PATIENT INFORMATION

Skeletal Survey

What is a skeletal survey?

This is a series of x-rays of all of the bones in your child's body including the chest, skull, pelvis, spine, arms, legs, hands and feet. To have a closer look at your child's brain a CT (computed tomography) and/ or an MRI (Magnetic Resonance Imaging) scan may be performed.

Why is a skeletal survey necessary?

NHS hospitals and all their employees have a duty to protect children. Staff are encouraged and expected to raise concerns if they believe the care or welfare of a child is at risk. Although this can be upsetting and difficult for those with parental responsibility, the child's wellbeing and safety comes first.

If any concerns are raised, it is important that these are investigated fully. As part of the investigation it is essential to identify any injuries. In younger children and babies, injuries can be difficult to find. A skeletal survey is performed to look for any abnormality or injury to your child's bones or brain.

The doctor looking after your child will give further explanation why this examination is necessary.

Where will the skeletal survey take place?

This will be performed in the radiology department on level 3 by a HCPC registered Radiographer.

What happens during a skeletal survey?

A nurse or doctor from the ward will accompany you to the radiology department between the hours of 9am to 5pm Monday to Friday. The skeletal survey is carried out by appropriately educated and trained paediatric radiographers who are skilled in dealing with children. It is possible under most circumstances for one parent/ carer to stay with the child during the skeletal survey. You will be required to wear a heavy protective apron to protect you from the scatter radiation. If you are pregnant, or could be pregnant, you must tell the radiographer. You will not be allowed to hold your child in this case.

It is important that your child stays as still as possible to get good, clear pictures. Your child will need to be held firmly for a few seconds while each x-ray is taken. The radiographers will help you or the nurse/doctor to hold your child. This will not hurt but some children can get upset as they do not like being held still. You will be able to comfort your child between x-ray images.

The x-rays are checked by a Consultant Radiologist (x-ray doctor) to make sure all of the bones can be clearly seen. They may ask for more x-rays to be taken in a different position.

Before you return to the ward, the radiographers will arrange an appointment for you and your child to come back for more x-rays of the chest, ribs, arms and legs in 11-14 days. This is because some bone abnormalities do not show up straight away**.** This is a shorter process, involving fewer images.

How long will a skeletal survey take?

It will take about an hour for this examination.

What preparation is needed?

Where appropriate, please bring a spare nappy, a spare feed and dress in clothing without lots of buttons and poppers. If your child has a favourite dummy/toy/blanket, please bring it to help settle them. If your child is very young make sure they have a good feed before leaving the ward.

The skeletal survey can be a distressing examination for children. For each child, consideration will be taken by clinicians, in discussion with parents, whether it might be necessary to organise a very mild sedation to help them relax.

Are there any risks from radiation?

We are all exposed to natural background radiation. This is made up of cosmic rays, radon; from some foods and from the ground. Every X-ray gives us a small additional dose of radiation. A skeletal survey is equivalent to a few months' background radiation. A CT head scan is equivalent to about 18 months' background radiation. These extra exposures to radiation slightly increase the lifetime cancer risk but the increase in risk is very small. **Your child will not be exposed to any more X-rays and scans than is absolutely necessary to adequately complete the examinations.** Before any examination that uses radiation is carried out, the benefits of having the examination are closely weighed against the risks of the radiation itself. All X-ray doses are kept 'as low as reasonably practicable' to ensure that images of a high diagnostic quality are obtained without exceeding accepted doses. This is particularly the case with children as they are still growing and more susceptible to radiation. The radiographers will use techniques to try to ensure that they achieve the correct X-ray first time and use various methods to keep the dose to your child as minimal as possible.

When will I get the results?

It is vital that you attend both the initial and the follow up up appointment as the skeletal survey examination is not complete until the second series of images has been taken.

After the skeletal survey is finished the consultant radiologist will look at all of the x-rays and produce a report. A second opinion will then be given by another consultant radiologist. The result will be sent to the paediatric doctor that asked for the skeletal survey and the social worker who is working with your family. It is up to them to give you the results as soon as possible.

All of this is very upsetting, why does it have to be done?

We know this can be very upsetting but we have a duty of care to your child and must follow national guidance to appropriately investigate every case where bruising or injury occurs. Please be reassured that you will be treated with courtesy and sensitivity and your explanations will be listened to and discussed with you. You will be kept informed at all times and you can ask questions at any time.

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call: 01803 655838 (9am-4pm Mon-Fri) or leave a message on 0800 02 82 037.

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.

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