Pregnancy Test	
Description	Measurement of βhCG (human chorionic gonadotrophin) in urine.
Indication	Suspected pregnancy or to rule-out pregnancy before commencing teratogenic treatment. This test DOES NOT diagnose ectopic or molar pregnancy – use serial serum hCG levels for this.
Additional Info	hCG consists of two subunits – α and β . The α -subunit is very similar to the α -subunits of LH, FSH and TSH, whereas the β -subunit is specific to hCG. hCG is produced by the placenta shortly after fertilisation and maintains the corpus luteum, allowing pregnancy to continue. In normal pregnancy hCG may be detected in the urine 7-10 days after conception and the concentration should double ~every 48hrs up to 8-10 weeks.
Concurrent Tests	N/A
Dietary Requirements	N/A
Interpretation	This test is qualitative with results reported as positive, negative or borderline: A Positive result is given when the hCG is ≥ 25 IU/L A Negative result is given when the hCG is ≤ 5 IU/L A Borderline result is given when the hCG is between 5 − 25 IU/L. Borderline results are indeterminate and the test should be repeated in 48 hrs. False negative results may be seen in old samples due to sample degradation, very early pregnancy or in some patients on antibody therapies. False positive/borderline results may be seen after undetected early spontaneous abortion, post delivery/miscarriage, post hCG injections or fertility drugs, post blood transfusion, in some malignancies (e.g. ovarian tumour/molar pregnancy) and in patients with interfering antibodies. Also some non-pregnant women have persistent low levels of hCG which can give a positive result. If the result does not fit the clinical picture send a repeat sample in 48-72 hrs or send a serum sample for a quantitative βhCG.
Collection Conditions	A first morning urine sample is recommended as this contains the highest concentration of βhCG.
Frequency of testing	As required.

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