

**SAMPLE REPORT**

**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: 00/00/1974      Date Collected: 02/04/2011  
SSN:                      Date Received: 02/05/2011  
                                 Lab ID:  
                                 Hospital ID:  
                                 Specimen Type: Serum

**Pregnancy information used in risk calculations:**

US Date: 2/4/2011      NT: 2 mm      CRL: 56 mm      Gest. Age: 12.0 wks  
Sonographer: Jane Doe

# of Fetuses: 1      Weight: 156 LBS      Race: White  
Age At Term: 37.6      IDDM: No      DS Hx: No

**Results:**      **Nuchal Translucency**      **PAPP-A**      **hCG**  
1.43 MoM      0.82 MoM      2.70 MoM

**INTERPRETATION : Screen Positive - Increased risk of Down Syndrome**

	Screening Risk	Age Related Risk	Risk Cutoff
<b>Down Syndrome</b>	<b>1:15</b>	1:110	1:220
<b>Trisomy 18</b>	<b>1:7,000</b>	1:380	1:100

Genetic counseling, high resolution ultrasound, and/or consideration of a diagnostic procedure are recommended. 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: 02/06/2011

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