Dear doctor,

Transabdominal gastrointestinal ultrasound (GIUS) is a great tool to assess the small and large bowel. It has been accepted nationally and internationally and is listed in guidelines for diagnosis and monitoring of inflammatory bowel disease (**IBD**). Furthermore, it helps patients avoid radiation, nephrotoxic/neurotoxic contrast agents and claustrophobia associated with other modalities. GIUS is perfect for patients requiring frequent assessments and does not require fasting or preparation.

In combination with other examinations and tests, GIUS can assist in making decisions in IBD and to provide more evidence for irritable bowel syndrome (**IBS**).

Some circumstances with your patients that you may consider referring to me for a GIUS include:

- Suspected IBD or Symptom changes in a patient with established IBD
- No symptoms, but worsening stool or blood tests in a patient with established IBD
- Therapeutic monitoring (assess the success of new or changed IBD medications)
- Patients not able to undergo MRI or CT evaluations of IBD
- Assessment of areas of the small bowel not reached by colonoscopy
- Stricture length assessment (to determine if appropriate for dilatation)
- Elderly or co-morbid patients with IBD
- Patients suspected of having IBS

These are only a limited number of reasons for a GIUS. I look forward to hearing from you and am available to discuss any questions that you may have. Forms can be electronically filled and emailed or faxed: http://www.ibdultrasound.com/form.pdf

(**If you are a Gastroenterologist, it is vital that your patients understand that I will not make changes/decisions regarding their care, unless specified, and they will need to see you to discuss the ultrasound results.)

Sincerely,

Dr. Brandon Baraty