

Managing patient stress in pediatric radiology.

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Research has shown that short-and long-term effects can result from stressful or invasive medical procedures performed on children in the radiology department. Short-term effects for the pediatric patient include pain, anxiety, crying, and lack of cooperation. The patient's parents also may experience short-term effects, including elevated anxiety and increased heart rate and blood pressure. Potential long-term effects include post-traumatic stress syndrome; fear; changes in pain perception and coping effectiveness; avoidance of medical care; and trypanophobia. To identify common sources of stress in pediatric radiology, investigate short-and long-term effects of stressful and invasive medical procedures in pediatric patients, and compare different strategies used in radiology departments to minimize stress in pediatric patients. Searches were conducted using specific databases to locate literature related to stress in pediatric radiology. Articles were included that addressed at least 1 of the following topics: common sources of stress in the pediatric radiology department, the short-or long-term effects of a stressful and invasive medical procedure, or a stress-minimizing strategy used in a pediatric medical environment. Consistency of care can be improved among the different radiology modalities by providing similar and effective strategies to minimize stress, including interventions such as parental involvement, preprocedural preparation, distraction, sedation, use of a child-life specialist, hypnosis, protecting the child's privacy, and positive reinforcement. Future research is needed to identify additional ways to improve the consistency for care of pediatric patients in the radiology department and to investigate stress management in areas such as pediatric vascular interventional radiology, cardiac catheterization, emergency/trauma imaging, and gastrointestinal procedures.

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