ACTION
AFP MoM	1.20	NTD >= 2.2	Negative	No further action
Estriol (uE3) MoM	0.74			
HCG MoM	0.88			
Inhibin MoM	0.75			
Age Related DS Risk	1:220			
Down Syndrome (DS) Risk	1:4100	>=1:150	Negative	No further action
Trisomy 18 Risk	1:20000	>=1:100	Negative	No further action

Test Results

SAMPLE AND ANALYSIS NOTES **Sample and Analysis Quality Assurance (QA) Events, Notes, and Test Trailers**

1. If there is a sample-level note, it will be displayed here.
2. 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.

ANALYSIS INFORMATION

TEST

1. Maternal Screen Quad, Enzyme Immunoassay

ANALYZED

2018-02-22 09:45 BS

SITE

10303

RELEASED

2018-02-23 15:03 MBH



Patient Name	Birth Date	Client Reference	Accession #
THATCHER, BECKY	1982-03-18	67342567	378958

SITE(S) PERFORMING TESTING

10303 STATE HYGIENIC LABORATORY CORALVILLE, UNIVERSITY OF IOWA RESEARCH PK, 2490 CROSSPARK RD, CORALVILLE, IA 52241; Phone 319/335-4500; Fax 319/335-4555; Wade K. Aldous, Ph.D. (D)ABMM, Associate Director

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