Glossary

**Amniocentesis**: Transabdominal puncture of the amniotic sac, using a needle and syringe, in order to remove amniotic fluid. The fluid may then be studied to detect fetomaternal blood incompatibility.

**Amniotic fluid**: The fluid contained within the amniotic sac that surrounds the fetus.

**Anemia**: A condition in which there is a reduced number of red blood cells, often resulting in decreased oxygen delivery to the tissues; may result from increased destruction of red cells.

**Bilirubin**: The orange-yellow pigment in bile carried to the liver by the blood; produced from the breakdown of hemoglobin from red blood cells.

**Cordocentesis or Percutaneous Umbilical Sampling (PUBS)**: Using high-resolution ultrasound with color Doppler enhancement of blood flow, the umbilical vein is visualized at the level of the cord insertion into the placenta. A needle is inserted into the umbilical vessel and a fetal blood specimen is obtained.

**Erythroblastosis fetalis**: Accelerated red cell destruction in the fetus stimulates increased production of red cells, many of which enter the circulation prematurely as nucleated cells.

**Graft-versus-host (GVH) disease**: A disorder in which the grafted tissue attacks the host tissue.

**Hemolytic disease of the fetus/newborn (HDFN)**: In its most severe form, a disease characterized by anemia, jaundice, enlargement of the liver and spleen, and generalized edema (hydrops fetalis) that is caused by maternal IgG antibodies crossing the placenta and attacking fetal red cells when there is a fetomaternal blood group incompatibility. Synonym is erythroblastosis fetalis.

**Hydrops fetalis**: Gross edema of the entire body, associated with severe anemia, occurring in erythroblastosis fetalis.

**Intrauterine transfusion (IUT)**: Transfusion of blood into a fetus in utero.

**Perinatal**: Pertaining to or occurring in the period shortly before and after birth; variously defined as beginning with completion of the twentieth or twenty-eighth week of gestation and ending 7 to 28 days after birth.

**PUBS**: See cordocentesis.

**Titer**: A measure of the strength of an antibody by testing its reactivity at increasing dilutions against the appropriate antigen. The reciprocal of the highest dilution that shows 1+ macroscopic agglutination is the titer.

**Titer score**: The observed strength of agglutination can be assigned a number and the sum of these numbers for all tubes in a titration study represents the score. This score represents a semi-quantitative measurement of antibody reactivity.