Talking to Your Health Care Provider
Consider Your Preferences

Before talking to your health care provider about prenatal genetic screening options, it may help to take some time to think about your personal values and preferences beforehand, so you can enter the conversation with an idea of the information you want to gather and desired outcomes. A few questions you may want to ask yourself and discuss with your partner include:

- What am I hoping to learn from genetic screening?
- What will I do with the information I gain?
- What follow-up testing and other care decisions should I consider in the event of a positive screening result?

Engage Relevant Health Care Providers

**Obstetric Health Care Provider** – a physician, nurse practitioner, or nurse midwife trained for routine pregnancy care and delivery

**Maternal-Fetal Medicine Specialist** – an obstetrician with specialized training to manage high-risk pregnancies and may become involved in your prenatal care after a positive fetal genetic diagnosis; also called a perinatologist

**Genetic Counselor** – a medical genetics and counseling professional with specific training to support health care providers and patients through the genetic screening and diagnostic testing processes, particularly in the case of positive screening or diagnostic test results

**Geneticist** – a biologist or medical doctor who is trained to evaluate and diagnose fetal conditions based on relevant exams and genetic test results

Understand the Process

Health care providers need your informed consent to perform the blood draw for genetic screening. This means they need to dedicate time to discuss what genetic screening means and help you make your decision about whether or not to undergo the genetic screening process.

Sometimes providers may go through this conversation quickly, as it is one of many steps in providing pregnancy care, but you should feel empowered to take the time that you need to address any questions or concerns beforehand. Don’t be afraid to ask for more time to discuss or deliberate.
Questions for Your Health Care Provider

**Before screening:**

- Based on my personal history, pregnancy history and family history, what are my risk factors for the conditions screened by noninvasive prenatal screening (NIPS)?
- What conditions do you recommend including in my screening panel?
- When should I be screened?
- What are the steps in the screening process?
- What happens if my results come back normal? What if they indicate high risk?
- How long will it take to receive my screening results?
- How accurate will the results be?
- Should I speak to a genetic counselor before screening? If so, how can I find one?
- Will my insurance cover the cost of screening and follow-up tests?

**After screening:**

- What do my NIPS screening results mean?
- Do I need additional diagnostic testing?
- If so, what are my options? What are the pros and cons of each option?
- When should I undergo diagnostic testing?
- What are the chances that my NIPS results are a **false-positive** or **false-negative**?
- What happens after diagnostic testing? How long will it take to receive those results?
- Given my results, should I speak to a genetic counselor?
Questions for Your Genetic Counselor

Your genetic counselor should be able to answer many, if not all, of the questions provided on the previous page. They may also be particularly well-equipped to discuss:

- Your risk factors and if your pregnancy is considered high risk for certain conditions
- The meaning of a positive NIPS result for both you and your baby
- The accuracy of your NIPS results and likelihood of a false-positive or false-negative result
- If your baby is diagnosed with a condition, details about the condition and managing expectations for your and your baby's health
- Recommendations to community resources and support groups

Depending on when you seek out a genetic counselor, they may be able to coordinate with your regular health care provider on screening results, additional procedures, and planning for the rest of the pregnancy.