

Results

After the test, you will be told the results. A written report is also sent to your doctor and midwife.

You should discuss these results with the person who referred you. This is because other tests or clinical information can change how they are interpreted, and this might only be clear to the person looking after your pregnancy.

What if I have questions?

Ask and we will try to answer them. Sometimes it may be difficult during the study when the operator may need to concentrate on obtaining all the information necessary, but discussion of results will take place at the end of the examination.

Contact Details

If you have any additional questions later, contact:
The Ultrasound Department
(09) 3074949 ext: 25400

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Te Whatu Ora
Health New Zealand

What is a Fetal
Echocardiogram?

What is a fetal echocardiogram?

A fetal echocardiogram is a detailed ultrasound scan of the baby's heart. We do this while your baby is in your womb.

Are there any risks?

No. Ultrasound uses sound waves to take pictures of the heart. There is no radiation exposure and no known risk with this type of test.

When is it done?

A fetal echocardiogram may be done any time, but usually around the 20th week of pregnancy. Before this time, the baby's heart chambers are too small to take clear pictures.

How is the scan performed?

The test is done using the same equipment as other ultrasounds used in pregnancy. It is performed in a private room while you are lying on a bed. The lighting will be dimmed.

It is painless and takes approximately 45 minutes and may be done at the same time as your anatomy scan. The sonographer will put some gel over your abdomen and will move the ultrasound scan head over the abdomen to take many different pictures of the baby's heart.

It is fine for a family member to stay in the room during the test however it is preferable not to bring small children to the examination.

What information can be gained from a fetal echocardiogram?

From about 18 weeks, we can potentially see the main heart chambers, heart valves and main blood vessels directly attaching to the heart, and get information about the heart rate and rhythm. We can use the fetal echocardiogram to detect the presence of most congenital abnormalities of the heart.

Limitations of the scan

Sometimes, it's not possible to see all the heart structures. This might be because of your body shape or the position or size of the baby. This does not mean they are not there, but may mean that for technical reasons, we can't see them. Sometimes this information may not be important, but in some cases it means that we can't give a definite answer. The doctor will talk with you about this if needed.

Some fetal heart defects can be very hard or not possible to see before a baby is born. We don't mention this to concern you, but rather that you understand that there are technical limitations to such studies.

After birth, the heart and circulation change to adapt to life outside the womb. Occasionally a heart defect is only able to be detected after these changes have happened. For these reasons, even if the heart ultrasound is normal, your baby should still have the usual postnatal baby checks carried out by your midwife, paediatrician or obstetric caregiver.

Some conditions develop as the pregnancy progresses and may not be visible at the time of the 18 - 20 week scan. Occasionally a second heart scan in the third trimester is needed if there is a risk that this may occur.