Follow up testing guidelines for elevated Maternal Serum AFP of 2.3 MoM or greater

- Ensure all relevant clinical data on the report is correct.

- If the MSAFP is 2.3 to 2.9 MOM
  - Order a dating ultrasound if one has not already been done
  - If the dating ultrasound shows a difference in dates of 10 days or more using the Hadlock ’82 scale for BPD contact the MSS Co-ordinator at 416-756-6055 Ext 2 - 1 to amend the report. (If you do not have a copy of this scale we will fax you a copy on request.)
  - If dating ultrasound already done or patient >18 weeks by LMP YOU should arrange a detailed anatomical ultrasound for between 18 & 20 weeks gestation. (This ultrasound may have already been organized as part of routine obstetrical care as recommended by the SOGC.)
  - Detailed ultrasound after 18 weeks has a better detection rate MSAFP since it can detect both open and closed Neural tube defects. It is recommended you notify the ultrasound centre in advance that the patient has an elevated MSAFP.
  - If the 18 – 20 week ultrasound is normal and dating is confirmed the risk of an open neural tube defect is low. She should then have routine obstetrical care with recognition that elevated MSAFP can be associated with obstetrical risks such as preterm delivery and placental issues.
  - Interpretation of ultrasound is HCP responsibility. Lab staff are not qualified to interpret ultrasound finding beyond confirming dating.
  - If the ultrasound is normal, genetics referral is not indicated.
  - If the ultrasound is abnormal or raises any concerns refer patient to Genetics.

- If the MSAFP is greater than or equal to 3.0 MOM
  - Referral to Genetics is always recommended once dates are confirmed by ultrasound.