



AMNIOCENTESIS PATIENT INFORMATION

What is amniocentesis?

Amniocentesis is usually performed between 15 and 20 weeks of pregnancy. Performing this test earlier than 15 weeks increases the risk of complications.

Amniocentesis is performed by inserting a thin needle under ultrasound guidance through the woman's abdomen and uterus. A small sample of amniotic fluid (which contains cells from the baby) is withdrawn and sent to a lab. The cells are then grown in a culture for about 10-12 days.

Preliminary results on the number of chromosomes 13, 18, 21, and sex chromosomes can be available in 24-48 hours – this is called FISH analysis. Testing for other specific inherited disorders can also be done if requested. The level of alpha-fetoprotein (AFP) in the amniotic fluid can also be measured and may be helpful in determining if the baby has a neural tube defect.

How should I prepare for amniocentesis?

No special preparation is necessary.

What should I expect after amniocentesis?

Most women have no symptoms, however, you may have some mild cramping similar to menstrual cramps. These cramps may last for several hours, but not usually longer than 24 hours.

Are there any restrictions after amniocentesis?

You should avoid strenuous activity for approximately 24 hours after the procedure. This would include such activities as heavy lifting (over 20 lbs), jogging and aerobics.

When should I seek medical attention after amniocentesis?

Call your obstetrical caregiver and notify us if you have:

- Spotting or bleeding
- Leakage of clear fluid (like water) from the vagina
- Severe abdominal pain
- Fever higher than 100.4°F or 38.0°C
- “Flu-like” symptoms such as chills, muscle aches, or extreme weakness that occur within the first week after the procedure
- If you feel you have an emergency on nights or weekends, please contact your obstetrical caregiver or proceed to the nearest hospital for evaluation