Sweet Baby O' Mine Ultrasound
McGregor Village
9290-1 College Parkway
Ft. Myers, FL 33919
Phone: 239-267-BABY 2229

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PRENATAL CARE VERIFICATION

To: Sweet Baby O' Mine
Re: 3D, 4D & Real View HD Ultrasound

_____ is currently receiving prenatal care for her pregnancy.

At this time we _____ Have _____ Have Not completed a first and/or second trimester diagnostic ultrasound.

The results of the ultrasound were: _____ Normal _____ Abnormal or, _____ N/A as an ultrasound has not been performed.

If abnormal, please explain briefly: _____

_____

_____

Provider Signature

Name: _____

Printed: _____ Date: _____

Patient Consent to Release Information
Iauthorizethe abovenamed physicianand his/her staff to release the information above to Sweet Baby O' Mine. Furthermore, I authorize that this information may be provided to Sweet Baby O' Mine via mail/USPS or email.

Thank you,

Signature: _____

Print Name: _____ Date: _____