



Updated Criteria for Publicly Funded NIPT for Aneuploidy

Prenatal Screening Ontario (PSO) is pleased to share **important updates to the eligibility criteria for publicly funded Non-invasive Prenatal Testing (NIPT) for aneuploidy**, effective March 30, 2026. Please review the summary below to make relevant practice changes at your centres.

Key Takeaways

- Updated eligibility for IVF pregnancies based on oocyte age
- Clearer guidance on referral to Genetics/MFM following an increased nuchal translucency (NT) measurement

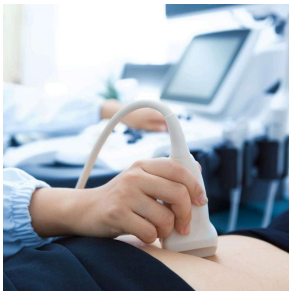
- Refinement of soft marker clinical criteria

Category I Criteria Changes



IVF pregnancies - oocyte age

- Oocytes aged **39 years and over at retrieval** are now eligible for publicly funded NIPT (previously 39 years, 3 months and over)
- For non-IVF singleton pregnancies, age criterion remains **40 years or older at EDD**
* *All twin pregnancies are eligible for publicly funded NIPT.*

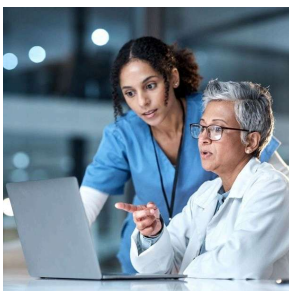


Increased nuchal translucency (NT \geq 3.5 mm)*

- Remains a Category I criterion
- Prompt referral to Genetics and/or MFM is now highlighted as a recommendation **regardless of NIPT order or result**

"An NT \geq 3.5 mm is not only associated with an increased risk of aneuploidy, but also with genetic conditions and fetal congenital anomalies not detected by NIPT. Prompt referral to a Genetics/MFM specialist is indicated to discuss the implications of an increased NT and explore all screening and diagnostic testing options. You do not need to order NIPT or wait for the result to initiate this referral."

Category II Criteria Changes



Refinement of soft markers (Require referral to Genetics/MFM centre)

Eligible for publicly funded NIPT:

- Isolated hypoplastic/absent nasal bone or
- Isolated increased nuchal fold (\geq 6 mm)

Eligible for publicly funded NIPT (any two of the following):*

- | | |
|--|---|
| <input type="checkbox"/> Aberrant right subclavian artery | <input type="checkbox"/> Pyelectasis |
| <input type="checkbox"/> Clinodactyly | <input type="checkbox"/> Short femur |
| <input type="checkbox"/> Hyperechogenic bowel | <input type="checkbox"/> Short humerus |
| <input type="checkbox"/> Intracardiac echogenic focus/foci | <input type="checkbox"/> Ventriculomegaly |

- In isolation, these markers do not qualify for funded NIPT.

**Regardless of pregnant individual's a priori chance for having a pregnancy with trisomy 21 or MMS result.*

Removed from soft marker list:

- Choroid plexus cysts are no longer an indication for publicly funded NIPT.

Implications for your practice

If hypoplastic/absent nasal bone or increased nuchal fold (≥ 6 mm)
--> offer referral to Genetics/MFM clinic for a discussion about further testing options, including publicly funded NIPT.

If other types of soft markers are seen --> consult with Genetics/MFM clinic. PSO acknowledges that some soft markers may be associated with conditions unrelated to common aneuploidies. Health-care providers are encouraged to consult their local genetics or MFM centre for specific referral criteria and management recommendations even if the pregnant individual does not appear to be eligible for publicly funded NIPT.



Rationale for Changes

These updates align with:

- Expert consensus from PSO's Genetics Working Group
- SOGC guidelines

- Current literature on the impact of soft markers on the chance for chromosome differences



Next Steps

- Updated requisitions are available on our website at www.prenatalscreeningontario.ca/for-practitioners-how-to-order/requisitions/

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Questions or Feedback?

We welcome your questions and feedback as we work to support a smooth transition and minimize impact on patient care. You can contact our genetic counsellors by phone or email at psobornontario.ca.

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