Universal Non-Invasive Prenatal Screening at SFHMC – A Proposed Workflow

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Why Universal cfDNA Screening?

Our goal is to provide our patients have access to EQUITABLE care

and

BEST available care

Fetal Diagnostic (Ultrasound) Unit – Current Screening

- Private practice patient referral: ~ 60%
  - cfDNA screening done in a large number of low-risk patients
- THONE patient: ~ 40%
  - cfDNA screening only for high-risk patient

Proposed Workflow – Education and Consent

1. Handout Prenatal Screening Education Form to patient while in the waiting room
2. After the ultrasound is completed, the sonographer will remind the patient to read the Prenatal Screening Education Form
3. Attending will review patient's ultrasound and address any question or concerns the patient has
4. Attending will obtain consent for screening

Handout Prenatal Screening Education Form

1. Address background risk of genetic condition
2. Discuss screening option
   - Sequential screening: Part 1 & Part 2
   - Cell-free DNA screening
3. Clarify screening tests do not substitute ultrasound
   - Recommend ultrasound at 11 – 13 weeks and 18 – 22 weeks
4. Discuss insurance payment
   - Cannot guarantee insurance will pay
   - Given the phone number to find out out-of-pocket cost estimate for cfDNA (typically ≤ $249)

Proposed Work flow – Results Disclosure

1. Normal results will be released to low-risk patients
2. Genetic counselor will contact high-risk patient and patients with abnormal results
3. Patient will be counseled on the risk, benefits and alternatives of diagnostic testing
   - CVS
   - Amniocentesis
4. Patient will be offered appropriate ultrasound follow-up

Universal Non-Invasive Prenatal Screening at SFHMC Workflow

- MFM Division meeting this week to review, make any necessary updates and approve the patient education handout and workflow
- Potential implementation date: by the end of August 2020