

Change in Prenatal Screening Test Notice:

ENHANCED FTS FOR TWINS:

As of July 4, 2017, the Prenatal Screening Laboratory is performing enhanced FTS in Twin pregnancies. This new prenatal screening test uses 2 serum markers (PAPP-A and free beta-HCG) plus the nuchal translucency (NT) measurement, along with maternal age to generate a *pregnancy specific risk* for Down syndrome. It can also indicate a high risk for trisomy 18. Unlike enhanced FTS for singletons, it does not include PIGF and AFP.

Enhanced FTS for twins is replacing the NT and maternal age screening test previously offered in twin pregnancies. Enhanced FTS in twin pregnancies is expected to have an 85% detection rate with a 5% false positive rate.

The risk number on the report is the pregnancy specific risk. For monochorionic twins, it is the chance that both twins are affected. For dichorionic twins, it is the chance that one or both twins are affected.

To order enhanced FTS for twins, request eFTS on the standard prenatal screening requisition. As always, the patient must first have her NT ultrasound followed by blood work. These must be done between 11+0 and 13+6 weeks in pregnancy. The chorionicity of the pregnancy must also be noted on the requisition or at the time of the NT ultrasound. Please also ensure to complete the patients weight and ethnic information on the requisition as this information is important to the accuracy of the result.

As a reminder, in twin pregnancies, if the patient will be at least 32 years of age at delivery, she also could consider diagnostic testing via CVS or amniocentesis for fetal chromosome abnormalities.

Enhanced FTS cannot be done for triplet pregnancies. In this case, prenatal screening for Down syndrome will continue to be offered using the NT measurement combined with maternal age.

**Of note, screening for open neural tube defects by MS-AFP should be discontinued unless good quality ultrasound screening between 18-20 weeks gestation is not possible.*