Chaperones and echocardiography

An echocardiogram has not been seen as an intimate examination, which clinicians have taken to mean semi-invasive gynaecological or direct breast examination. It is however, important to be aware of the particular needs of the individual having the test. The most common current practice is to offer female patients a gown but chaperones are not routinely made available in most units. It is suggested that a notice be made visible or advice given in a patient information leaflet sent out with an appointment for an echocardiogram that one could be made available if requested in advance. If a relative accompanies the patient, he or she would usually be welcomed into the examination room. The Society has produced a description of an echocardiogram which can be down-loaded and adapted by individual hospitals as an information leaflet so that patients can be made aware of what is involved.

In 2005 the Health Care Partnership (a patient group affiliated to the British Cardiovascular Society) agreed:

1. Echocardiography is not at the same level of intimacy as gynaecological examinations or direct breast examination but still requires sensitivity. It should be remembered that the definition of an intimate examination may differ between individual patients for ethnic, religious or cultural reasons. In addition, some patients may have a clear preference for a health carer of specific gender due to their ethnic, religious or cultural background, because of previous experiences or in view of their age. Where possible such individual needs and preferences should be taken into consideration.

2. Chaperones should not usually be considered for stress or transoesophageal studies.

3. For transthoracic studies, all women should be offered a gown even if the echocardiographer is female. The patient’s privacy and dignity should be maintained throughout the examination which should be conducted without interruption.

4. Echocardiography departments should send out an information leaflet with outpatient appointments. This should state that a relative or friend can be invited to accompany the patient if preferred.

5. Patients should be offered the opportunity to have a chaperone, irrespective of sonographer gender and examination being undertaken. The offer may be outlined in the patient information leaflet or by visible notice on entry to the department. A record should be made in patient records when chaperones are offered and used. The record should include the name and designation of the chaperone. The chaperone should be of the same sex as the patient and should normally be members of the clinical team who are sufficiently familiar with the ultrasound examination being carried out to be able to reliably judge whether the sonographer’s actions are professionally appropriate and justifiable.

6. In practice this means that the vast majority of patients would not need or have a chaperone.