ASSOCIATION OF PAEDIATRIC RADIOGRAPHERS.(A.P.R.)

Radiology Guidelines for Immobilisation of Children during Radiographic Examinations.

Definitions
✦ Restraint
The Department of Health for England defines restraint as: 'the positive application of force with the intention of overpowering the child'. Restraint is, by definition, applied without the child's consent. There is also the Department of Health for England's specific guidance on restrictive physical interventions for people with learning disabilities and autism
✦ Holding still
This means immobilization; which may be by splinting, or by using limited force. It may be a method of helping children, with their permission or with permission of the parent/guardian, to manage a painful procedure quickly or effectively. Holding is distinguished from restraint by the degree of force required and the intention.

A.P.R. Summary
It is recognised that immobilisation may be used, when necessary, to assist with the imaging of children.
Immobilisation must always be in the best interests of the child and with the consent of parents/guardians or other legal carer.

The capacity to understand the nature, purpose and any risks of the examination will vary with the age of the child and from child to child. It is therefore essential that parents/guardians be involved with preparation. The need for restraint can be reduced or prevented through giving clear information and encouragement to both parent and child.

Parents/guardians should always be encouraged to accompany their child. During pregnancy, mothers can remain behind the control panel where they can witness the examination if they wish.

Full use of appropriate distraction techniques should always be made.

A member of staff who has volunteered to take charge of an accompanying child or children whilst an examination is performed should agree the most appropriate distraction with the parent/guardian. If physical restraint becomes necessary the staff involved should inform the parent/guardian and record this.
PROCEDURE:

Before immobilisation or holding techniques are employed for any examination, reassurance to the child and parent/guardian in the form of a full and appropriate explanation should be given.

When a member of the Radiology staff (radiographer/radiologist) considers it necessary to immobilise a child for radiological examination, consent must be obtained (see consent policy).

Never force a parent/guardian to restrain the child. It is unreasonable to both and there are always alternatives. If immobilisation is required consideration should be given as to whether:

a) The examination is urgent and must be performed at this attendance or
b) An alternative procedure is possible

If an urgent examination cannot be carried out record relevant request details on the radiology request and contact the referring clinician. Reassure the child and parent/guardian that an amicable solution will be found.

CONCLUSION:

Use of immobilisation and holding techniques for procedures involving children must only be undertaken in the best interests of the child and with the consent of either the child or the parent/guardian in accordance with guidance on consent (see above).