In the coming months, the California Prenatal Screening Program will be moving from calculating gestational age using the Hadlock formula to using the Pexsters formula. Pexsters et al. studied a larger population than Hadlock et al., and they used both transvaginal and transabdominal ultrasound equipment compared to using just transvaginal equipment. There are only slight differences between the two formulas, but the new Pexsters formula will provide us with the most accurate estimation of gestational age.

We know that this may be a big transition for our NT practitioners, so we want to give you ample time to prepare. Your input will be very valuable as we plan out our timeline for moving to the new formula. We would appreciate if you could email responses to Jamie.Matteson@cdph.ca.gov by March 18, 2016.

1. Can you program your ultrasound machine with the new Pexsters formula yourself, or will you need to bring in a technician?

2. How long will it take for your office to start providing gestational ages calculated with Pexsters?

3. Are there other challenges that you anticipate when changing to the new Pexsters formula?


Hadlock FP, Shah YP, Kanon DJ, Lindsey JV. Fetal crown-rump length: reevaluation of relation to menstrual age (5-18 weeks) with high-resolution real-time US. Radiology. 1992 Feb;182(2):501-5

Trisomy 18 Cutoff Changes

On January 26, 2016, the California Prenatal Screening Program changed the trisomy 18 cut-off for first trimester specimens from 1 in 50 to 1 in 150. This change is expected to increase the detection of trisomy 18 by almost 10%, while only increasing the screen positive rate by 0.2%. The trisomy 21 cut-off and the trisomy 18 cut-off for second trimester specimens remain unchanged. Mailers and instant risk assessment printouts are already reflecting the new trisomy 18 cut-off. The NT Practitioner Manual and other reference materials online have also been updated accordingly.