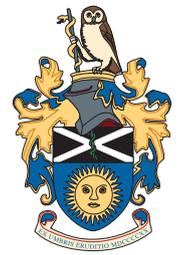


The Recording of Images by Patients during Diagnostic Imaging (including screening) and Radiotherapy



The Society & College of
Radiographers

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 but in general terms the SCoR would discourage this.

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. Possible medico-legal complications arising if (for example) an abnormality is recorded that is not reported or acted upon. Conversations between the healthcare professional and the patient and anyone accompanying them may also be recorded. The employer must be aware of any local arrangements if it is decided to allow this as they may impact on its risk strategy and insurance arrangements.
- iii. 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.
- iv. It has the potential to extend the time of the examination or treatment which may be contrary to published safety guidelines and advice.
- v. 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.
- vi. 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.
- vii. Departments might also wish to consider how staff should respond to situations where filming begins or continues without permission and contrary to the agreed policy.
- viii. 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

The Society and College of Radiographers. Sale of Images, Determination of Fetal Sex and Commercial Aspects Related to NHS Obstetric Ultrasound Examinations (Second Edition) London: SCoR. 2015

<https://www.sor.org/learning/document-library/sale-images-determination-fetal-sex-and-commercial-aspects-related-nhs-obstetric-ultrasound-6>

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

www.sor.org/learning/document-library/recording-images-during-diagnostic-or-screening-obstetric-ultrasound-examinations

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