The Recording of Images by Patients during Diagnostic Imaging (including screening) and Radiotherapy.

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Summary

The Society and College of Radiographers has been made aware of an increasing number of requests by patients (and/or those accompanying them) to take photographs or videos of the image on the screen, the overall examination or treatment by using mobile phones and other devices. This document combines separate but related advice for general diagnostic imaging and obstetric ultrasound which has been previously published by the SCoR. It is extended in scope to include all members of the professional workforce for diagnostic imaging or radiotherapy and also now includes references to social media.

Introduction

Members may be asked by a patient or person accompanying them if they will allow them to make their own real-time recording of a diagnostic or screening examination or treatment. This request may be to record the examination or treatment with a mobile telephone, record onto a DVD or memory device or utilise other digital or analogue recording media. With rapid developments in communications technology, the ways in which such recordings are able to be made are likely to become ever more varied.

There have been instances where examinations or treatments have been recorded and posted to social media sites without the member’s consent. It can then prove very difficult to have these removed, especially if there is no statement of policy placed in waiting rooms or otherwise publicly available.

Advice

The decision as to whether to allow images, an examination or treatment to be recorded should be made by the individual departments concerned taking into account local and national guidelines. Departments should have a clear policy on this issue following a risk assessment that takes account of the following:

i) The views of members of the professional workforce both as a group and individually should clearly be taken into account. Many do not want to be filmed or recorded and their wishes should be respected.
ii) It can be a great distraction and can increase stress levels for the healthcare professional at a time when they require very high levels of concentration.

iii) It has the potential to extend the time of the examination or treatment which may be contrary to published safety guidelines and advice.

iv) Departments should take into consideration the possible existence of local policies allowing, for example, the recording of a birth. Many employing authorities do try to facilitate this type of request within the Directorates that have responsibility for maternity services.

v) Departments should consider consulting with any relevant patient liaison groups that the employing authority may have and ensure the final agreed policy is publicly available. Removal of material from social media that has included the healthcare professional without their consent may be difficult, particularly so if no prior notice of policy has been made available.

vi) Departments might also wish to consider how staff should respond to situations where filming and/or recording begins or continues without permission and contrary to the agreed policy.

This advice does not refer to the taking of images by sonographers during obstetric examinations and that is agreed procedure between the ultrasound department and the employing authority. This is often for a previously advertised fee.

**Related documents**


This document supersedes the following document:

The Society and College of Radiographers. The recording of images during diagnostic or screening obstetric ultrasound examinations. London: SCoR, 2010


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