

## Second Trimester Screening

Optimal gestational age for screen is 16-18 weeks. Please check one of the following tests:

- |   |  |
|---|--|
| <input type="checkbox"/> AFP, Maternal screen (2198255) | <input type="checkbox"/> Integrated 2, serum (2199463) |
| <input type="checkbox"/> Maternal screen 3 (2191493)    | <input type="checkbox"/> Sequential 2 (2199459)        |
| <input type="checkbox"/> Maternal screen 4 (2191499)    |  |
| <input type="checkbox"/> Maternal screen 5 (2196933)    |  |

\*Please note, to order either the integrated or sequential testing, the patient must have had first trimester testing. The integrated test does not include an NT measurement.

Patient name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Collection date: \_\_\_\_\_

Estimated date of delivery: \_\_\_\_\_

Determined by:  Ultrasound  Last Menstrual Period (LMP)  EDD

Maternal weight (lbs.): \_\_\_\_\_

Mother's ethnic origin:

African American  Caucasian  Asian Other: \_\_\_\_\_  
 Hispanic

Insulin-dependent diabetic prior to pregnancy?  No  Yes

Is this a repeat specimen?  No  Yes

Number of fetuses:  Singleton  
 Twins  
 Multiples, # of fetuses: \_\_\_\_\_

History of neural tube defect?  No  Yes

History of Down syndrome?  No  Yes

History of cystic fibrosis?  No  Yes

Other relevant clinical information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please complete all information and attach this form to the test requisition.  
Send both with the specimen in the transport bag to the laboratory.