



Radiological Investigation Information for Women of Child-bearing Age

Introduction

Your doctor has arranged a radiological examination using X-ray to you. The purpose of this examination is to provide information which is useful for the diagnosis and the treatment of your disease.

The Procedure

- 1. You will be exposed to X-ray during this examination. If you are pregnant, both you and your fetus will be exposed to radiation.
- For examinations with intravascular injection of iodinated contrast, iodinated contrast can cross the placenta. If you are pregnant during this injection, both you and your fetus will be exposed to iodinated contrast.

Risks to your fetus

- 1. Risk of radiation:
 - The actual risk of radiation to your fetus depends on its gestational age and the radiation dose received by the fetus. The radiation dose varies according to individual examinations. Our radiographer will keep the radiation dose as low as possible to reduce risk.
 - Theoretically, a very high dose of radiation can cause fetal death (miscarriage), malformation, growth retardation, or impairment of mental development. In practice, the radiation dose to fetus that normally results from diagnostic radiological examination is unlikely to cause these harms.
 - Radiation exposure to the fetus may slightly increase the possibility of cancer later in the child's life.
 - The risk of radiation induced hereditary disease to the fetus descendants is very small.
- 2. Risk of iodinated contrast
 - You may be given intravenous iodinated contrast during the examination. There is insufficient
 evidence to conclude whether injected iodinated contrast causes risk to the fetus.

Before the procedure

- 1. Patients aged between 10 to 60 years (excluding patients with previous hysterectomy) need to sign the consent form before examination.
- 2. You should inform our nurse or radiographer before the examination if you are pregnant.
- 3. No contraceptive method is 100% effective. If there is any chance you are pregnant, you should tell our nurse or radiographer before the examination.
- 4. You should also tell our nurse or radiographer the date of your last menstrual period (LMP).
- 5. You may be offered a pregnancy test (blood or urine) if necessary. However, please note pregnancy tests CANNOT exclude the possibility of a very early pregnancy.
- 6. We will assess your likehood of being pregnant, based on the available information.
- 7. If you are pregnant or if the possibility of pregnancy cannot be excluded, doctor will re-assess the potential risk and benefit of performing this radiological examination to you and your fetus.
- 8. If the benefit of performing this radiological examination is greater than the risk, we may continue with this examination if you agree. It is your right to decide whether you want to continue with this examination.
- 9. If the risk of performing this radiological examination is greater than the benefit, we may consider arranging alternative investigations which do not use radiation, or to reschedule this examination.

After the procedure

After the examination, in the case that you realise you might have already been pregnant on the date of this examination, please consult your clinical doctor for advice as soon as possible.

Disclaimer

This leaflet only provides general information pertaining to this procedure. While common risks are described, the list is not exhaustive, and the degree of risk and other unforeseen complications may occasionally vary between patients. Please contact your doctor for more detailed information and any specific enquiries.

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