The last issue of Clinic Tips discussed the principle that no medical services can be provided unless the services are justified by a medical indicator. That is to say, before any medical service can be provided there must be a valid medical reason to provide the service and render an appropriate medical diagnosis. In applying this principle to the use of ultrasound imaging it is established in the medical profession that ultrasound, being a diagnostic medical procedure, should not be performed if the reason for the exam is to simply show an abortion-minded patient her baby in utero. Such a reason is not a medical indication justifying the use of ultrasound. Indeed, such an exam has been labeled an “entertainment ultrasound” and has been declared by the Federal Drug Administration (FDA) an inappropriate use of ultrasound.

Medical indications do exist, however, to provide a patient a limited ultrasound when she tests positive for pregnancy via a urine test. According to guidelines issued by the American Institute in Ultrasound Medicine (AIUM), the American College of Obstetricians and Gynecologists (ACOG) and the American College of Radiologists (ACR) limited ultrasound can be utilized in such cases to diagnose the presence of a viable intrauterine pregnancy and fetal cardiac activity. Limited ultrasound may be further medically indicated to obtain the gestational age of the baby. It is extremely important to understand that the medical indications justifying the limited ultrasound relate to the diagnosis of the existence and condition of the pregnancy – not the diagnosis of the health and physical condition of the baby.

MEDICAL INDICATIONS FOR DOPPLER ULTRASOUND

Pregnancy Help Medical Clinics have expressed a great deal of interest in providing Doppler ultrasound to their abortion-minded and abortion-vulnerable patients. In addition to seeing the powerful image of her unborn baby via the sonogram an abortion-minded patient will also be able to hear the baby’s heartbeat when Doppler is utilized. This service is very appealing because, as various clinics report, many abortion-minded patients are empowered to choose life after hearing the fetal heart tones of their unborn offspring. Thus, it is seems logical that Pregnancy Help Medical Clinics should be encouraged to use the Doppler alongside ultrasound in order to maximize the life-affirming impact of medical services. However, NIFLA believes
that the use of the Doppler for the sole purpose of enabling a woman to hear her baby’s heartbeat is not justified by a medical indicator and should not be undertaken in the normal clinic setting where a limited ultrasound is provided. The use of the Doppler is indicated when there is justifiable medical concern over the condition of the baby’s heart. Doppler sonography is used to evaluate most of the major fetal circulatory systems including the umbilical artery, the umbilical vein, the aorta, the heart and the middle cerebral artery. Its purpose, or medical indication, is to answer concerns about potential heart defects in the unborn baby. To take the necessary measurements Doppler is not utilized until the 2nd or 3rd trimester of pregnancy. This is when the baby’s heart is sufficiently mature to enable the proper medical information to be derived.

The medical indicator for the limited ultrasound exam performed in Pregnancy Help Medical Clinics is to render a diagnosis of the condition of the pregnancy, i.e. the existence of a viable intrauterine pregnancy and fetal cardiac activity. The medical reason for the limited ultrasound is not to diagnose the health or physical condition of the baby. Because of this, the use of the Doppler in this context is not medically appropriate.

**DOPPLER ULTRASOUND AND THE ALARA PRINCIPLE**

Ultrasound utilizes high frequency sound waves that, through modern technology, provide sonographic imaging when exposed to the baby in utero. In its over thirty years of clinical use no harmful effects have been identified on children who were exposed to the level of sound wave energy that an ultrasound exam provides. However, the use of obstetrical ultrasound is guided by the ALARA principle – As Low As Reasonably Achievable. ALARA defines the standard of practice in the medical community in regards to the amount of exposure to sound wave energy that an unborn baby receives through an ultrasound exam.

ALARA means that an unborn child will only be exposed to the lowest amount of ultrasound energy that is reasonably necessary to obtain the desired information sought by the exam. Doppler seeks to obtain information about the condition of the baby’s heart and utilizes increased levels of energy from the normal amount utilized in a limited ultrasound exam. Hence, the baby’s heart is exposed to increased levels of energy through the Doppler. In order to justify this under the ALARA principle there must be a medical indicator to perform the Doppler examination. If there is not then ALARA and the standard of practice of medicine is violated.

**CONCLUSION**

It is essential that Pregnancy Help Medical Clinics (PHMCs) operate under the highest standards of excellence and conform all their medical practices to the standard of care utilized in the medical community. The credibility of PHMCs will be determined by how they are perceived in the medical community at large. If PHMCs detour from standard medical practices regarding the use of ultrasound and Doppler the old charges of being “bogus clinics” will undoubtedly be raised by those who oppose the work of PHMCs. Such charges can only be refuted if PHMCs are operating in conformity to the recognized standards of medical care in the medical profession. The use of Doppler is attractive in that it provides powerful incentives to women considering abortion to choose life. However, in the setting of a PHMC where limited ultrasound is utilized to diagnose the existence of an intrauterine pregnancy and fetal cardiac activity Doppler is not a proper medical service to provide.