KK Women's and Children's Hospital
SingHealth

Reg No 52839081C
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MATERNAL SERUM SCREENING

Patient's name label

Maternal Serum Prenatal Screening Lab
Clinical Laboratory
Basement 1

Requesting Doctor
Name:
Clinic:
Address:
Tel:
Fax:

Counselling Appointment (If required)
☐ Scheduled appointment on arrival
(next TCU/ within _____ weeks)

☐ Stat appointment
(Please call Tel: 63941955)

PLEASE FILL IN ANY THE FIELDS BELOW OTHERWISE SAMPLE CANNOT BE PROCESSED

MATERNAL HISTORY

LMP : _____(dd/mm/yy)

Diabetes	☐ No	☐ Yes
Multiple pregnancy	☐ No	☐ Yes
Smoker	☐ No	☐ Yes
Previous Down Syndrome Baby	☐ No	☐ Yes
Other abnormalities	☐ No	☐ Yes, pls. specify, _____

If IVF Pregnancy: Fresh/Frozen cycle O.R. date :_____(dd/mm/yy) E.T. date _____ dd/mm/yy)

Remarks

ULTRASOUND SCAN

☐ Done on _____ (dd/mm/yy)

CRL = ☐☐.☐ mm (4 – 84mm) corresponding to _____ weeks (between 8 - 13 weeks)

HC = ☐☐☐.☐ mm (>100 mm) corresponding to _____ weeks (between 14 -20 weeks)

☐ Pending

Blood Collection Date : _____ (dd/mm/yy) Weight: ☐☐☐.☐kg

I/We have been counselled and are aware of the following:

1. Maternal serum screening (MSS) is a blood test taken at 15 weeks to 20 weeks 6 days of pregnancy to screen for mothers at higher risk of carrying a Trisomy 21(Down Syndrome) baby. An ultrasound to exclude multiple pregnancies and to date the pregnancy accurately is recommended.
2. The test is available to mothers of all ages.
3. This test, by itself, or integrated with the first trimester Nuchal Translucency ultrasound scan will provide you with an individualized risk of having a baby with Trisomy 21. If you decide to take the test and the risk is 'high', you may then decide to have an Amniocentesis procedure.
4. The test result indicates the chances of a baby having Trisomy 21and is not meant to replace Amniocentesis. It provides you with an individual risk so that you can make a decision whether or not to have Amniocentesis.
5. A risk of 1 in 250 (4 in 1000) is generally considered high enough to justify for amniocentesis. However the decision is one solely for you and your spouse to make.
6. Amniocentesis results are usually conclusive. However they are associated with procedure-related miscarriage risks. We estimate the risk at 1 in 300 (3.3 in 1000) amniocentesis performed.
7. There is no cure or treatment for Trisomy 21. If the result of Amniocentesis confirms that the baby has Trisomy 21, you may then consider a termination.
8. The hospital may contact me after pregnancy as part of their follow-up quality assurance and audit.

I acknowledge the above and elect **to have/not to have** the Maternal Serum Screening (MSS) test done.

_____ _____
Patient's Signature & Date Counsellor's Signature & Date
Language used : English / Mandarin / Malay / _____