Guidelines, Policies and Statements

B6

Consent To Ultrasound Scanning For Teaching Purposes

Revised July 2018
Consent To Ultrasound Scanning For Teaching Purposes


I..................................................................of........................................................ hereby consent to undergo examination by ultrasound either by way of one or multiple examinations

OR I hereby consent to..................................................................undergoing examination by ultrasound either by way of one or multiple examinations on the ...........………....... day of .......20 ......... the nature and purpose of which has been explained to me by:

I understand that during these procedures a registered medical practitioner or qualified sonographer will use an ultrasound machine to image my body using high frequency sound waves.

I further understand that a gel medium will be applied to my skin and a sound source (transducer) will be placed against my skin to generate an image of my internal body organs.

I further understand that ultrasound imaging is a clinically accepted medical diagnostic technique and that medical studies to date have not demonstrated any adverse biological affect at the low power intensities used for imaging.

I understand the scan is for teaching purposes only and it is not intended to provide either myself or my doctor with diagnostic information.

I have had all my questions answered to my satisfaction and I understand that I am free to withdraw my consent to participate in this examination at any time.

I understand that the risk of a physical accident such as a fall etc. is small but present (please notify the doctor of any known health problems).

No assurance has been given to me that the ultrasound will be performed or administered by any particular practitioner.

Date.................................................Signature...............................................................