

4. Universal Fetal Cardiac Assessment: Approximately 60% of Down Syndrome fetuses and approximately 80% of trisomy 18 fetuses have structural heart diseases. **The detection of structural heart disease therefore is a critical requirement of ultrasound risk assessment for chromosomal abnormalities. We are the only private practice providers of genetic obstetrical ultrasound studies whose physicians also have the dedicated expertise in fetal echocardiography (detailed evaluation of the fetal heart).**

5. Quantitative Down Syndrome Risk Assessment: The end result of your exam will be a number that represents the risk of Down Syndrome or Trisomy 18 that is unique to your fetus. Each patient has their own unique emotional balance sheet that weighs the risk of a chromosomal abnormal baby with the risks and benefits of knowledge gained from an amniocentesis. The purpose of this consultation is to provide the information allowing you to make a decision that is best for you (Do I want or need an amniocentesis?).

6. Sophisticated Imaging Tools: If a fetal structural abnormality is found, we have the most sophisticated imaging technology including Fetal MR (magnetic resonance imaging) and 3D Ultrasound, to fully analyze the problem so you can be counseled appropriately.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL:

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Director of Maternal-Fetal Imaging

P: 914-391-0109

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OUR LOCATIONS

HVRA of Inter-County

955 Yonkers Ave, Room 14

Yonkers, NY 10704

P: 914-776-7700

Mid Rockland Imaging

18 Squadron Blvd

New City, NY 10956

P: 845-634-9729

HVRA of Westchester

115 Main St

Tuckahoe, NY 10707

P: 914-793-1234

New Paltz Imaging

3 Cherry Hill Rd, Ste 1

New Paltz, NY 12561

P: 845-255-9700

HVRA of Bronxdale

2016 Bronxdale Ave, Ste 102

Bronx, NY 10462

P: 718-960-9033

MATERNAL FETAL IMAGING SERVICES

UNIVERSAL FETAL
CARDIAC ULTRASOUND—
AT THE HEART OF
NEWBORN WELL-BEING

THE 18-22 WEEK CARDIOVASCULAR
GENETIC/LEVEL II OBSTETRICAL
ULTRASOUND EXAM

WHAT IS A “GENETIC” OBSTETRICAL ULTRASOUND EXAMINATION?

A Genetic obstetrical ultrasound study is one of several noninvasive tools by which a woman’s risk for structural malformations and certain chromosomal abnormalities (in particular Down Syndrome, also called Trisomy 21) is assessed. The other non-invasive methods are First Trimester Screening (please see our accompanying brochure), and the 18-22 week Cardiovascular Genetic/Level II Ultrasound examination. These methods assess one’s risk for Down syndrome but only an invasive procedure, either chorionic villous sampling (CVS, performed 10-13 weeks) or amniocentesis (usually performed 15-18 weeks) can definitively diagnose a chromosomal abnormality. These invasive procedures carry the small risk of miscarriage of a normal fetus: CVS, 1:100 (1%); amniocentesis, 1:200-1:400 (0.25%–0.5%).

WHAT PATIENTS CAN BENEFIT FROM GENETIC OBSTETRICAL ULTRASOUND?

Our 11-14 week First Trimester Screening and the 18-22 week Cardiovascular Genetic/Level II ultrasound studies we perform optimize noninvasive risk assessment for the three most common chromosomal abnormalities– Down Syndrome, trisomy 18 and trisomy 13 and optimize the detection of structural malformations.

It should be considered for all patients:

- Patients who are 35 years of age or older, who are uncertain as to amniocentesis and desire additional information other than age alone to help them make a decision.
- Patients less than 35 years of age who have had prior false-positive second trimester maternal serum screen results (abnormal “AFP” test indicating increased risk for Down Syndrome followed by either a normal amniocentesis or the birth of a normal baby.)
- Patients who desire to optimize noninvasive screening in conjunction with 11-14 week First Trimester Screen and 15-16 week maternal serum screen.
- Patients with abnormal maternal serum screen who are ambivalent or uninterested in amniocentesis.

Please Note: The American College of Obstetricians and Gynecologists standard of care is to offer amniocentesis for all patients who will be 35 years of age at term or older, or patients with a prior history of a chromosomal abnormality regardless of noninvasive screening test results.



WHAT MAKES THE 18–22 WEEK CARDIOVASCULAR GENETIC/LEVEL II ULTRASOUND PROGRAM WITH HUDSON VALLEY RADIOLOGY ASSOCIATES UNIQUE?

The 18-22 Week Cardiovascular Genetic Level II Ultrasound is a detailed maternal-fetal ultrasound study with advanced cardiovascular protocols that achieves a Down Syndrome risk detection rate (sensitivity) of at minimum 90%. When combined with normal first, modified sequential or second trimester quad screen, Down Syndrome risk detection may be as high as 99%.

WHAT MAKES THE MATERNAL FETAL IMAGING DIVISION OF HUDSON VALLEY RADIOLOGY UNIQUE?

- 1. Consultation** with board certified physicians who are subspecialty fellowship trained in high risk Maternal Fetal Imaging.
- 2. Accreditation:** We are the first providers of 11-14 week First Trimester Screening (accredited by The Fetal Medicine Foundation, London, England) and one of the few private practice maternal-fetal imaging programs who have achieved and maintained accreditation by the prestigious American Institute of Ultrasound in Medicine (AIUM).
- 3. Detailed protocols** to assess your fetus not only for structural malformations but for the most extensive list of genetic ultrasound “markers”: a partial list includes– middle bone of the pinky finger, widened space between first and second toes of the foot, ear and nasal bone length, and our unique assessment of cardiovascular Down Syndrome markers.

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