



The National Maternity Hospital
Vita Gloriosa Vita ~ Life Glorious Life

THE NATIONAL MATERNITY HOSPITAL



THE ANATOMY SCAN

20 - 22 weeks

INFORMATION LEAFLET

CONGRATULATIONS

Congratulations and welcome to the Fetal Assessment Unit. We offer all pregnant women an ultrasound scan at approximately 20-22 weeks. This leaflet aims to explain the benefits and the limitations of this routine anatomy scan. If you have any questions, please do not hesitate to ask us.

THE SCAN

Ultrasound is performed using high frequency sound waves that bounce off the body structures to form a picture of your baby. By 20 weeks, your womb is normally big enough that the scan can be done without a full bladder. The scan is safe and painless but the sonographer might need to apply slight pressure to get clear views of your baby. The appointment usually takes between 15-30 minutes. You may find the sonographer is quiet during the scan; it is important for them to be able to concentrate on this detailed examination.

WHAT WILL HAPPEN

- You will be asked to lie on a couch.
- You will be asked to raise your top to your chest and lower your skirt/trousers to your hips.
- Tissue paper will be tucked into your clothes to protect them from the ultrasound gel. The gel is put on your tummy and may be cold.
- The sonographer will move a hand-held device, called a probe, over your tummy to carefully examine your baby's body. The gel makes sure there is good contact between the probe and your skin.

PURPOSE OF THE ANATOMY SCAN

This scan at 20-22 weeks is a screening test to check the anatomy of your baby. The size of the baby's head, tummy and thigh bone are measured. The internal organs including the brain, heart, stomach, kidneys and bladder are examined. We also try to image the baby's spine, limbs and face. The placenta (afterbirth) and the amniotic fluid ('waters') are examined.

WHAT AFFECTS THE QUALITY OF THE SCAN

Sometimes, because of the position of the baby and/or due to conditions like fibroids or increased weight in the mother, we may not achieve the best image. We occasionally recommend an internal (vaginal) scan depending on the issues in a particular pregnancy. A mother's weight has a major influence on the ability to see the baby, as the sound waves don't penetrate as well, giving less clear images. Many studies have shown less accuracy in identifying problems in mothers with higher weight.

POSSIBLE RESULTS OF THE ANATOMY SCAN

In 15% of cases, we need to repeat the scan to get a better view of a particular part of the baby. This does not mean that there is something wrong but a repeat scan will be booked for you to complete the examination.

The vast majority of pregnancies are normal and most scans show that the baby appears to be developing as expected. You will be told if something unexpected is found during your scan. Should there be a concern on your scan, we will arrange a timely review with a fetal medicine specialist.

It is important to note that scans cannot diagnose or detect all conditions. There is always a chance that a baby may be born with a condition that could not be seen on scan.

CONDITIONS WE SCREEN FOR AND DETECTION RATE WE EXPECT TO IDENTIFY BEFORE THE BIRTH OF A BABY

| Condition | Explanation | Chance of being seen |
|--------------------------------|---|----------------------|
| Open Spina Bifida | Lesion in the spinal cord | 90% |
| Anencephaly | Absence of the top of the head | 99% |
| Hydrocephalus | Excess fluid in the brain | 60% |
| Major congenital heart disease | Heart defects that are likely to need surgery soon after birth | 60% |
| Diaphragmatic Hernia | A defect in the muscle that separates the chest and the abdomen | 60% |
| Exomphalos/ Gastroschisis | Defects of the abdominal wall | 90% |
| Major kidney problems | Missing or very abnormal kidneys | 75% |
| Major limb abnormalities | Missing bones or very short limbs | 15% |
| Cleft Lip | A separation in the upper lip | 75% |
| Cerebral Palsy | | Cannot be seen |
| Autism | | Cannot be seen |
| Down Syndrome | This condition may be suspected on ultrasound but diagnosis is confirmed by genetic tests. About 40% of cases will be known before birth. | |

LIMITATIONS OF THE SCAN

2-3% of babies are born with a birth defect. The scan can detect some but not all of these defects. Many conditions like autism and cerebral palsy cannot be detected by ultrasound. Down Syndrome may be associated with heart and bowel problems but many cases of Down Syndrome present for the first time late in pregnancy or after birth.

Overall the anatomy scan detects two thirds of problems in the baby and does not detect one third.

FREQUENTLY ASKED QUESTIONS

Can I find out if I am having a girl or a boy?

The fetal sex is often seen on the scan but it is not always possible to tell for sure. The baby may be lying in a position where the genital area is not visible. We do not offer repeat scans for the sole purpose of identifying the gender of the baby.

Can I have a picture of my baby?

Yes of course, but this depends on the baby being in the right position to get a good picture! We try our best to give you good pictures to take home as mementos of your scan.

Can I record the scan?

Mobile phones or other recording devices are not usually permitted. Recording devices can divert the sonographer's attention when they most need to concentrate. We very much appreciate your understanding and cooperation.

FOR FURTHER INFORMATION OR ADVICE, PLEASE CONTACT US AT

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