

# KINGSTON GENERAL HOSPITAL

## IMAGING SERVICES DEPARTMENT MANUAL

**Subject: Pregnant Women & Women of Child-Bearing Age**      **Number: 17-062**

**Prepared by:** Director, Imaging Services

**Page:** 1 of 2

**Original Issue:** 2007.04

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### PREAMBLE

Kingston General Hospital and Imaging Services is committed to taking every reasonable precaution, as is practical, to limit the exposure to pregnant women and women of child-bearing age, to ALARA (As Low As Reasonably Achievable). Imaging Services Quality Assurance Program is designated to limit radiation exposures for this patient population to ALARA by:

1. strict adherence to the "10 day" rule (the ten-day period following the onset of menstruation) by: screening patients for LMP (Last Menstrual Period), "intent" to become pregnant and/or for the method of birth control.
2. radiation protection for the abdomen and pelvic areas, if possible, for all procedures.

### CRITERIA

1. Radiography of the abdominal and pelvic area in women of child-bearing age should be undertaken in the ten-day period following the onset of menstruation, since the risk of pregnancy is very small during this period.
2. Only essential investigations of the abdominal or pelvic region should be taken in the case of pregnant or suspected pregnant women.
3. When radiography of the abdominal and pelvic area is required, the exposure must be kept to the absolute minimum necessary and full use must be made of gonadal shielding and other protective shielding if the clinical objectives of the examination will not be compromised. This is particularly important during the earliest stages of pregnancy when the potential for radiation damage of the rapidly dividing tissues is the greatest.
4. Radiography will not be used for the determination of abnormal presentations of the foetus, or for placental localizations. Other techniques such as ultrasonography are better suited for this purpose.
5. Radiography of the head, neck, chest and extremities of a pregnant woman, for valid clinical reasons, will only be carried out using a well-collimated x-ray beam (this applies to equipment with adjustable apertures and not to Cat Scan machines whose collimation is inherent to the specific equipment) and with proper regard for shielding of the abdominal and pelvic area.

### PROCEDURES

#### Elective Procedures

Elective procedures to the abdominal and pelvic areas will not be performed if the patient meets any of the following criteria and is outside of the "10 day" rule. These criteria are women who are:

1. of child bearing age
2. sexually active
3. not using any form of birth control.

Birth control is defined as using any of the following methods:

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1. implants (subdermal)
2. birth control pill
3. birth control patch
4. IUD (Intrauterine device)
5. or if the patient has had a hysterectomy or tubal ligation.

### Emergent Procedures

Emergent investigations of the abdominal or pelvic areas of the pregnant or suspected pregnant woman will only be performed in consultation with a Radiologist or the Referring Physician.

### CLARIFICATION

1. The Technologist has the authority to decline performing an elective procedure of the abdominal or pelvic areas of a woman they believe to be at high risk for pregnancy as defined above.
2. A negative home pregnancy test is not an acceptable means of determining pregnancy status.
3. Patients should be directed back to their referring Physician, if there is a risk of pregnancy, for direction or rescheduled during the 10 day period following onset of menstruation.
4. Technologists have the knowledge, skill, judgment, certification and are authorized to perform examinations of the head, neck, chest and extremities of a suspected or pregnant woman using a well collimated x-ray beam and proper shielding of the abdominal and pelvic regions.
5. The patient does not have the authority to absolve the Department of responsibility for potential harm to the unborn foetus either by verbal or written means.

Authorizing Signature:

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Dr. Annette McCallum  
Department Head