Objective
Amniocentesis and chorionic villus sampling are a part of invasive prenatal testing and related with several risks, the main one being the risk of miscarriage. Pregnant women's knowledge about the risks and the procedures, should be ensured before the procedure, as it is linked with anxiety and stress. Well-informed decision making and better information provision are necessary before undergoing invasive prenatal testing. The main aim was to focus on the knowledge, information and concerns of pregnant women related to the invasive prenatal testing before undertaking the procedure and to analyse the ranking of the procedure related information provision.

Methods
The research included women with singleton pregnancy undertaking amniocentesis and chorionic villus sampling. Out of 200 pregnant women invited to cooperate, 166 agreed to participate. They completed questionnaire in two parts, first part before the procedure and second part immediately after. They were asked what the risk of miscarriage related to the procedure is and to rate the quality of information provided in written form and given to them by medical personnel.

Results
The majority of women correctly believed that the risk of miscarriage after amniocentesis and chorionic villus sampling was ≤ 1% (89.3% and 69.4%, respectively). The invasive prenatal testing information, provided in written form, with the procedural description and the explanation of related risks, including miscarriage, was ranked as excellent by 60% of women. On the contrary, the quality of procedure information provided by medical personnel differed: 9.6% of women thought the information by their personal gynaecologist to be insufficient, while 8.4% believed they were insufficiently informed about the procedure risks. Furthermore, the information provided by the gynaecologist, performing the prenatal test, was estimated as insufficient by 4.8% of women, and only 36.7% of them reported to be perfectly informed about the procedure related risks.

Conclusion
An adequate pregnant women's knowledge about the procedure and the related risk should be ensured before undertaking prenatal testing. In the future, a suitable prenatal gynaecologic counselling should be established. Information provided by medical personnel should be more comprehensive, highlighting the procedure related risks.