Society for Maternal•Fetal Medicine

High-risk pregnancy experts

The Society for Maternal-Fetal Medicine recommends the following steps for people planning **in vitro fertilization (IVF)** or who have become pregnant with IVF. An important part of pre-IVF pregnancy planning is genetic counseling, in which you learn about your risks for genetic disorders and options for genetic testing. During the pregnancy, tests and exams are recommended to help find problems early.

Because everyone is different, you should discuss these steps with your healthcare provider. Not everyone needs all the tests and exams listed here. In some cases, depending on your health and how you achieve your pregnancy, other tests may be recommended.

Before undergoing IVF, discuss with your doctor:

- ❑ Any health issues you have, including high blood pressure or diabetes
- ❑ Any medications you are taking and whether they are safe for pregnancy
- ❑ Genetic counseling to discuss:
  - Tests for **genetic disorders** in those who are providing the eggs and sperm (which may be you, your partner, or donors)
  - Benefits and risks of **preimplantation genetic testing** (before pregnancy)

In the first trimester of pregnancy (before 14 weeks), discuss these questions with your prenatal care provider:

- ❑ Should you take low-dose aspirin to prevent **preeclampsia?**
- ❑ What are the options for **screening tests** or **diagnostic tests** for **chromosome disorders?**
- ❑ If you have a **multifetal pregnancy,** discuss the benefits and risks of **multifetal pregnancy reduction.**

In the second trimester of pregnancy (usually around 20 weeks):

- ❑ Have a **detailed ultrasound** exam (to look for birth defects and **placenta** problems)
- ❑ Have a **fetal echocardiogram** (heart ultrasound to look for heart defects)

In the third trimester of pregnancy (28 weeks and beyond) discuss with your prenatal care provider:

- ❑ Ultrasound to check fetal growth
- ❑ Testing every week to check on fetal well-being, starting at 36 weeks or earlier
- ❑ The best timing and method for birth

Glossary of Terms

Chromosome Disorder: A disorder caused by an abnormal number of chromosomes, the structures within cells that carry genes. Every normal human cell (except for eggs and sperm) has 46 chromosomes.
Diagnostic Test: A test that determines whether a disease or other problem is present with a high degree of accuracy.
Fetal Echocardiogram: An ultrasound exam that checks the structure and function of the fetal heart.
Genetic Disorder: Any disorder caused by a genetic change, an abnormal number or structure of chromosomes, or a combination of genetic and other factors.
In Vitro Fertilization (VF): A procedure in which the egg and sperm are combined in a laboratory. The resulting embryo is transferred to the uterus a few days later or frozen for future transfer.
Multifetal Pregnancy: Pregnancy with more than one fetus, such as twins, triplets, or more.
Multifetal Pregnancy Reduction: A procedure that reduces the number of fetuses in a multifetal pregnancy to decrease the risk of pregnancy complications.
Placenta: A fetal organ that attaches to the uterus to allow transfer of nutrients, antibodies, and oxygen to the fetus from the pregnant person. It also makes hormones that sustain the pregnancy.
Preeclampsia: A disorder that can occur during pregnancy in which the blood pressure goes too high. It can damage many organs in the body, including the kidneys, brain, and liver.
Preimplantation Genetic Testing: Lab testing that looks for genetic disorders in embryos created through IVF before they are inserted into the uterus.
Screening Test: A test that assesses the chance that a disorder or other problem is present in a person with no signs or symptoms of the disorder.
Ultrasound: Use of sound waves to create images of internal organs or the fetus during pregnancy.