

BMUS

British Medical Ultrasound Society
36, Portland Place, London W1B 1LS

Consent Form for Ultrasound Scanning for the Purposes of Teaching and/or Demonstration

Participation in workshops, study days, conferences or for other teaching or demonstration purposes is voluntary. It is recommended that consent is obtained by the person responsible for the scanning session. The volunteer should read the statements below and sign the form if he/she is in agreement with them and is willing to accept their implications.

- The potential hazards of ultrasound have been explained to me;
- I understand that I may withdraw my participation in the scanning at any time, without the need to justify my decision.
- I understand that personal/ medical information may be revealed on the ultrasound monitor, and will be witnessed by those present;
- To the best of my knowledge I am not pregnant. I understand that the scan will cease if a pregnancy is found.
- I understand that there exists the possibility of finding an unsuspected abnormality, or pathology, during the scanning process, which will be revealed to those present;
- In the event of such an abnormality being discovered as a result of the scan, I agree that I should be informed of the abnormality, that a relevant medical practitioner, or GP, may be contacted, and that I may be referred, if necessary, to the appropriate clinician;

I understand the implications of the above statements, and agree to take part in the demonstration/teaching session(s) on :

Date(s): _____ at _____

Signature of subject _____

Print name: _____

Date: _____