

# Today's Women's Health Specialists

Imaging Department

¾ Accredited by the American Institute of Ultrasound in Medicine ¾

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(480) 786-1266

## 3D / 4D

### Client Understanding Form

I understand that:

Today's Women's Health Specialists (TWHS) provides the live 3D/4D ultrasound scanning service. The images that TWHS creates are not intended to aid in the diagnosis of any suspicious or pre-existing condition. This is because TWHS uses a "keepsake protocol" for collecting images of the baby's surface for me to enjoy, unavailable until the advent of 3D ultrasound, rather than a "diagnostic protocol" used by physicians, which focuses on internal anatomy. TWHS recommends that all patients have a diagnostic ultrasound exam prior to 3D. A limited report will be provided to your physician.

The quality of the 3D images will vary from good to breathtaking. The variation will be due to the positioning of the baby, for the most part, how the mother's placenta and uterus lie, the amount of amniotic fluid present (more is better) and the mother's echogenicity. TWHS will attempt to collect several memorable images of the face, the hands, the legs, the feet and, if selected, the genitalia in 2D and 3D. TWHS will endeavor for up to 30 minutes to create the best possible images of the baby. Sometimes, due to the positioning of the baby, head down, facing mother's spine, low in the pelvis, not moving much, hands covering face, feet covering face), it may not be possible to achieve, and TWHS cannot guarantee, a clear image of the face. If absolutely necessary, we will reschedule your exam to obtain clearer pictures.

I have already had a diagnostic level I ultrasound at (Facility): \_\_\_\_\_, performed on (Date): \_\_\_\_\_. In the unlikely event that an anomaly is later found, either before or after childbirth, I agree to release TWHS of any and all liability of any type. Although there are no confirmed biological effects on patients caused by exposures from present diagnostic ultrasound instruments, the possibility exists that such biological effects may be identified in the future.

**ACKNOWLEDGED AND AGREED:**

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Client's Printed Name