



## Genetic Testing Options

*A list of your Testing Options during Pregnancy*

<b><u>Non-Invasive Screening Tests</u></b> <i>First Line Blood Testing</i>	<b>Timing – (Gestational Weeks)</b>
<b>MaterniT 21 Plus- Non-invasive prenatal testing (NIPT)</b> Risk factors for abnormal chromosome testing includes: 35 years old and older, sono markers, positive carrier screening, previous affected child, parent with translocation. Screens for Trisomy 21 (>99% accurate, 0.1% false positive) Trisomy 18 (99% accurate, 0.4% false positive) Trisomy 13 (91% accurate, 0.3% false positive) Sex chromosome anomalies (96% accurate, 0.3% false positive) Can do with twins	9 weeks and above
<b>Nuchal Translucency</b> Combines ultrasound of fetal neck skin thickness with blood test for levels of certain markers 90% detection rate of Trisomies 21 & 18 5% false positive Can do with twins	11 weeks and 3 days – 13 and 6 days
<b>Tetra Screen</b> Blood test for certain markers 75-78% detection Trisomy 21 73% Trisomy 18 up to 80% neural tube defects False positive 3 – 5%	15 weeks – 21 weeks and 6 days
<b><u>Invasive Diagnostic Tests</u></b> <i>Performed by MFM specialist if abnormal initial screen or patient request based on prior history – Not performed at P&amp;M</i>	
<b>Chorionic Villus Sampling</b> Full chromosome analysis of placenta cells. 1:300 risk pregnancy loss	10 weeks – 13 weeks and 6 days.
<b>Amniocentesis</b> Full chromosome analysis of fetal cells from amniotic fluid. 1:300 risk pregnancy loss	16 weeks and above

<b><u>Additional Non-Invasive Testing Options</u></b>	<b>Timing – (Gestational Weeks)</b>
<p><b>Inheritest CF/SMA Panel - Genetic Carrier Screening</b>  Partner needs carrier testing if positive  <b>Cystic Fibrosis (CF) Carrier Screening</b>  1:24-94 carrier rate (varies by ethnicity)  Screens for most common, but not all, mutations.  <b>Spinal Muscular Atrophy (SMA) Carrier Screening</b>  1:35-117 carrier rate (varies by ethnicity)  affects 1:6000-10,000 babies annually  Respiratory failure and respiratory infection are causes of death  Muscles degenerate and atrophy due to death of nerve cells in spinal cord</p>	<p>1st visit ideal, can be done at any time during or before pregnancy.</p>
<p><b>Inheritest Core Panel - Genetic Carrier Screening</b>  Partner needs carrier testing if positive  Includes Cystic Fibrosis (CF) and Spinal Muscular Atrophy (SMA) Carrier Screening described above, as well as Fragile X syndrome.  <b>Fragile X Carrier Screening</b>  1: 259 carrier rate for females  A leading inherited cause of intellectual and developmental disabilities  Fragile X carrier screening is recommended for women with a family history of fragile X-related disorders or intellectual disability suggestive of fragile X syndrome</p>	<p>1st visit ideal, can be done at any time during or before pregnancy.</p>
<p><b>Inheritest Ashkenazi Jewish Panel - Genetic Carrier Screening</b>  Partner needs carrier testing if positive  Screens for more than 40 disorders specific to individuals of Ashkenazi Jewish descent – including CF, SMA, Fragile X, and Tay-Sachs disease</p>	<p>1st visit ideal, can be done at any time during or before pregnancy.</p>
<p><b>AFP (alpha fetoprotein)- non-genetic</b>  Measures risk of open neural tube defects  Detects 80% of ONTD  1 – 3% false positive rate</p>	<p>15 weeks – 23 weeks and 6 days</p>

**I have personally explained the above testing options to the patient or the patient’s designated decision maker.**

\_\_\_\_\_  
Provider Signature

\_\_\_\_\_  
Date

**The above testing options have been explained to me.**

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

Patients are encouraged to get personalized cost estimates, insurance coverage information and more from LabCorp by going to [www.integratedgenetics.com](http://www.integratedgenetics.com)