



Pregnancy Ultrasound Form

Patient Name: _____ Age: _____
Health Card No: _____ Fees: _____
Nationality: _____ Date: _____
Telephone No: _____ Time: _____

Location:

Dubai Hospital at Radiology Department Ultrasound Reception

Purpose:

Give detailed images of the developing fetus. Beside this it is radiation free and painless.

Preparation:

Pregnant lady within first trimester (**one to three month**) has to drink water or juices till the bladder is full and **PLEASE DON'T EMPTY YOUR BLADDER.**

Procedure:

- Patient will enter the scan room
- Then she will be placed on the bed
- She will be covered with the bed sheet
- Water-based gel will be placed on the abdomen area
- After that the sonographer will start scanning taking the required measurements and images
- Once the images are done, the patient may have a quick look at her fetus on the monitor
- In the end pregnant lady will visit her doctor on the appointment day for her full report.

Contact Number for appointment:-

Sunday – Thursday from 12pm – 2pm: - 04-2195608 or

During weekend (Friday-Saturday) and afternoon: - 04-2195600 / 04-2195601

Fax No: - 04-2195613