MAYO CLINIC LABORATORIES

Test Definition: FMSS2

Maternal Serum Screening, Integrated, Specimen #2, Alpha Fetoprotein, hCG, Estriol, and Inhibin A

Overview

Method Name
Quantitative Chemiluminescent Immunoassay (CLIA)

NY State Available
Yes

Specimen

Specimen Type
Serum

Specimen Required
Specimen collection must occur between 14 weeks, 0 days and 24 weeks, 6 days gestation. The recommended time for maternal serum screening is 16 to 18 weeks gestation. Acceptable date ranges to collect the second sample is provided in the Integrated-1 report.

Collection Container/Tube: Serum gel or red top
Submission Container/Tube: Plastic vial
Specimen Volume: 3 mL Serum
Collection Instructions:
1. As soon as possible or within 2 hours of collection, centrifuge and aliquot serum into a plastic vial.
2. Send refrigerate.
Note: This test requires that a previous first trimester specimen, FFMSS / Maternal Serum Screening, Integrated, Specimen #1, PAPP-A, NT has been performed.

Specimen Minimum Volume
Serum: 1 mL

Reject Due To

Hemolysis	Reject
Plasma	Reject

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container

Serum	Refrigerated (preferred)	14 days	
	Ambient	72 hours	
	Frozen	365 days	

Clinical & Interpretive

Clinical Information
Refer to https://ltd.aruplab.com/

Reference Values
An interpretive report will be provided.

Interpretation
An interpretive report will be provided. Part 2 must be completed to receive an interpretable result. If the second specimen is not received for sequential screening, the results are uninterpretable and no maternal risk will be provided.

Cautions
A screen interpreted as "normal" misses approximately 15% of Down syndrome, 20% of open neural tube defects and 10% of trisomy 18 cases.

Abnormal results require follow-up with targeted ultrasound, genetic counseling, and consideration of fetal diagnostic testing.

Performance

PDF Report
No

Day(s) Performed
Monday through Sunday

Report Available
4 to 8 days

Performing Laboratory Location
ARUP Laboratories

Fees & Codes

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Fees

- Authorized users can sign in to Test Prices for detailed fee information.
- Clients without access to Test Prices can contact Customer Service 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact Customer Service.

CPT Code Information

81511

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
FMSS2	Maternal Serum Screen INT, Sp-2	Not Provided

Result ID	Test Result Name	Result LOINC® Value
Z5170	Patient's AFP	1834-1
Z5171	MoM for AFP	20450-3
Z5172	Patient's uE3	2250-9
Z5173	MoM for uE3	20466-9
Z5174	Patient's hCG, 2nd Trimester	19080-1
Z5175	hCG MoM, 2nd Trimester	20465-1
Z5176	Patient's DIA	23883-2
Z5177	MoM for DIA	35738-4
Z5178	PAPP-A Maternal	32046-5
Z5179	MoM for PAPP-A	32123-2
Z5180	Nuchal Translucency (NT)	12146-7
Z5181	MoM for NT	49035-9
Z5182	Nuchal Translucency (NT), Twin B	12146-7
Z5183	MoM for NT, Twin B	49035-9
Z5184	Maternal Screen Interpretation	49586-1
Z5185	Maternal Age At Delivery	21612-7
Z5186	Maternal Weight	29463-7
Z5187	Estimated Due Date	11778-8
Z5188	Gestational Age for Second Specimen	18185-9
Z5189	Dating	21299-3
Z5190	Number of Fetuses	11878-6
Z5191	Maternal Race	21484-1
Z5193	Smoking	64234-8
Z5194	Family Hx Neural Tube Defect	8670-2
Z5195	Family History of Aneuploidy	32435-0
Z5196	Specimen	19151-0
Z5197	Crown Rump Length	11957-8
Z5198	Crown Rump Length, Twin B	11957-8

Z5199	Sonographer Certification Number	49089-6
Z5200	Sonographer Name	49088-8
Z5201	Ultrasound Date	34970-4
Z5202	EER Maternal Serum, Integrated, Sp2	11526-1
Z6445	Maternal Diabetes at Conception	44877-9