

# ULTRASOUND

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**Primary Disciplinary Field(s):** Physics, Acoustics, Biomedical Engineering, Medicine (Radiology, Cardiology)

### 1. Core Definition

**Ultrasound** refers to mechanical, longitudinal waves--commonly known as sound waves--which possess frequencies exceeding the upper limit of the human hearing range. By definition, audible sound typically encompasses frequencies between 20 Hertz (Hz) and 20 kilohertz (kHz). Therefore, ultrasound is characterized by any acoustic energy operating above the 20 kHz threshold. While these waves are physically identical to audible sound in their propagation through elastic media, their high frequency necessitates specialized equipment, known as transducers, for generation and detection. These waves are central to numerous technological applications, fundamentally relying on the principle of wave reflection and attenuation as they traverse different materials.

In a clinical and biomedical context, the application of ultrasound is known as **ultrasonography**, or diagnostic medical sonography. This imaging modality capitalizes on the interaction of high-frequency sound waves (typically 2 MHz to 18 MHz, significantly higher than the 20 kHz lower boundary) with the heterogeneous structures of the human body. The system transmits pulses of sound and measures the time delay and intensity of the echoes reflected back from interfaces between tissues with varying acoustic impedances--such as the boundary between fluid and soft tissue, or soft tissue and bone. This gathered information is then processed computationally to construct a real-time, two-dimensional image (sonogram), allowing clinicians to non-invasively gauge and document internal structures, motion, and physiological flow.

### 2. Etymology and Historical Development

The theoretical understanding of high-frequency sound dates back to the mid-19th century, particularly following the establishment of the field of physical acoustics. However, the practical application of ultrasound became viable only after several key technological breakthroughs. Crucially, the discovery of the **piezoelectric effect** by Pierre and Jacques Curie in 1880 provided the mechanism necessary to efficiently convert electrical energy into acoustic energy and vice versa, forming the basis of modern ultrasonic transducers. This discovery laid the theoretical groundwork for both the generation and detection of high-frequency waves.

The first major large-scale practical application of high-frequency sound occurred during World War I with the development of **SONAR** (Sound Navigation and Ranging). Initiated primarily by physicist Paul Langevin, SONAR utilized ultrasonic pulses to detect submarines underwater,

demonstrating the feasibility of echo-ranging for locating submerged objects. Following the war, this technology was adapted for industrial uses, such as non-destructive testing (NDT) to detect flaws in metal castings. It was the transition from industrial flaw detection to medical diagnostics that marked the birth of modern ultrasonography.

Early medical pioneers included Karl Dussik, who in 1942 attempted to visualize cerebral ventricles using ultrasound transmission techniques, and John J. Wild, who experimented with A-mode (amplitude mode) devices for tumor detection in the late 1940s. The true breakthrough for diagnostic imaging came in the 1950s and 1960s with the work of physician Ian Donald and engineer Tom Brown in Glasgow, Scotland. They developed the first practical B-mode (brightness mode or 2D imaging) scanner, revolutionizing obstetrics by enabling the accurate diagnosis of gynecological conditions and the detailed visualization of fetal development, cementing ultrasound's role in modern medicine.

### 3. Physical Principles of Ultrasound

The function of ultrasound technology is fundamentally dependent on the physics of wave propagation, reflection, and transmission within a medium. An ultrasonic system utilizes a **transducer**, which contains piezoelectric crystals. When an electrical voltage is applied to these crystals, they rapidly deform and vibrate, generating short pulses of high-frequency sound waves that are directed into the body. These pulses travel through the various tissues, which act as the medium.

When the sound pulse encounters an interface between two different media--for instance, the boundary between the liver tissue and a vein wall--a portion of the energy is reflected back toward the transducer, and the remainder is transmitted forward. The degree of reflection is governed by the difference in **acoustic impedance** (the product of the tissue density and the speed of sound within that tissue) between the two media. Interfaces with a large difference in acoustic impedance, such as the boundary between soft tissue and air (like in the lungs or bowel), result in almost complete reflection, which is why ultrasound cannot easily penetrate gaseous or bony structures.

The transducer acts as both the transmitter and the receiver. It detects the returning echoes, converting the mechanical energy back into electrical signals via the inverse piezoelectric effect. The system measures two crucial parameters: the strength (amplitude) of the returning echo and the time elapsed between transmission and reception. Since the speed of sound in soft tissue is relatively constant (approximately 1,540 meters per second), the time delay allows the system to accurately calculate the depth of the reflecting structure. These multiple data points, collected rapidly and sequentially, are then synthesized into the final diagnostic image (sonogram).

## 4. Applications in Medicine (Ultrasonography)

Diagnostic **ultrasonography** is one of the most widely used medical imaging techniques globally, valued for its safety profile, affordability, and real-time imaging capability. Unlike X-rays or Computed Tomography (CT), ultrasound uses **non-ionizing radiation**, making it particularly safe for sensitive populations, notably pregnant women and children. Its primary uses are vast, encompassing nearly every system of the body, from superficial structures to deep abdominal organs.

Perhaps the most recognized application is in **obstetrics and gynecology**, where it is indispensable for monitoring fetal growth, determining gestational age, assessing placental health, and diagnosing potential anomalies. As highlighted in the source material, a common clinical instruction is that "The patient will need another ultrasound at twenty weeks" to conduct the detailed anatomical survey of the developing fetus. Beyond obstetrics, ultrasound is vital in cardiology (**echocardiography**) to visualize the function of the heart valves, measure ejection fraction, and assess blood flow dynamics.

Furthermore, ultrasound plays a significant role in abdominal and pelvic imaging, used to evaluate organs such as the liver, gallbladder, kidneys, spleen, and bladder, often aiding in the diagnosis of gallstones, kidney stones, and tumors. Specialized forms of ultrasound, such as **Doppler ultrasonography**, measure the velocity and direction of blood flow by detecting the frequency shift of the echoes reflected by moving red blood cells. This application is critical for diagnosing vascular diseases, deep vein thrombosis (DVT), and arterial stenosis. Ultrasound is also increasingly used for image guidance during minimally invasive procedures, such as biopsies and fluid aspirations.

## 5. Non-Medical Applications

While medical diagnostics represent the most visible application of ultrasound, the technology is extensively utilized across industrial, military, and biological fields. In industry, high-power ultrasound is employed for material processing, including welding of plastics and metals, and for sonic cleaning, where intense ultrasonic waves create cavitation bubbles that efficiently scour surfaces in cleaning baths.

A major industrial application is **Non-Destructive Testing (NDT)**, sometimes referred to as ultrasonic testing. This technique is used to evaluate the integrity of materials, components, and structures without causing damage. It involves sending ultrasonic waves through materials like metals, plastics, and composites to detect subsurface flaws, cracks, delaminations, and corrosion, ensuring structural safety in industries ranging from aerospace to energy production.

In the natural world, ultrasound is integral to **echolocation**, a biological sonar used by numerous

species. Bats, dolphins, and some whales emit high-frequency pulses and interpret the returning echoes to navigate, hunt prey, and avoid obstacles in darkness or murky water. The biological mechanisms employed by these animals serve as inspiration for advanced acoustic technologies, demonstrating the efficiency of ultrasonic waves in hostile or opaque environments.

## 6. Advanced Techniques and Characteristics

Modern ultrasonography has evolved far beyond simple two-dimensional imaging (B-mode) to include highly sophisticated modalities that provide detailed functional and volumetric information.

**3D/4D Ultrasound:** Three-dimensional ultrasound captures multiple 2D slices that are computationally reconstructed to form a volume image, offering enhanced spatial visualization, particularly important in fetal anomaly detection. Four-dimensional ultrasound adds the dimension of real-time movement to the 3D rendering.

**Contrast-Enhanced Ultrasound (CEUS):** This technique involves injecting gas-filled microbubbles into the bloodstream. These microbubbles strongly reflect ultrasonic waves, significantly enhancing the visualization of blood flow, perfusion, and the microvasculature of tumors, providing functional information not available with conventional B-mode imaging.

**Elastography:** A relatively newer technique, elastography measures the stiffness (elasticity) of tissues. Tissues affected by disease, such as fibrosis or malignancy, are typically stiffer than normal tissue. By applying external pressure or using acoustic radiation force, elastography calculates and maps tissue stiffness, offering a non-invasive alternative to traditional invasive biopsy in some cases.

**High-Intensity Focused Ultrasound (HIFU):** This is a therapeutic, rather than diagnostic, application. HIFU concentrates high-energy ultrasonic waves at a small focal point deep within the body, generating intense heat to destroy target tissues (such as uterine fibroids or cancerous tumors) without damaging overlying structures.

## 7. Debates and Limitations

Despite its numerous advantages, ultrasound technology is subject to certain inherent physical and operational limitations. The most significant physical constraint relates to the wave's interaction with air and bone. Because of the vast difference in acoustic impedance, ultrasound waves are almost completely reflected by gas (e.g., bowel gas or air in the lungs) and bone, resulting in poor image penetration through these structures. This limitation means that organs obscured by gas or bone, such as the adult brain (due to the skull) or the deep abdominal organs in patients with significant flatulence, are difficult or impossible to visualize clearly.

A critical operational limitation of ultrasonography is its **operator dependence**. The quality of the examination and the accuracy of the resulting diagnosis rely heavily on the skill, training, and

experience of the sonographer or physician performing the scan. Unlike CT or MRI, where image acquisition is highly standardized, the ultrasound operator must manually manipulate the transducer to optimize acoustic windows, select appropriate settings, and interpret the image in real time, leading to greater variability in diagnostic quality across different providers.

While diagnostic ultrasound is generally considered safe and there is no confirmed evidence of harm from standard clinical exposures, ongoing debates focus on potential bioeffects, particularly related to thermal and mechanical indices. High-intensity exposure can cause tissue heating (thermal effect) or potentially induce cavitation (mechanical effect) in tissues containing gas pockets. Regulatory bodies, such as the U.S. Food and Drug Administration (FDA), maintain strict limits on output power, especially during fetal imaging, to ensure that the benefits of diagnosis always outweigh any theoretical risks associated with tissue interaction.

## 8. Further Reading

[Ultrasound - Wikipedia](#)

[Diagnostic Ultrasound - StatPearls Publishing](#)

[The History of Ultrasound: From Bats to Babies](#)

[The Birth of Diagnostic Ultrasound - American Institute of Physics](#)