**Neural Tube Defect Screening - Maternal Serum AFP**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>95059</td>
<td>Maternal Serum AFP (MSAFP) (15.0 – 22.9 weeks gestation)</td>
</tr>
</tbody>
</table>

1 ml Red Top SST

- **Date of Birth:** / / 
- **Collection Date:** / / 
- **Maternal Weight:** lbs
- **Estimated Date of Delivery (EDD):** / / 

**ICD Codes** (enter all that apply)

<table>
<thead>
<tr>
<th>Code</th>
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</thead>
<tbody>
<tr>
<td>95.1</td>
<td>O28.1 Other:</td>
</tr>
<tr>
<td>95.2</td>
<td>O28.2 Other:</td>
</tr>
<tr>
<td>95.3</td>
<td>O28.3 Other:</td>
</tr>
<tr>
<td>95.4</td>
<td>O28.4 Other:</td>
</tr>
<tr>
<td>95.5</td>
<td>O28.5 Other:</td>
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<tr>
<td>95.6</td>
<td>O28.6 Other:</td>
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<tr>
<td>95.7</td>
<td>O28.7 Other:</td>
</tr>
<tr>
<td>95.8</td>
<td>O28.8 Other:</td>
</tr>
<tr>
<td>95.9</td>
<td>O28.9 Other:</td>
</tr>
</tbody>
</table>

**Informed Consent for Maternal Serum AFP**

1. Maternal Serum AFP (MSAFP) is offered to screen for open neural tube defects and may lead to the detection of 95% of fetuses with anencephaly and 65-80% of fetuses with open spina bifida.
2. Neural tube defects (such as spina bifida and anencephaly) occur when the spine and brain do not develop completely.
3. Some open neural tube defects and those covered with skin may not be detected. Most other birth defects and mental retardation are NOT detected by MSAFP screening.
4. Screen positive results may result in further testing, which may include amniocentesis or ultrasound.
5. If the fetus has a neural tube defect, such testing may include a repeat MSAFP test, ultrasound, or removal and testing of a small amount of amniotic fluid (amniocentesis).
6. Screen positive results may occur for reasons such as miscalculation of due date, twin pregnancy, vaginal bleeding, or the presence of other rare birth defects. Sometimes the results are screen positive for no apparent reason.
7. At the request of the provider, screen positive results will be given to a diagnostic center for follow-up. I certify that I have read the above consent and understand its content, including the BENEFITS and LIMITATIONS of Maternal Serum AFP Screening. I have discussed the test with my physician.

**Personal and Family History**

- **Prior pregnancy with trisomy:**
  - O99.291 Supervision of pregnancy with other poor reproductive or obstetric history, 1st tri
  - O99.292 Supervision of pregnancy with other poor reproductive or obstetric history, 2nd tri
  - O99.293 Supervision of pregnancy with other poor reproductive or obstetric history, 3rd tri
  - O99.299 Supervision of pregnancy with other poor reproductive or obstetric history, unspecified

**Abnormal (MSS) serum biochemical screening:**

- O28.1 Other: |
- O28.3 Other: |

**Abnormal Ultrasound finding:**

**Other ICD10 code(s):**

- Q05.8
- Q05.1

**Other Relevant Clinical Information:**

- Patient is at high risk for Down syndrome
- History of neural tube defect
- History of neural tube defect if yes, explain:
- Other relevant information:

**Medical Limited Coverage Tests**

- B = Has both diagnosis and frequency-related coverage limitations.
- F = Has prescribed frequency rules for coverage.
- O = May not be covered for the reported diagnosis.

**Neonatal Screening**

**Kit Code:**

- QNata with advanced maternal age:
- QNata with advanced maternal age:

**Medicare ABN required for tests with these symbols**

- @ = May be not covered for the reported diagnosis.
- & = Has prescribed frequency rules for coverage.
- O = May not be covered for the reported diagnosis.

**ICD Diagnosis Codes are Mandatory.**

**Patient ID:**

**Office:**

**Relationship to Insured:**

**Primary Insurance Co. Name:**

**Member/Insured ID No.:**

**Group #:**

**Primary Insurance:**

**Related Insurance:**

**Other Relevant Clinical Information:**

**Call 866-GENE-INFO with any questions**

**Many payers including Medicare and Medicaid** have medical necessity requirements. You should only order those tests which are medically necessary for the diagnosis and treatment of the patient.