Prenatal tests

Prenatal tests are medical tests you get when you're pregnant. They help your provider find out how you and your baby are doing. You get some prenatal tests, like blood pressure checks and urine tests, at almost every checkup. You get other tests at certain times during pregnancy or only if you have certain problems. Talk to your provider about which tests are right for you.

First trimester

Cell-free fetal DNA screening (also called noninvasive prenatal screening or testing) — Tests your blood for your baby's DNA to see if he may have certain genetic conditions, like Down syndrome. You can have this test after 10 weeks of pregnancy. Your provider may recommend the test if an ultrasound shows that your baby may have a birth defect or if you've already had a baby with a birth defect. The test isn't recommended if you're not likely to have a baby with a birth defect or if you're pregnant with multiples (twins, triplets or more). It's called noninvasive because it's done with a blood test. It doesn't require any other tools that break the skin or enter your body. If you have this test, your provider may recommend you have an invasive test, like amniocentesis, to confirm the results.

Chorionic villus sampling (also called CVS). Tests the tissue from the placenta to see if the baby has a genetic disorder, like Down syndrome. The test usually is done between 10 and 12 weeks of pregnancy. Your provider may want you to have a CVS if:

- You are older than 35.
- Genetic problems run in your family.
- Your first-trimester screening shows that your baby is at increased risk for birth defects.

Cystic fibrosis (also called CF) carrier screening. Tests to see if you may have the gene that causes CF. CF is a disease that affects breathing and digestion. You and your partner can have this test any time during pregnancy.

Early ultrasound. Helps your provider confirm that you're pregnant. It also dates the pregnancy, so you know exactly how old your baby is.

First-trimester screening. An ultrasound and blood test to see if your baby may be at risk for some birth defects, like heart defects and conditions like Down syndrome. The test usually is done at 11 to 13 weeks of pregnancy.

Second trimester

Maternal blood screening. Tests your blood to see if your baby may be at risk for some birth defects, like heart defects and conditions like Down syndrome. The test is done at 15 to 20 weeks of pregnancy.

Amniocentesis (also called amnio). Tests the fluid (called amniotic fluid) around the baby to see if he has a genetic disorder, like Down syndrome. The test usually is done at 15 to 20 weeks of pregnancy. Your provider may want you to have an amnio for the same reasons as for CVS.

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Watch videos on how to have a healthy pregnancy at: **marchofdimes.org/videos**

Ultrasound. Helps your provider check for birth defects and make sure your baby is growing. The test usually is done at 18 to 20 weeks of pregnancy.

Glucose screening test. Tests to see if you may have gestational diabetes. The test is done at 24 to 28 weeks of pregnancy.

Third trimester

Group B strep test. Group B strep is an infection you can pass to your baby during birth. The test checks fluid from your cervix to see if you have Group B strep. The cervix is the opening to the uterus (womb) where your baby grows. The test is done at 35 to 37 weeks of pregnancy.

Genetic counseling

Genetic counseling helps you find out about how genes, birth defects and other medical conditions run in families, and how they can affect your health and your baby's health. A genetic counselor asks you questions about you, your partner and your families to learn about medical conditions that may run in your families. These genetic conditions can include birth defects, like cystic fibrosis, heart defects and sickle cell disease.

You may want to get genetic counseling if:

- You're older than 35.
- You or your baby's father has already had a baby with a genetic condition or birth defect.
- Genetic conditions run in your family.
- Prenatal test results say that your baby may have a genetic condition.
- You and the baby's father are blood relatives (such as first cousins).
- You or your baby's father is from an ethnic group that is more likely than others to have certain health conditions. For example, sickle cell disease is more common in African-Americans than in people who aren't African-American.