

NHS Fetal Anomaly Screening Programme

'Soft marker' screening policy/statement

At the 18⁺⁰ – 21⁺⁶ weeks' fetal anomaly screening scan, the following appearances **should be reported and referred for further management**:

1. Nuchal oedema (greater than 6mm)
2. Ventriculomegaly (atrium 10 mm or above)
3. Echogenic bowel (equivalent to bone density)⁹⁸
4. Renal pelvic dilatation (greater than 7 mm AP)
5. Small measurements compared to the dating scan (less than the 3rd centile)¹
6. Facial clefting

Examples of findings previously classified as 'markers' in the RCOG (2000) '*Routine Ultrasound Screening in Pregnancy: Protocol, Standards and Training*' document which **should not be recorded or referred for further management** (whether single or multiple, in a screened or unscreened woman) as these are considered 'normal variants'. These include:

1. Choroid plexus cyst(s)
2. Head shape²
3. Cysterna magna³
4. Echogenic foci
5. 2 vessel cord

Karyotyping should be discussed with women over the age of 37 years old when they have missed the option of Down's syndrome screening because of booking late in pregnancy.

¹ Chitty chart

² Unless a skull abnormality is suspected

³ Unless a brain malformation is suspected