



INSTRUCTING PATIENTS WITH DIETRY REQUIREMENTS POLICY (FASTING POLICY)

Version 1.3

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1. AIM

The aim of this policy is to outline the need for careful consideration of patients whom have special dietary requirements.

2. INTRODUCTION

This policy specifically looks at the need for ultrasound providers to ask patients to fill their bladders and fast for four hours prior to their appointment.

Patients awaiting general ultrasound scans for Abdomen, Pelvis and Renal Tract are generally (dependent on the clinical indication) asked to prepare for the procedure. This is done by either filling their bladder with 1-2 pints of water, fasting (no food/milky or sugary drinks) for Six hours prior to their appointment or both.

There are, however, risks associated with patients fasting, where they may be diabetic or hypoglycaemic. In addition, elderly or young patients may find filling their bladder extremely difficult too so this needs to be addressed with great deal of consideration when advising the patient.

Why do patients need to fast?

Patients undergoing abdominal ultrasound scans need to fast so the sonographer can better look at the Gallbladder and Biliary tree. When you eat the gallbladder releases bile to break down the food in your stomach, and as it is releasing bile it contracts and is no longer easily visualised using ultrasound. When you fast, your gallbladder fills up with bile and then is much more clearly defined during the scan.

Many patients referred for upper abdominal scans will have pain and bloating – both possibly associated with the gallbladder, although gallstones may not be the cause it is routine clinical practice to ensure we see the gallbladder to rule it out.

Why do patients need to fill their bladder?

Patients undergoing a renal tract or pelvic scan are asked to fill their bladder for a few reasons. A renal tract ultrasound looks at your kidneys and bladder. If a patient is experiencing bladder symptoms, the bladder needs to be clearly visualised to look at the shape, outline and contents, to exclude any abnormality or pathology. 1-2 pints of water an hour in advance is advised to ensure the bladder is full enough to see.

When undergoing a pelvic ultrasound, the bladder needs to be full to ensure the anatomy surrounding it is 'pushed' forward and clearly visible. Organs such as the womb and ovaries or prostate are visualised with greater clarity with a full bladder.

3. ROLES AND RESPONSIBILITIES

It is the responsibility of the clinic management team to ensure this policy has been read and understood by all members of staff involved in booking and appointing patients. It is then the responsibility of the staff member to ensure they abide by this policy and procedure.

4. EQUIPMENT

Patient information leaflet.

5. HAZARDS and SAFETY

There is a risk to patient health if we do not abide by this policy and procedure, specifically diabetic patients.

6. PROCEDURE / SYSTEMS

Our company receive referral forms stating the clinical indication for the scan. In the majority of cases we do not receive information on the previous medical history of the patient. So, we would not always be aware if a patient is diabetic, hypoglycaemic or has difficulty retaining urine.

FASTING PROCEDURE:

When booking an appointment on the telephone, where patients are given preparation by the booking team, patients must be asked to fast for four hours prior to their appointment.

This means no:

Food, milky or fizzy/sugary drinks, chewing gum or cigarettes (As chewing gum and cigarettes can make them gassy)

When asking a patient to fast you need to state:

If they have any concerns i.e.: they are diabetic or hypoglycaemic they need to talk to their GP or practice nurse in advance of the appointment to ensure it is okay. (this is also stated in the patient information leaflet we send with letters)

Medication can be taken as normal. If a patient does advise they are diabetic. Advise they bring a snack to have after their scan.

BLADDER FILLING PROCEDURE:

When booking an appointment on the telephone patients need to be asked to fill their bladder with 1-2 Pints of water 1 hour prior to their appointment time.

Often patients may express concern of their capability due to poor bladder control, or on behalf of an Individual who may not be able to fill and hold it.

In these circumstances patients must be advised:

If they would like to drink as much as they are able, they are welcome to fill more when they arrive from the water cooler we have in reception, so they are not traveling on a full bladder and can use our toilets if required.

Under no circumstances do we want to cause discomfort to our patients and cause an 'accident'. If a patient informs you they are desperate and absolutely cannot wait. Advise them to empty their bladder but to be aware they will have to wait and drink water to fill it again.

7 QUALITY CONTROL and AUDIT

This policy is subject to amendment and review every 12 months or sooner if required.

