

TRANSVAGINAL CONSENT FORM

A transvaginal ultrasound is performed by inserting a small imaging probe (transducer) into the vagina.

This allows the pelvic organs to be more magnified and clearer in the imaging process.

PROCEDURE:

- ◇ You will be asked to empty your bladder completely.
- ◇ You will be completely covered during your exam.
- ◇ A sterile cover and sterile lubricating gel will be applied to probe prior to insertion.
- ◇ The procedure will take no more than 20 minutes.

This exam should not hurt, there may be some internal pressure during the exam which is normal. On the chance that there is some pain let the Ultrasound Technologist know so we can adjust the scanning technique. A chaperone will be made available if the ultrasound technologist is male.

If at anytime, you would like the exam to stop and for the probe to be removed immediately, let the performing ultrasound technologist know, and they will follow your request.

CONTRAINDICATIONS

This exam should not be performed if:

- ◇ The patient has never had sexual intercourse.
- ◇ The patient is elderly (Age 80+)
- ◇ The patient is at risk for a miscarriage
- ◇ The patient is < 6 weeks postpartum.

Accepting the study, initial below if:

I have read and understand the above information and acknowledge that the ordering physician has ordered a pelvic ultrasound that includes transvaginal imaging.

I accept the possibility of any complications as a result of this ultrasound examination.

Knowing this, I wish to proceed with the above procedure.

Initial: _____

Declining the study, please initial below if:

I have read and understand the above information and acknowledge that the ordering physician has ordered a pelvic ultrasound that includes transvaginal imaging.

I accept that without these images the pelvic ultrasound results may be limited.

Knowing this, I will be declining to proceed with the above procedure.

Initial: _____

Witness Signature: _____

Chaperone Signature: _____

Witness Name: _____

Chaperone Name: _____

Date: ____ / ____ / ____

Date: ____ / ____ / ____