

PROVINCIAL LABORATORY SERVICES
COMMUNIQUÉ

<http://www.healthpei.ca/laboratoryservices>

TO: Family Physicians / Nurse Practitioners / Obstetricians
FROM: Provincial Laboratory Services Health PEI
DATE: February 8, 2016
RE: PRENATAL TESTING TIPS

Dear Colleagues:

With the increased involvement of Family Physicians and Nurse Practitioners in prenatal care, we, at the laboratory, are observing an increase rate of prenatal test rejection and repeat testing. This is due to several different reasons including lack of complete information on the forms or specimen container, wrong tests picked and lack of patient information regarding fasting or test time among other.

This is causing frustration both for patients and physicians.

Attached are a few tips to improve on test requests and collections in the areas where we are observing the most problems.

We would appreciate it if you would take a few moments to review them and keep them somewhere for future reference.

We would really appreciate your cooperation in this matter. Together we can improve on our rejection and re-testing rates.

The attached document will also be posted on the Provincial Lab website under [Communiqués](#) at the website address above.

Thank you.

FOR MORE INFORMATION PLEASE CONTACT:

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PRENATAL LAB TESTING TIPS

Blood Transfusion

- Choose “**Prenatal**” test on the Request form. **Do not choose Group and Screen.**
- Include **EDC** (Estimated date of confinement/delivery) there is a space provided for this.
- Requisition and specimen must have **Date and Time of collection and Signature of the phlebotomist recorded on both.**
- **Minimum** requirement for signature on the tube is **First initial and Complete last name.** Initials only are not acceptable.
- Request **copies** or if the report is to be faxed to another physician and Include fax number.

Rh Immune Globulin (RHIG)

- For Rh negative patients, a form will be sent to the ordering physician which includes instructions about ordering RHIG / WinRho.
- If RHIG is required, the form must be completed and returned to **Blood Transfusion Service Lab, QEH.**
- Specify on the form **where the patient will be receiving** this product.
- **Contact us at QEH (at 902-894-2335)** to discuss sites where RHIG is stocked throughout PEI.
- If receiving at Same Day Treatment Unit at QEH please **Book an appointment** through them.

Please note that **PCH Ambulatory Care does not accept patients** for RHIG administration.

Once the form is returned, the Lab will phone you to make arrangements for shipping. The product **should preferably be shipped the day before or the day of the patient’s appointment.**

Prenatal Pap Screening

Pap screening **is not routinely required for prenatal exam.** If the patient had a routine normal Pap within the last two years please follow the routine screening guidelines.

Prenatal Parvovirus Testing

Fifth disease is a mild rash illness caused by parvovirus B19. Pregnant women who are not immune usually have only mild illness if they are exposed to fifth disease. Also, their babies usually do not have any problems. A blood test for parvovirus B19 can show if you are immune to this virus and have no recent sign of infection, are not immune and have never been infected, or have had a recent infection.

- Order both **Parvovirus IgG and IgM** on prenatal patients.

Screening for Gestational Diabetes

Positive oral glucose tolerance testing (OGTT) confirms gestational diabetes, which is a well known risk factor for Type II diabetes. The Canadian Diabetes Association recommends screening women for type II diabetes if they have a history of gestational diabetes.

- Sample type: **Grey tubes**
- **Only 1 requisition per Tolerance.** Please **Check off one Gestational testing.** We are getting three requests, one for each hour

Tolerance Tests* - Glucose & Lactose (Appointment required)

- 75 g Diabetic - Confirmatory
- 50 g Gestational - Screen 75 g Gestational - Confirmatory
- Lactose Tolerance Test

- Capture **first collection time** on requisition
- Label **timed specimen(s)** appropriately: Fasting, 1hr, 2hr
- **50 g Gestational – Screen**
 - No appointment required
 - Patient does **NOT need to be fasting**
 - 1 Hour collection only (Post Trutol solution)
- **75 g Gestational – Confirmatory**
 - Collection Options:
 - Office
 - QEH Specimen Collection Dept
 - **Appointment is required** (Ph:902-894-2138)
 - Must be booked **by Physician Office** not by patient
 - Patient **must be fasting** (minimum: 8 hours, Please provide **instructions to the patients**)
 - Fasting, 1 Hour and 2 Hour collections (again only **one request form** is required)

REMINDER: *Post-Gestational follow up of patients diagnosed with Gestational Diabetes Mellitus (GDM) during pregnancy – need to be screened for presence of pre-diabetes or Type 2 Diabetes (75 g OGTT) between **6 weeks - 6 months postpartum.***

Screening for Birth Defects

Prenatal screening is done to define the risk of pregnancies with birth defects such as neural tube defect, Down syndrome or Trisomy 18. At PEI, we perform **Integrated Prenatal Screening** which calculates the risk of having birth defects based on the **results from the 1st trimester and 2nd trimester screens**. This approach has a superior detection rate of birth defects.

- Blood samples should preferably be collected from pregnant women at both **1st and 2nd trimester** to complete the screen and provide conclusive results.
- If the patient presents **too late for the 1st trimester PAPP-A** she can **still have the 2nd trimester AFP,HCG and E**. It's still valid but not as accurate.
- Risk calculation relies heavily on parameters such as **age, weight and race**. Therefore these parameters must be provided accurately and consistently.

- Use of Patient Demographic Labels / Physician Labels is acceptable
- Please complete **all highlighted** sections of the requisition (ultrasound if applicable)

Applies to both First & Second Trimester Requisitions