

When NIPT Goes Silent

Physician one-pager | OpenMFM clinician summary | Chukwuma I. Onyeije, MD

This featured OpenMFM deck covers the operational and emotional cost of no-call NIPT results. The key clinical move is not reassurance. It is disciplined recovery of a decision pathway.

Core message

The high-friction clinical event is often the unclear result: low fetal fraction, atypical language, or specimen may be mosaic. A reportable result matters because it restores a clearer counseling and diagnostic pathway.

What to say in clinic

- cfDNA is screening, not diagnosis.
- cfDNA largely reflects placental DNA in maternal blood.
- No-call is not the same as screen-negative.
- Discordant or mosaic results require source-of-signal analysis.
- Diagnostic testing is needed when a definitive fetal answer will change management.

Low fetal fraction / no-call pathway

- Confirm gestational age, BMI, and sample details.
- Review or obtain ultrasound findings.
- Offer repeat screening only in selected settings.
- Escalate to genetics and diagnostic testing when ultrasound is abnormal, risk is high, or repeat failure occurs.

How to frame platform comparison safely

- Say workflow fit, not universal superiority.
- Say a discrete result can clarify next steps.
- Use published data, not sales language.
- Do not imply that broader screening removes the need for diagnostic confirmation.

Cases that should slow you down

- Atypical result with normal ultrasound
- Specimen may be mosaic
- Positive screen with normal amnio
- Vanishing twin or multifetal gestation
- Genome-wide or multiple abnormality pattern

Three lines worth keeping

"No-call is a clinical incident, not a neutral event."

"The value of a reportable result is often the recovery of a decision pathway."

"Diagnostic testing assigns fetal truth."

Guideline anchors: cfDNA is supported for common aneuploidy screening; positive and no-call results require counseling and diagnostic discussion; single-gene cfDNA screening is not currently recommended by ACOG.