

INFORMED CONSENT FOR EXPANDED NON-INVASIVE TRISOMY TESTING (B-NIPTdel)

With my signature at the end of this declaration I confirm that I have received, read and understood the written explanation of non-invasive prenatal testing. I give my consent and consent on behalf of my unborn child for expanded NIPT test, and I have been explained the meaning of following facts:

- 1. NIPT test is a screening test, and it is not intended to be used as a diagnostic test. There is always a small risk for false positive and false negative result. Abnormal NIPT results should be confirmed by direct fetal testing (chorionic villus sampling or amniocentesis). Also, fetal gender is a prediction.
- 2. I have received appropriate explanations by my healthcare provider with regard to the NIPT, the genetic basis, the purpose, scope, type and significance of the results. All my questions have been answered and I have had the necessary consideration time.
- 3. I have been informed about the limitations of test, and explained that a negative result does not eliminate the possibility that the fetus may have other genetic conditions or birth defects that are not detected by NIPT test.
- 4. There is a small risk that the test results might not reflect the chromosomes of the fetus but instead might reflect chromosomal changes in the mother (incidental finding).
- 5. I am aware that my sample will be analyzed at the Genomics Laboratory of Turku University Hospital (TYKS). Laboratory may use generated data and the remaining samples anonymously for the purpose of internal research, improvement, development and validation of further NIPT testing according to ethical guidelines of the Hospital District of Southwest Finland. At any time disposal of the sample and the results can be asked from the laboratory by written request.
- 6. I am aware that results of the NIPT testing may be presented anonymously in the scientific publications and/or congresses. Personal identification data will never be published.

Examinee:	Personal identification number/date of birth:
Date:	Signature: