

Communication and Language Difficulty

Social Behavior and Interaction

Sensory Difficulties

- The Autism Spectrum means some Patients can answer simple questions but others will struggle with a two-way conversation so explaining positioning will be challenging (National Institute for Deafness and Other Communication Disorders, 2018)
- They use repetitive language relating to their interests with a limited vocabulary (Costley, Baldwin, Bruck, Haas & Ritzrow, 2017)
- Patients may have a mechanical or almost robot-like voice making it difficult to understand what they are trying to say or express (National Institute for Deafness and Other Communication Disorders, 2018)
- Each Patients tone of voice will differ with some whispering very quietly and others shouting at the top of their voice making it difficult to hear what they have to say (Holt et al., 2004)



What can you do to help?

- Be calm and give your Patient time to answer ID questions
- Actively listen to show your interest in them
- Communicate using their name and ask questions or get them to repeat what you have said to show their understanding e.g. "Jack, you have to breathe in when I go behind the screen to take a picture of your Chest. Jack what do you have to do?" (Holt et al., 2004)
- Communicate beforehand and explain everything including lights or noises e.g. "Jack, I'm going to move your arm so we can take a picture of your hand." (Holt et al., 2004)
- Be clear and state exactly what you want to say avoiding sarcasm as you don't want to confuse your Patient (Bogdashina, 2005) **REMEMBER! TALK TO YOUR PATIENT NOT THE PEOPLE ACCOMPANYING THEM!**

- May seem aloof and uninterested due to a lack of understanding your facial expressions, gestures and body language. They also won't be able to use these non-verbal techniques themselves (Costley et al., 2017)
- Autistic Patients have focused interests and a good memory so they may get distressed if you ignore them (Costley et al., 2017)
- Some will share an attachment to objects or people that make them feel relaxed (Bogdashina, 2005)
- Strict adherence to routines and repetitive body movements such as flapping hands may be seen (Priest & Gibbs, 2004)
- Some Patients will find it difficult to control their emotions which can result in aggressive and violent reactions harming both themselves and others (Autism Speaks, 2018)



What can you do to help?

- Avoid using facial expressions, gestures and body language and don't rely on those used by your Patient
- Take time to understand your Patients interests and utilize what they say to help position them e.g. if your Patient says they like cars, tell them you will give them a car sticker if they stay still
- Allow your Patient to hold an object such as a toy they may have with them or you might have. Even holding a positioning pad will help your Patient feel relaxed, gain your attention and prevent emotional distress so they don't move and no repeats are required (Bogdashina, 2005)
- Give your Patient a task like counting to 25 to encourage their participation and make them feel responsible to co-operate and complete the task honestly (Costley et al., 2017)

REMEMBER ALARP

- Some Autistic Patients will be sensitive to touch, sounds, lights, colours and smells (Bogdashina, 2005)
- Hypertactile Patients dislike getting too close to others and are sensitive to touch which can be problematic especially for intimate examinations like the Abdomen and Pelvis (Bogdashina, 2005)
- Hyper hearing Patients will be sensitive to noises such as A&E bleeps and the Radio. They may create their own sounds to hide other noises (Costley et al., 2017)
- Sensitivity to lights such as those above the Erect Bucky for hearing-impaired Patients may be a characteristic of your Patient (The National Autistic Society, 2018)
- Strong smells including perfume, hand gel and air fresheners might irritate your patient (Bogdashina, 2005)
- Most Autistic Patients will have a high tolerance to pain and won't be able to assist in locating pain but others may feel pain just by your touch (Bogdashina, 2005)



What can you do to help?

- Consider your distance and communicate to alarm your Patient you are coming closer to them or you are going to touch them **REMEMBER YOU NEED VALID CONSENT!**
- Turn the Radio off and keep other noises as quiet as possible. Warn them about the sounds they may hear and reassure them. Don't forget about the exposure preparation sound to stop them from moving at the last second!
- Find out whether your Patient prefers bright or dark lights and adjust the lighting or change the room to suit your Patient. Warn them about any lights they may see
- If you are wearing strong perfume, get help from accompanying Parents/Carers/Friends/Family or another Radiographer to help position whilst you prep (BONUS- this will reduce time for Patient movement)