



Reporting Title: AFP Single Marker SCR N, Maternal, S

Performing Location: Rochester

Necessary Information:

In order to provide the best results, either answer the order entry questions or provide the required information using the Second Trimester Maternal Screening Alpha-Fetoprotein / Quad Screen Patient Information (T595).

Specimen Requirements:

Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 1 mL

Collection Instructions:

1. Do not collect specimen after amniocentesis as this could affect results.
2. Centrifuge and aliquot serum into plastic vial within 2 hours of collection.

Additional Information:

1. Collect blood between 15 weeks, 0 days and 22 weeks, 6 days.
2. Initial or repeat testing is determined in the laboratory at the time of report and will be reported accordingly. To be considered a repeat test for the patient, the testing must be within the same pregnancy and trimester, with interpretable results for the same test, and both tests are performed at Mayo Clinic.

Specimen Minimum Volume:

0.5 mL

Forms:

1. Second Trimester Maternal Screening Alpha-Fetoprotein / Quad Screen Patient Information (T595) is required
2. If not ordering electronically, complete, print, and send a General Request (T239)

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	14 days	
	Frozen	90 days	
	Ambient	7 days	

**Ask at Order Entry (AOE) Questions:**

Test ID	Question ID	Description	Type	Reportable
MAFP1	DRPHN	Physician Phone Number	Plain Text	Yes
MAFP1	MTWT	Patient Weight	Plain Text	No
MAFP1	LBKGS	Units (lbs or kg): <ul style="list-style-type: none">• lbs• kg	Answer List	No
MAFP1	EGGDR	IVF Egg Donor Date of Birth	Plain Text	No
MAFP1	EGGFR	IVF Egg or Embryo Freeze Date	Plain Text	No
MAFP1	PRHIS	Prev Down (T21) / Trisomy Pregnancy: <ul style="list-style-type: none">• No• Yes• Unknown• If MAFP - Not applicable	Answer List	No
MAFP1	IDD	Insulin dependent diabetes: <ul style="list-style-type: none">• None• Diabetic	Answer List	Yes
MAFP1	RACE1	Patients race: <ul style="list-style-type: none">• Black• non-Black	Answer List	Yes
MAFP1	IVFP	IVF pregnancy: <ul style="list-style-type: none">• No• Yes	Answer List	Yes
MAFP1	PRNTD	Prev Pregnancy w/ Neural Tube Defect: <ul style="list-style-type: none">• No• Yes• Unknown	Answer List	Yes
MAFP1	PTNTD	Patient or father of baby has a NTD: <ul style="list-style-type: none">• No• Yes• Unknown	Answer List	Yes
MAFP1	MULTF	Number of Fetuses: <ul style="list-style-type: none">• 1• 2• 3 or more	Answer List	Yes
MAFP1	CHOR_	Number of Chorions: <ul style="list-style-type: none">• Monochorionic• Dichorionic• Unknown• Not applicable	Answer List	Yes
MAFP1	ESTDD	Patient's Estimated Due Date (EDD)	Plain Text	No



Test ID	Question ID	Description	Type	Reportable
MAFP1	MTHOD	Method Used to Determine EDD: <ul style="list-style-type: none">• Ultrasound• LMP	Answer List	No
MAFP1	SMKNG	Current Cigarette smoking status: <ul style="list-style-type: none">• Non-smoker• Smoker	Answer List	Yes
MAFP1	INTL	Initial or repeat testing: <ul style="list-style-type: none">• Initial• Repeat	Answer List	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
7058	Recalculated Maternal Serum Screen Also used by tests: QUAD1	Alphanumeric		32399-8
113146	Results Summary Also used by tests: QUAD1	Alphanumeric		32399-8
113147	Neural tube defect risk estimate Also used by tests: QUAD1	Alphanumeric		48803-1
10351	AFP Also used by tests: QUAD1	Alphanumeric		83073-7
113148	AFP MoM Also used by tests: QUAD1	Numeric	MoM	23811-3
10356	INTERPRETATION Also used by tests: QUAD1	Alphanumeric		49092-0
10357	RECOMMENDED FOLLOW UP Also used by tests: QUAD1	Alphanumeric		80615-8
10248	Additional comments Also used by tests: QUAD1	Alphanumeric		48767-8
3009	Specimen collection date Also used by tests: QUAD1	Alphanumeric		33882-2
7823	Maternal date of birth Also used by tests: QUAD1	Alphanumeric		21112-8



Result ID	Reporting Name	Type	Unit	LOINC®
7834	Calculated age at EDD Also used by tests: QUAD1	Alphanumeric		43993-5
26717	Maternal Weight Also used by tests: QUAD1	Numeric	lbs	29463-7
26718	Maternal Weight Also used by tests: QUAD1	Alphanumeric	kg	29463-7
IDD	Insulin dependent diabetes Also used by tests: QUAD1	Alphanumeric		44877-9
RACE1	Patient race Also used by tests: QUAD1	Alphanumeric		21484-1
SMKNG	Current cigarette smoking status Also used by tests: QUAD1	Alphanumeric		64234-8
10054	EDD by U/S scan Also used by tests: QUAD1	Alphanumeric		11781-2
7203	GA on collection by U/S scan Also used by tests: QUAD1	Alphanumeric	wk,d	11888-5
7753	EDD by LMP Also used by tests: QUAD1	Alphanumeric		11779-6
7204	GA on collection by dates Also used by tests: QUAD1	Alphanumeric	wk,d	11885-1
7830	GA used in risk estimate Also used by tests: QUAD1	Alphanumeric		21299-3
MULTF	Number of Fetuses Also used by tests: QUAD1	Alphanumeric		55281-0
CHOR_	Number of Chorions Also used by tests: QUAD1	Alphanumeric		92568-5
IVFP	IVF pregnancy Also used by tests: QUAD1	Alphanumeric		47224-1
PRNTD	Prev Pregnancy w/ Neural Tube Defect Also used by tests: QUAD1	Alphanumeric		53827-2



Result ID	Reporting Name	Type	Unit	LOINC®
PTNTD	Patient or father of baby has a NTD Also used by tests: QUAD1	Alphanumeric		53827-2
INTL	Initial or repeat testing Also used by tests: QUAD1	Alphanumeric		77202-0
DRPHN	Physician Phone Number Also used by tests: QUAD1	Alphanumeric		68340-9
10358	GENERAL TEST INFORMATION Also used by tests: QUAD1, 1STT1	Alphanumeric		62364-5

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

82105

Reference Values:

NEURAL TUBE DEFECTS:

An alpha-fetoprotein (AFP) multiple of the median (MoM) <2.5 is reported as screen negative.
AFP MoM > or =2.5 (singleton and twin pregnancies) are reported as screen positive.

An interpretive report will be provided.