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CETARS/CAR Practice Guideline on Imaging the Pregnant Trauma Patient

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This Practice Guidelines has been reviewed and endorsed by Canadian Association of Radiologists, the Canadian Association of Emergency Physicians (CAEP)

Abstract

Imaging of pregnant patients who sustained trauma often causes fear and confusion among patients, their families, and health care professionals regarding the potential for detrimental effects from radiation exposure to the fetus. Unnecessary delays or potentially harmful avoidance of the justified imaging studies may result from this understandable anxiety. This guideline was developed by the Canadian Emergency, Trauma and Acute Care Radiology Society (CETARS) and the Canadian Association of Radiologists (CAR) Working Group on Imaging the Pregnant Trauma Patient, informed by a literature review as well as multidisciplinary expert panel opinions and discussions. The working group included academic subspecialty radiologists, a trauma team leader, an emergency physician, and an obstetriciangynaecologist/maternal fetal medicine specialist, who were brought together to provide updated, evidence-based recommendations for the imaging of pregnant trauma patients, including patient safety aspects (eg, radiation and contrast concerns) and counselling, initial imaging in maternal trauma, specific considerations for the use of fluoroscopy, angiography, and magnetic resonance imaging. The guideline strives to achieve clarity and prevent added anxiety in an already stressful situation of injury to a pregnant patient, who should not be imaged differently.

Résumé

L'imagerie chez les femmes enceintes victimes de traumatisme entraîne souvent de la peur et de la confusion chez les patientes, leurs familles et les professionnels de la santé à propos des effets délétères pour le fœtus de l'exposition aux rayonnements. Cette anxiété compréhensible peut entraîner des retards inutiles ou l'évitement d'examens d'imagerie potentiellement nocifs, mais justifiés. Les présentes lignes directrices ont été élaborées par le groupe de travail de la Société canadienne de radiologie d'urgence, de traumatologie et de soins actifs (CETARS) et le groupe de travail sur l'imagerie des patientes enceintes victimes de traumatismes de l'Association canadienne des radiologistes (CAR), après la collecte d'informations d'une revue des publications scientifiques et de l'avis et des discussions d'un groupe d'experts multidisciplinaire. Le groupe de travail incluait des radiologistes universitaires spécialisés, un chef d'équipe de service de traumatologie, un urgentologue

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