

AMNIOCENTESIS

Information and consent

Amniocentesis is the **gold-standard prenatal diagnostic test** for chromosome problems because it is **direct from the fetus** (mainly it's skin cells which shed into the amniotic fluid). It is a relatively late test, ideally performed from 15 weeks on, so earlier tests are often preferred (CVS, Non-Invasive Prenatal Tests – NIPT, or first trimester screening depending on the situation).

Amniocentesis is the ideal test when:

- Detailed tests are required, eg extra chromosome detail or array studies
- Tests which represent the mainly placenta (CVS or NIPT) won't suffice, or need further interpretation.
- There are late findings, eg at the main 19-week anatomy ultrasound.

Some reasons amniocentesis may be offered:

1. **Advanced maternal age.** The chance of Down syndrome and other trisomies get higher as the mother gets older.
2. **Screening tests** indicate a high risk. These may include NIPT, ultrasound, blood tests or a combination of these.
3. A **previous pregnancy was affected** by chromosomal or genetic problems, or if there is a **family history** of these.
4. **Ultrasound findings or other pregnancy tests** suggest a chromosomal problem, a viral infection, or other specific problem.
5. **DNA** tests.

How is amniocentesis performed?

An ultrasound is performed first. Then the skin is cleansed with antiseptic. A fine needle is then passed under ultrasound vision through the skin and down into the fluid which surrounds the baby, so that a sample of the fluid can be taken. The amount depends on the reason for the test and the gestational age. On average it is no more painful than a blood test, although the abdominal wall may feel sore afterwards.

After the test:

You will need to sit quietly for a few minutes after the test, and have a restful day. If your blood group is Rhesus negative (1 in 5 women), a routine injection following the test will help avoid problems in future pregnancies.

Is amniocentesis completely reliable?

Amniocentesis is very close to 100% accurate for the chromosome result. Even with detailed tests, there is no guarantee that the baby will be born without any birth defect or mental retardation.

What are the risks of amniocentesis?

This test has been very widely used worldwide, and extensively studied. It carries no significant risk for mother or baby, apart from the risk of miscarriage. This is about 1 in 200 above the background miscarriage rate.

When and how do you get the results?

It is possible to have a preliminary rapid result in most cases, which provides a good indication of some common chromosome problems including Down syndrome. For the most detailed check for any chromosome problem the cells in the fluid are cultured in the laboratory before they can be interpreted. You will usually hear from your doctor in about 2 weeks for this final result.

Very rarely there may be a technical problem, such as failure of the cells to grow in the laboratory. You would be contacted as soon as this was recognised, so it is important to let your doctor know how to contact you if you are planning to be away.

What if the result is abnormal?

You would be told what the abnormality was and what is known about how this could affect your baby. You could use this information to consider whether or not you wanted to continue the pregnancy. There would be a full chance to discuss the situation according to the results and your wishes.

Do you have any allergies including Betadine, Latex or iodine products? Yes / No
If you have any other questions please ask.

Consent:

I have been given adequate information and request this test.

Name: _____

Signature: _____

Date: _____