

FETAL MEDICINE FOUNDATION USA

Preeclampsia Screening Film Submission Form

Fetal Medicine Foundation ID number*:

Your name: _____

Please check Option 1 (prerequisite) AND Option 2 OR Option 3:

- OPTION: 1 I have completed the PreEclampsia Screening Online Course Please note that this course MUST be completed prior to submission of uterine artery images.
- OPTION 2: I have successfully completed the FMF online course for PreEclampsia Screening but have not yet paid the one-time \$100 application fee, select this option (See payment instructions below).

Note that this is a one-time only fee! If you are already accredited by the FMF in nuchal translucency or have already paid this fee, there is no additional fee for adding on Uterine Artery Doppler, select Option 3.

NOTE: NT accreditation is NOT a prerequisite for UtAD accreditation.

Please send a check payable to the **Fetal Medicine Foundation USA** for the one-time only fee of \$100 due with the first film submission. Please include your FMF ID number in the notes section on your check. This fee may also be paid online with a credit card on our secure server at <http://fetalmedicineusa.com/paypal.php>.

- OPTION3: I have successfully completed the FMF online PreEclampsia course and have paid the one time \$100 application fee.

Uterine artery Doppler image requirements: Three UtAD images. The images should contain both the 2D and Doppler portions and the waveform should be measured so the peak systolic velocity and PI are seen. **Make sure that the Doppler gate size, and the angle corrector tool, sweep speed, and wall filter settings are visible on your images. The date of exam (and the time of scan) should be visible on each image and must be recent (dated within two months of submission date). If scanning after someone whose name/initials are in the machine header, please type your own name/initials on the screen when scanning.**

If mailing, send images and/or check to:

Naomi Greene PhD, RDMS, RDCS
Fetal Medicine Foundation USA
12400 Ventura Blvd. #838
Studio City, CA 91604

*Your FMF ID number will not be recognized by labs until the credentialing process has been completed.

Please include a copy of this Film Submission Form each time you send images. E-mail questions to Naomi Greene (NaomiHG@fetalmedicine.org).