CHORIONIC VILLUS SAMPLING (CVS)

INDICATIONS FOR REFERRAL FOR CHORIONIC VILLUS SAMPLING (CVS):
1. Increased risk of chromosome abnormality
   a. Advanced maternal age
   b. Previous child with chromosome abnormality
   c. Parental chromosome abnormality
2. Positive first trimester screen result
3. Thickened nuchal translucency (3 mm or greater)
4. High risk for single gene disorder which is amenable to prenatal molecular diagnosis

APPROPRIATE GESTATIONAL AGE
CVS can be performed between 10 and 13 6/7 weeks

PRE-PROCEDURE EVALUATION BY REFERRING PROVIDER
In order to minimize the risk of infection from CVS, please screen patient for:
- Chlamydia
- Neisseria gonorrhea
- Group B strep. If patient is positive for Chlamydia, GC or GBS, initiate appropriate treatment.
It is not necessary to postpone CVS until treatment has been completed.
- Blood type and antibody screen.

SCHEDULING APPOINTMENTS
Call the Prenatal Diagnosis and Genetics clinic at 505-272-6611.
Schedule the patient for genetic counseling and CVS.
Fax records to 505-272-1311

CONSULTATION: 24 hour consultation is available by calling the Maternal Fetal Medicine service at the University of New Mexico Hospital 1-888-UNM-PALS.