**Omega-3 FAQs from Health Professionals**

1. How do I get the latest SA Pathology SAMSAS (SA Maternal Serum Antenatal Screening) request form that includes the omega-3 testing for antenatal screening?
2. A digital referral template of the updated SAMSAS request form is integrated into the latest practice software update for Best Practice and Medical Director users. Guidance on where to find the template is available for Best Practice users [here](https://sahmri.blob.core.windows.net/communications/Guidance%20digital%20template%20Best%20Practice.pdf); and for Medical Director users [here](https://sahmri.blob.core.windows.net/communications/Guidance%20digital%20template%20Medical%20Director.pdf).

If you prefer hard copy SAMSAS request forms, please call the SAMSAS Program on (08) 8161 7285 to order them, or the digital request form can be downloaded [here](https://www.sapathology.sa.gov.au/wps/wcm/connect/SA+Pathology+Internet+Content+New/Content/Clinicians/Maternal+and+Genetic+Carrier+Screening/).

Q. Can I write omega-3 test on the previous version of the SAMSAS request form?

A. Yes, “omega-3 to SAMSAS” can be written on previous version SAMSAS request forms. It is important that “omega-3 to SAMSAS” is written so that the omega-3 test is performed through SAMSAS at no cost to the woman or clinic.

Q. How early in pregnancy can an omega-3 status test be done?

A. Omega-3 testing can be done at any gestation up until 20 weeks.

Q. If a woman has an omega-3 test early in pregnancy but her next follow up appointment does not occur until around 20 weeks, is it appropriate to wait until then to discuss the result and the action needed?

A. Yes. Even for women who have low omega-3 status, the data from the clinical trials indicate that starting supplementation around 20 weeks gestation is more than adequate. This may also help overcome any issues with supplement taking and morning sickness.

Q. What supplements can women take if they have low omega-3 status (Less than 3.7% of total fatty acids)?

1. The suggested dose: 800 mg DHA and 100 mg EPA per day until 37 weeks, we have a list of supplements meeting these requirements available [here](https://sahmri.blob.core.windows.net/communications/Studies/Omega-3/common-pregnancy-supplement-advice_ziSvJXB.pdf)**.**

Q. What supplements can women take if they have sufficient omega-3 status (above 4.3% of total fatty acids) and wish to continue taking a multivitamin?

1. Women with sufficient status do not require omega-3 supplements. These women are already at lower risk of early preterm birth and supplementation provides no reduction to this risk. If women are already taking omega-3 fatty acids as part of a multivitamin and wish to continue, the dose of DHA+EPA should not exceed 250 mg per day. We have an list of common pregnancy supplements that do not contain omega-3 fatty acids, available here; and a list of common pregnancy supplements with up to 250 mg DHA&EPA omega-3 fatty acids, available [here](https://sahmri.blob.core.windows.net/communications/Studies/Omega-3/common-pregnancy-supplement-advice_ziSvJXB.pdf)**.**
2. Can an omega-3 status test be added to a stored SAMSAS sample if not ordered at the time of other SAMSAS tests?
3. Yes, it may be possible to add the omega-3 status test if it was not initially ordered on the SAMSAS request form by calling the SAMSAS program on (08) 8161 7285 before the women is 20 weeks of gestation.
4. Does my patient need to attend a SA Pathology collection site to have a blood sample collected for an omega-3 test?
5. No, any pathology collection centre can collect the blood sample for the omega-3 test. Any private laboratory collection centre will be reimbursed with a collection fee by SA Pathology as usual process.