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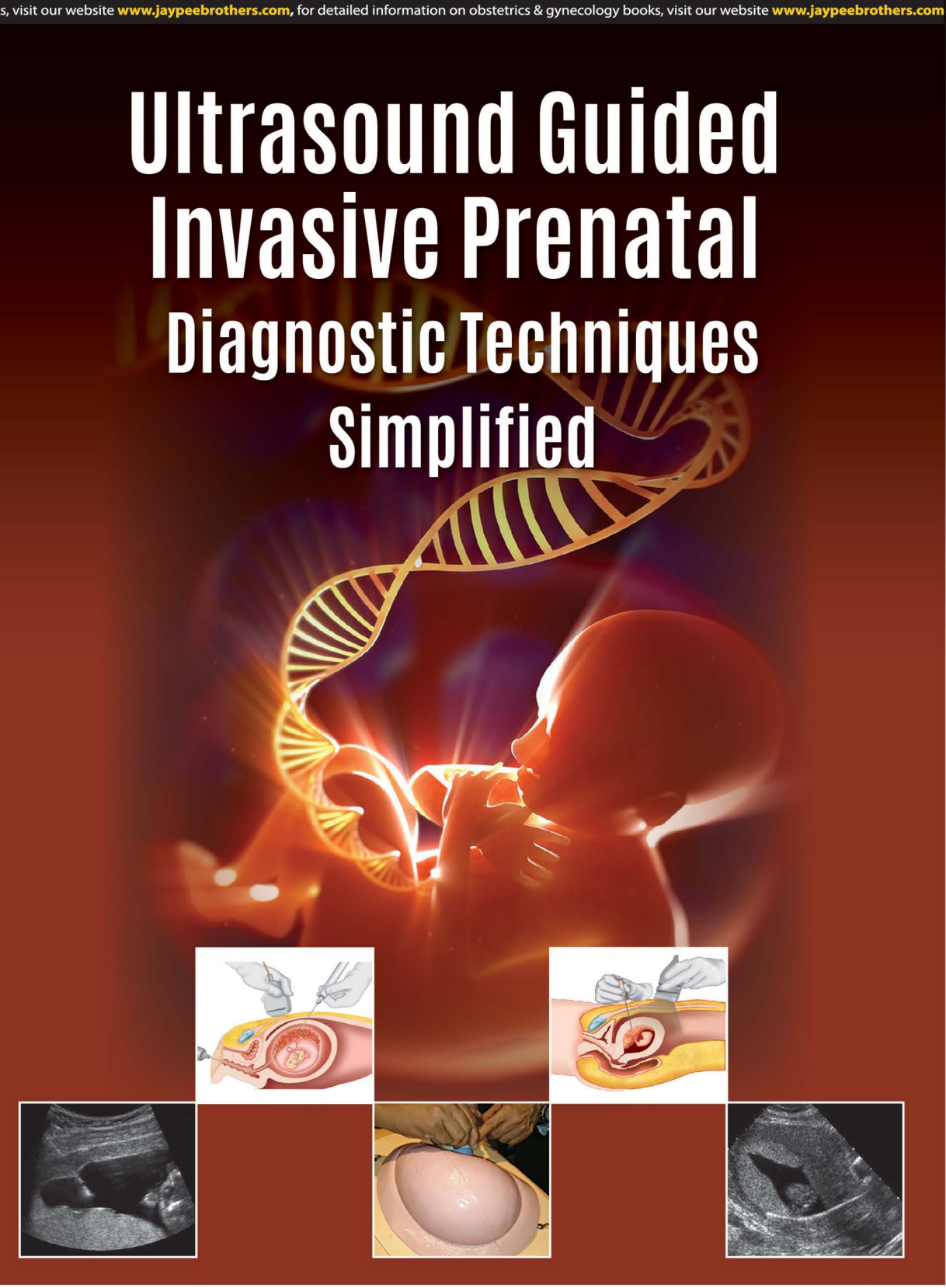
Ultrasound Guided Invasive Prenatal Diagnostic Techniques Simplified



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CHAPTER 4

Patient Counseling Prior to Interventional Prenatal Diagnostic Procedures

This chapter reviews the basic principles of genetic counseling relevant for patients considering undergoing prenatal diagnostic techniques.

Genetic counseling is a communication process which deals with the problem associated with the risk of occurrence of a genetic disorder. An appropriately trained person helps to:

1. Comprehend the medical facts, including the diagnosis and available management.
2. To educate how heredity contributes to the disorder, and the risk of recurrence in relatives.
3. Alternatives for dealing with the risk of recurrence.
4. Action which seems to them appropriate in view of their risk.
5. To make the best possible adjustment to the disorder and to the risk of recurrence.

COUNSELING PRIOR TO INVASIVE PRENATAL DIAGNOSTIC PROCEDURE

Invasive procedures performed during pregnancy differ from procedures performed in any other medical setting since there are two patients potentially at risk, the mother and the fetus. Although the physician's primary obligation is to the mother, he or she must, in pregnancies destined to continue, also do everything possible to safeguard the health of the fetus. There are some circumstances in which there are several alternative procedures available that could potentially accomplish the same reproductive goal with safety.

However, although the goal should be to adhere to a nondirective approach in providing genetic counseling, most experienced counselors are aware that a purely nondirective means may be difficult to achieve. A patient's decision can be significantly influenced in very subtle ways to help her to understand the gravity of situation and to make an informed consent.

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In counseling patients regarding the risks of invasive procedures, it is essential that a discussion of all known risks be accompanied by discussion of what is unknown. Although the emphasis so far in the discussion of counseling patients prior to invasive procedures has focused on risks, both known and unknown, there are many other important components to such counseling. These include a realistic appraisal of possible and likely benefits, accuracy of diagnostic tests to be utilized, and a discussion of alternatives. Also implication in testing verses no testing. The patient must be given the time and opportunity to carefully consider all of the issues related to any such decision before she can truly provide informed consent.

Prior to initiating a procedure during which there may be unanticipated or adverse findings, the physician should consider how this will be addressed with the patient. Although some discussion of the findings may be necessary during the course of the procedure, a detailed discussion is best conducted with the patient at eye level in a face-to-face encounter. In addition to considering the possibility of adverse findings, the physician should also be prepared for the occurrence of complications during invasive procedures and should give thought to how such occurrences will be communicated to the patient.

With regard to the choice between chorionic villous (CVS), and traditional midtrimester amniocentesis, the issue is somewhat more complex since, although the risks associated with CVS are somewhat more than those associated with amniocentesis, the diagnosis is achieved an average of 4–6 weeks earlier in pregnancy and termination in the first trimester is generally easier and has a benefit of privacy than in the second trimester.

Many factors, such as the patient's past pregnancy experiences and the perceived importance of procedure-induced fetal loss or fetal defects, among others, will influence the patient's decision.

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Ultrasound Guided
Invasive Prenatal Diagnostic Techniques
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Special Features

This book named Ultrasound Guided Invasive Prenatal Diagnostic Techniques Simplified is brought to you in the era of Genomic Medicine where there is an increased usage of Noninvasive Techniques for Prenatal Screening.

Nevertheless, Invasive Prenatal Diagnostic Techniques will always be required for Fetal Tissue Sampling and Prenatal Diagnosis.

This book includes the historical perspective, indications, pre-procedure counseling, evaluation, and the commonly used Invasive Techniques for Prenatal Diagnosis.

The emphasis in this book is on how to perform Ultrasound Guided Invasive Prenatal Diagnostic Techniques with safety and accuracy.



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