

ARMITY A. SIMON, M.D.

TARA BRODKIN, M.D.

Obstetrics & Gynecology

You are scheduled for a Pelvic/Vaginal Ultrasound

Date: _____

Time: _____

**DUE TO THE HIGH DEMAND FOR APPOINTMENTS THERE IS A \$50.00 CHARGE
IF YOU DO NOT SHOW FOR YOUR APPOINTMENT OR YOU DO NOT CANCEL
WITHIN 24 HOUR OF YOUR APPOINTMENT.**

Please follow the instructions below:

1. Please arrive 5-10 minutes early to fill out any necessary paperwork. Generally our ultrasound schedule does run on time.
2. You will be having a vaginal ultrasound and you are not required to drink any water prior to the ultrasound, unless otherwise instructed.

****If your provider requests an abdominal ultrasound be performed, please arrive at the office with a full bladder. You should drink 32 ounces of water one hour prior to your ultrasound. Please do not urinate after you have completed drinking your water.**

- Please make sure you check with your insurance that you are eligible to have an ultrasound in the office and your benefits. If your ultrasound is subject to your deductible, payment will be required on the date of service.
- During your ultrasound we recommend that children should have other supervision and do not go into the room during the exam.