

Name : XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX

Date : XX XX XXXX

Test Asked : Nipt1

Report Status : Complete Report



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at Every Lab

Patient Name : XXXXXXXXXXXXXXXXXXXX  
Referred By : XXXXXXXXXXXXXXXXXXXX  
Sample Collected At : XX

Tests Done : NIPT1

### Report Availability Summary

**Note:** Please refer to the table below for status of your tests.

 **1** Ready       **0** Ready with Cancellation       **0** Processing       **0** Cancelled in Lab

#### TEST DETAILS

#### REPORT STATUS

HERCHECK NIPT

Ready 

Dummy Report

Patient name : XXXXXXXXXXXXXXXXXXXX

 Tests Done: **HerCheck Non-Invasive Prenatal Testing (NIPT)**

Referred By : XXXXXXXXXXXXXXXXXXXX

Home Collection : XX

THIS IS A DRAFT REPORT.

**Tests Outside Reference Range**
**Note:** Please refer to the table below for tests outside reference range.

Risk	Z-Score	Test Result	Reference Interval
Chromosome 21		High Risk For Trisomy-21	High Risk: Z-Score $\geq 3$ , Z-Score $\leq -3$

**Disclaimer:** The above listed is the summary of the parameters with values outside the BRI. For detailed report values, parameter correlation and clinical interpretation, kindly refer to the same in subsequent pages.

Doctor 1 Sign

Doctor 2 Sign

Patient name : XXXXXXXXXXXXXXXXXXXX

 Tests Done: **HerCheck Non-Invasive Prenatal Testing (NIPT)**

Referred By : XXXXXXXXXXXXXXXXXXXX

Home Collection : XX

**Patient Sample Details**

<b>Name</b> :	NIPS_AHS_Demo	<b>Sex / Age</b> :	Female / 30 Years	<b>Collection Date</b> :	
<b>Ref By</b> :		<b>Sample Date &amp; Time</b> :		<b>PT. Loc.</b> :	
<b>Report Date &amp; Time</b> :	2026-03-16 17:41:51	<b>Sample Type</b> :		<b>Test Code</b> :	

**Patient Details**

<b>Pregnancy Type</b>	Singleton	<b>Clinical Indication</b>	Abnormal Biochemical Screening, Abnormal Ultrasound Screening
<b>Gestational Age</b>	13 weeks / 0 days	<b>Fetal DNA Fraction</b>	9.51 %
<b>Sample Quality</b>		<b>Clinical Findings</b>	

Thyrocare Technologies Ltd., Navi Mumbai, is registered under the Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act, 1994, and neither practices nor promotes disclosure of the fetal sex.

Doctor 1 Sign

Doctor 2 Sign

Patient name : XXXXXXXXXXXXXXXXXXXX

 Tests Done: **HerCheck Non-Invasive Prenatal Testing (NIPT)**

Referred By : XXXXXXXXXXXXXXXXXXXX

Home Collection : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

**Screening Results**
**ANEUPLOIDY DETECTED**

Chromosome	Risk	Result	Z Score	Reference Range
Chromosome 21	●	Aneuploidy Detected, High Risk of fetus being affected with Trisomy 21	6.97	Low Risk: $-3 < Z\text{-Score} < 3$ High Risk: $Z\text{-Score} \geq 3, Z\text{-Score} \leq -3$
Chromosome 18	●	No aneuploidy detected, Low risk of fetus being affected with Trisomy 18	-0.50	Low Risk: $-3 < Z\text{-Score} < 3$ High Risk: $Z\text{-Score} \geq 3, Z\text{-Score} \leq -3$
Chromosome 13	●	No aneuploidy detected, Low risk of fetus being affected with Trisomy 13	0.82	Low Risk: $-3 < Z\text{-Score} < 3$ High Risk: $Z\text{-Score} \geq 3, Z\text{-Score} \leq -3$
Sex chromosome abnormalities	●	No aneuploidy detected, Low risk of XO, XXX, XXY AND XYY	N/A	Low Risk: $-3 < Z\text{-Score} < 3$ High Risk: $Z\text{-Score} \geq 3, Z\text{-Score} \leq -3$
Rare Autosomal Trisomies (RAT)		No aneuploidy detected, Low risk of rare autosomal trisomies	N/A	Low Risk: $-3 < Z\text{-Score} < 3$ High Risk: $Z\text{-Score} \geq 3, Z\text{-Score} \leq -3$

● Low Risk ● High Risk

Doctor 1 Sign

Doctor 2 Sign

Patient name : XXXXXXXXXXXXXXXXXXXX

 Tests Done: **HerCheck Non-Invasive Prenatal Testing (NIPT)**

Referred By : XXXXXXXXXXXXXXXXXXXX

Home Collection : XX

### Test Results and Interpretation

HerCheck NIPT analysis can yield any of the following three results:

**Low Risk of Aneuploidy:** The probability that the fetus is affected with the specific chromosomal aneuploidy is low.

**High Risk of Aneuploidy:** The probability that the fetus is affected with the specific chromosomal aneuploidy is high. Confirmatory testing via amniocentesis/CVS is recommended.

**No Results:** Due to unavoidable reasons a result could not be generated on the given maternal sample therefore repeat sampling is advised. Invasive testing is recommended if a NO RESULT is generated again.

### Technical Notes

#### Test Methodology:

This test analyzes a maternal blood sample to screen for chromosomal aneuploidies in placental DNA using the methodology outlined below:

The test involves the extraction of cell-free fetal DNA from a maternal blood sample, followed by high-throughput Next Generation Sequencing of the isolated DNA and quantitative evaluation of fetal DNA across all chromosomes. It facilitates genome-wide detection of aneuploidies and provides results for all 23 chromosome pairs, with an accuracy of up to 99.99% for identifying abnormalities in chromosomes 13, 18, and 21.

In a study comprising more than 2,000 samples, six cases were identified as high risk for autosomal aneuploidies other than chromosomes 13, 18, and 21. This corresponds to a prevalence rate of 0.3%, which aligns with rates reported in published literature.

#### Test Performance:

Prenatal Chromosomal Aneuploidy sensitivity of detection for Chromosomes 13, 18, 21 & sex chromosomes	
Chromosome	Sensitivity
Chromosome 13	99.99%
Chromosome 18	99.99%

Doctor 1 Sign

Doctor 2 Sign

Patient name : XXXXXXXXXXXXXXXXXXXX

 Tests Done: **HerCheck Non-Invasive Prenatal Testing (NIPT)**

Referred By : XXXXXXXXXXXXXXXXXXXX

Home Collection : XX

**Technical Notes**

Chromosome 21	99.99%
XO	90.32%
XXY	93.00%
XXX	93.00%
XYY	93.00%
XXYY	93.00%

**Limitations of the Test**

- While the test demonstrates high accuracy, there remains a small risk of false-positive or false-negative results. Variations in test outcomes may arise due to technical or biological factors, including confined placental mosaicism (CPM), maternal constitutional or somatic chromosomal abnormalities, residual cell-free DNA from a vanished twin, or other rare molecular events.
- The HerCheck NIPT test is not suitable for pregnant women with certain medical conditions, including maternal aneuploidy, active malignancy, history of blood transfusion within the past 12 months, organ transplantation, prior stem cell therapy or immunotherapy, or sample with fetal fraction less than 4.5%.
- In twin pregnancies, a high-risk result indicates an increased risk in at least one fetus; however, the test cannot distinguish which twin is affected. Additionally, sex chromosome aneuploidies cannot be determined in twin or vanished twin pregnancies, as residual cfDNA from a vanishing twin may interfere with result interpretation.
- This test does not detect mosaicism, balanced chromosomal translocations, partial chromosomal aneuploidies, polyploidy, or neural tube defects.
- HerCheck NIPT is a screening tool, and all high-risk results must be confirmed through diagnostic procedures, which may include amniocentesis or chorionic villus sampling (CVS) as suggested and deemed by the attending Physician.
- HerCheck NIPT is a screening tool, not a confirmed diagnostic test, any sample reported negative merely suggests decreased risk rather than confirming the normalcy of the sample, needs to be correlated clinically by the attending physician.
- Pregnant women receiving a high-risk result should be referred for genetic counseling and offered invasive prenatal diagnostic testing to confirm the findings. A low-risk or negative result does not guarantee an unaffected pregnancy.
- The test is not reportable in cases of known multiple gestations beyond twins or when the gestational age is less than 10 weeks.

Doctor 1 Sign

Doctor 2 Sign

Patient name : XXXXXXXXXXXXXXXXXXXX

Tests Done: **HerCheck Non-Invasive Prenatal Testing (NIPT)**

Referred By : XXXXXXXXXXXXXXXXXXXX

Home Collection : XX

**Disclaimer and Notes**

- Thyrocare Technologies Ltd., Navi Mumbai, is registered under the Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act, 1994, and neither practices nor promotes disclosure of the fetal sex.
- The HerCheck NIPT test is a screening tool and not a diagnostic procedure. Test results must be interpreted in conjunction with clinical assessment, ultrasound findings, and relevant supporting data. The test estimates the likelihood or risk of the fetus being affected or unaffected but does not provide definitive confirmation of abnormalities.
- A low-risk result indicates a reduced probability of the fetus having the specified chromosomal abnormality but does not rule out the possibility entirely also does not exclude the possibility of other chromosomal conditions. Conversely, a high-risk result suggests an increased likelihood of the presence of the chromosomal abnormality which needs to be confirmed through a diagnostic procedure.
- Test results should be reviewed and communicated exclusively by a qualified healthcare professional, accompanied by appropriate genetic counseling. Both pre-test and posttest counseling should be provided by the referring clinician or genetic counselor. In the event of a positive result, confirmatory diagnostic testing through invasive procedures should be recommended. Clinical decisions should not be based solely on standalone HerCheck NIPT results.
- The test is appropriate for both singleton and twin pregnancies; however, diagnostic accuracy may be slightly reduced in twin pregnancies due to the presence of multiple sources of fetal DNA.
- The report is generated based on the sample received by the laboratory and assumes that the specimen accurately represents the patient identified on the test requisition form. When samples are received from referral centers, patient details are presumed to have been verified prior to submission.
- In a small proportion of cases, repeat sample collection may be required due to quality control failures or technical limitations.
- The report is issued within the defined turnaround time (TAT) following receipt of the sample at the laboratory. Actual TAT may vary depending on test complexity and the completeness of accompanying information. Thyrocare Technologies Ltd. is not responsible for delays resulting from incomplete documentation or technical requirements during sample handling, testing, or reporting. In rare instances, genetic testing may yield inconclusive or inaccurate results, such as when sample quality is suboptimal. If a test fails due to unforeseen or uncontrollable factors, Thyrocare Technologies Ltd. cannot be held liable for incomplete, potentially misleading, or incorrect results that could not have been anticipated.
- Thyrocare Technologies Ltd. has validated this test and established its performance characteristics in accordance with CAP/ACMG and NABL guidelines. All laboratory investigations have inherent limitations determined by assay sensitivity and specificity, as well as the quality of the specimen received.
- Interpretation of the test results should be performed in the context of the parents' medical history and in conjunction with other relevant laboratory and diagnostic findings.
- This report reflects the genetic analysis of the submitted sample. Accurate interpretation requires correlation with clinical features and additional laboratory investigations. The information provided is not a substitute for professional medical advice or diagnosis. Consultation with a qualified healthcare professional or medical specialist is strongly recommended for a comprehensive evaluation of the individual clinical condition.

Doctor 1 Sign

Doctor 2 Sign

**HER CHECK**  
NON-INVASIVE PRENATAL TESTING

Patient name : XXXXXXXXXXXXXXXXXXXX

Tests Done: **HerCheck Non-Invasive Prenatal Testing (NIPT)**

Referred By : XXXXXXXXXXXXXXXXXXXX

Home Collection : XX

**Processing Location**

This test was performed at Thyrocare Technologies Limited, D-37/1, opp. Sandoz, TTC Industrial Area, MIDC Industrial Area, Turbhe, Navi Mumbai, Maharashtra 400703.

**References**

- Obstet Gynecol 2020;136:e48-69
- Obstet Gynecol 2017;129:e96-101
- Prenat Diagn 2012;32:c7401
- BMJ 2011;342:c7401

Doctor 1 Sign

Doctor 2 Sign

## CONDITIONS OF REPORTING

- v The reported results are for information and interpretation of the referring doctor only.
- v It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- v Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient.
- v Should the results indicate an unexpected abnormality, the same should be reconfirmed.
- v Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret results.
- v This report is not valid for medico-legal purpose.
- v Neither Thyrocare, nor its employees/representatives assume: (a) any liability, responsibility for any loss or damage that may be incurred by any person as a result of presuming the meaning or contents of the report, (b) any claims of any nature whatsoever arising from or relating to the performance of the requested tests as well as any claim for indirect, incidental or consequential damages. The total liability, in any case, of Thyrocare shall not exceed the total amount of invoice for the services provided and paid for.
- v Thyrocare Discovery video link :- <https://youtu.be/nbdYeRgYyQc>


## EXPLANATIONS


- v Majority of the specimen processed in the laboratory are collected by Pathologists and Hospitals we call them as "Clients".
- v **Name** - The name is as declared by the client and recored by the personnel who collected the specimen.
- v **Ref.Dr** - The name of the doctor who has recommended testing as declared by the client.
- v **Labcode** - This is the accession number in our laboratory and it helps us in archiving and retrieving the data.
- v **Barcode** - This is the specimen identity number and it states that the results are for the specimen bearing the barcode (irrespective of the name).
- v **SCP** - Specimen Collection Point - This is the location where the blood or specimen was collected as declared by the client.
- v **SCT** - Specimen Collection Time - The time when specimen was collected as declared by the client.
- v **SRT** - Specimen Receiving Time - This time when the specimen reached our laboratory.
- v **RRT** - Report Releasing Time - The time when our pathologist has released the values for Reporting.
- v **Reference Range** - Means the range of values in which 95% of the normal population would fall.


## SUGGESTIONS


- v Values out of reference range requires reconfirmation before starting any medical treatment.
- v Retesting is needed if you suspect any quality shortcomings.
- v Testing or retesting should be done in accredited laboratories.
- v For suggestions, complaints, clinical support or feedback, write to us at [customersupport@thyrocare.com](mailto:customersupport@thyrocare.com) or call us on **022-3090 0000**


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\* As per survey on doctors' perception of laboratory diagnostics (IJARIIT, 2023), -Mumbai Reference Lab is CAP Accredited