

# Regulating Personal Ultrasound Use Is Moot in 21<sup>st</sup> Century when Self-Identified Gender Will Be Self-Determined Way after Birth, Whereafter Future Procreation Will Be Further Self-Limited by Self-Determined Fertility

The laws in the society should evolve with the evolving science and thus evolving understanding within the culture. It is understandable why ultrasound use had come under regulatory restrictions in the 2000s.<sup>[1]</sup> However, it is 2020s now, and ultrasound use has exploded beyond radiologists and gynecologists-obstetricians across the globe. Should physicians catering to society continue to lag behind the rest of the world in terms of ultrasound use, considering that facility-based capital-intensive ultrasound use is giving way to personally owned, cost-effective ultrasound use wherein personal ultrasound devices may be rapidly replacing physicians' personal stethoscopes? It is understandable that society may not have changed yet to accept the birth of a baby girl as equivalent to the birth of a baby boy, but it is the 2020s, and society may be missing a major point. Children born in the 21<sup>st</sup> century will be self-determining their self-identified gender way after their birth.<sup>[2,3]</sup> Therefore, medical termination of pregnancies based on prenatal sex determination may be ironically moot when even the sex assigned at birth will be irrelevant among children born in the 21<sup>st</sup> century because their self-identified gender will remain unknown for years until self-determination. Even if the children conceived in the 21<sup>st</sup> century survive prenatal sex determination to be born with the preferred sex assigned at birth and after that go on to self-determine their self-identified gender as concordant with their sex assigned at birth, the procreation of future generations will not be automatically booming when consummation followed by fertility will have to counteract beaming and blooming voluntary childlessness among the growingly humane proponents of child-free humanity.<sup>[4]</sup> Simplistically, gynecologists-obstetricians medically terminating pregnancies can be asked to consider always documenting the chromosomally determined sex of terminated fetuses for *post hoc* regular audits of their practice data by regulatory agencies while all physicians, whether they are radiologists or not, should be freed from the regulatory restrictions over personal ultrasound use because the societies regulating their sex ratios based on sex

assigned at birth may be helpless in handling their gender ratios based on self-identified gender self-determined way after birth.<sup>[5]</sup> Summarily, the onus should lie with the conceiving parents and their families who are choosing to terminate fetuses based on ultrasonically determined sex when self-identified gender preempting the future course of fertile life will be self-determined by their surviving children who, in due course of time, may or may not decide to bear their own children with or without assisted reproductive technology which will be irrespective of sex assigned at their own birth as well as regardless of their own self-identified gender self-determined by them way after their birth.

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Deepak Gupta

Department of Anesthesiology, Wayne State University/Detroit Medical Center, Detroit, Michigan, United States

**Address for correspondence:** Dr. Deepak Gupta, Clinical Assistant Professor, Anesthesiology, Wayne State University/Detroit Medical Center, Box No 162, 3990 John R, Detroit, MI 48201, United States.

E-mail: dgupta@med.wayne.edu

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