



*Simply Sono*  
14130 Noblewood Plaza Suite 306  
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## **PATIENT PRENATAL VERIFICATION**

Dear Healthcare Provider,

Your patient wishes to visit our center for an elective 3D/4D personalized ultrasound. Our ultrasounds are non-diagnostic and do not provide measurements, dating, or assess for fetal anomalies. It is extremely important to us that our clients are receiving the appropriate prenatal care during their pregnancy. Please complete the section below to verify the required prenatal care.

Respectfully,  
Simply Sono, Inc.

ATTN: Simply Sono, Inc.

\_\_\_\_\_ is currently a patient under my care and for her pregnancy.

\_\_\_\_\_  
Obstetrician/Healthcare Provider

\_\_\_\_\_  
Date

## **ABOUT US**

- Simply Sono is owned and operated by highly trained ARDMS registered sonographers.
- If we find any incidental cause for concern while performing our ultrasound we will inform the patients healthcare provider with our concerns.