

Protocol for Scanning Children.

This protocol must be read and interpreted in conjunction with the Southern Ultrasound policies and protocols:

- Informed Consent
- Examination Protocols
- Chaperone Policy
- Daily Scanning Protocols
- Safeguarding Children and young Adults

Examination specific protocols are available within the department for each ultrasound examination.

These protocols provide general guidance in the scanning of adult patients but will require individual adaption to cope with the specific needs of the individual patient.

This adaption will be greater in the case of Children, and it is important the Sonographer makes suitable adjustments to both their examination procedure and their own persona to ensure the well-being of the child patient.

For the purpose of this protocol; a child refers to anyone who has not reached their 18th birthday (Working Together to Safeguard Children, 2015, 2013, 2010). However, there are special circumstances where the age is extended beyond this as for example children with disabilities and Looked After children. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody, does not change his/her status or entitlements to services or protection under the Children Act 1989

As a general rule, Children should only be examined with a responsible adult present.

Although untrained in the role, this adult may be a close relative of the child in whom they have complete trust, but in any case their attention should be 100% patient focussed, to ensure the physical and emotional well-being of the child and not as an assistant to the Sonographer. In addition, or instead, a trained Chaperone is preferred; for reasons outlined in the company's Chaperone policy.

Explanations of the procedure about to be, and currently being, performed need to be worded in such a way as to be understood by the patient where-ever possible, and potentially explained in greater detail for the benefit of the Responsible Adult.

Any hospital visit has the potential for causing distress and fear in children and well as adults, and the Sonographer will often find their task simplified considerably by putting the child at ease with a reassuring and relaxed manner.

It must be accepted that the examination will take longer than normal to perform.

No child may be forced to have an examination against their will, even with their parental consent.

However, in the case of a very young child, unable to understand what is happening or why, then proceeding with parental consent may be necessary.

There is no fixed cut-off point between these two contradictory statements, and the Sonographer will need to make a reasoned judgement in each instance, and be prepared to justify their decision if required.

Policy Created: 18/09/18

Policy Reviewed (Annually):

15/03/19



Kevin Rendell

Director