The following pages contain a range of examples and scripts to assist in development of local communication and policies for ascertaining pregnancy status in young female patients under 16 years.

Wording and information suggestions for preoperative material and consent (Drafted by Mr Rob Wheeler, Chair, Ethics Committee RCPCH and other members of the committee).

The documentation when adapted for local use will need to be clear whether the local policy applies to all females over a certain age (e.g., 12 years) or just those who have started their periods.

**Selective testing. Information for young women aged 12-16 years. Suggested points for inclusion in face to face enquiry/testing**

- It is important that we know whether there is any chance that you could be pregnant. This is because some procedures may be harmful to a pregnant patient and her unborn baby.
- If we know about a pregnancy there may be a different way to do the test or operation that avoids these risks.

Questions you may be asked:

- Have you started having sex? (might need to clarify what they understand by sex)
- Have you started your periods?
- If you have started your periods, have you had sex since your last period?
- Can you remember when your last period started?
- Are you taking the contraceptive pill?

We appreciate that these are sensitive questions which you may prefer to discuss with a (female) member of staff in private.

If we are concerned that there is a possibility you could be pregnant we will ask you to agree to have a pregnancy test and provide a sample of urine. You have the right to refuse permission.

We would encourage you to discuss this with your parents but if you don't wish to, we will respect your privacy in agreeing to the test and giving you the result, providing we assess that you are ‘competent’. This is a legal term which means that you understand all the issues and can make decisions without your parent’s involvement.

If consent is refused, the procedure may have to be postponed or cancelled and we will then discuss the best way to proceed.

**Selective pregnancy testing before elective procedures: information for parents and young female patients aged 12-16 years**

It is very important to ensure that any female patient having this procedure is not pregnant. This is
because a pregnant patient and her unborn baby may be harmed by the procedure. All female patients of child bearing age will be asked whether they could be pregnant. This includes young female patients aged 12–16 years to avoid the risk of harm to the very small/tiny number of pregnancies which may occur in this age group.

Those at risk of pregnancy will be asked to give consent to a pregnancy test by providing a sample of urine. Young female patients aged 12–16 years may be seen in private without their parents if they wish. Providing they are assessed as ‘Gillick competent’, a legal term which means that they have sufficient understanding of what is involved and its implications, they can give consent to a pregnancy test if it is considered necessary. They would be encouraged to share information with their parents but will be treated in confidence if they do not wish to.

If we are concerned following discussion with a patient or parents, that there may be a risk of pregnancy but consent for a pregnancy test is refused, we will discuss the safest way of proceeding.

**Routine pregnancy testing before specific elective procedures: information for parents and young female patients aged 12-16 years**

It is very important to ensure that any female patient having this procedure is not pregnant. This is because a pregnant patient and her unborn baby may be harmed by the procedure.

All female patients aged 12-16 years or their parents will be asked to give consent to providing a sample of urine for a pregnancy test. Although there may only be a very small/tiny number of pregnancies in this age group, we believe that testing all patients is the most effective way of avoiding the risk of harm.

If a pregnancy test is refused we will discuss the safest way of proceeding but we hope you will recognise the reason for our decision. Your understanding will be greatly appreciated.

**Selective pregnancy testing for procedures undertaken in an emergency: information for parents and young female patients aged 12-16 years.**

It is very important that all female patients of childbearing age do not undergo procedures which could cause harm to themselves or an unborn baby if they are pregnant. When patients are admitted as an emergency, it may not be possible at first to predict which procedures will be necessary for diagnosis and treatment.

All female patients of child bearing age will be asked whether they could be pregnant if they might need a procedure which could cause harm to a pregnancy. This includes young female patients aged 12–16 years to avoid the risk of harm to the very small/tiny number of pregnancies which may occur in this age group.

Those at risk of pregnancy will be asked to give consent to a pregnancy test by providing a sample of urine. Young female patients aged 12–16 years may be seen in private without their parents if they wish. Providing they are assessed as ‘Gillick competent’, a legal term which means that they have sufficient understanding of what is involved and its implications, they can give consent to a pregnancy test if it is considered necessary. They would be encouraged to share information with their parents but will be treated in confidence if they do not wish to.

If we are concerned following discussion with a patient or their parents, that there may be a risk of
pregnancy but consent for a pregnancy test is refused, we will discuss the safest way of proceeding.

We are aware of how stressful emergency admissions can be for patients and their relatives and hope you appreciate the reasons for questioning young female patients about the possibility of pregnancy. Your understanding will be greatly appreciated.

**Routine pregnancy testing for emergency procedures: information for parents and young female patients aged 12-16 years.**

All female patients aged 12–16 years, who are admitted for anaesthesia and surgery are routinely tested for pregnancy when undergoing certain procedures.

This is because pregnant patients and/or their unborn babies can be harmed by certain operations, anaesthetic drugs and some scans and X-rays. We believe that, although there may only be a very small/tiny number of pregnancies in this age group, testing all patients is the most effective way of avoiding the risk of harm.

It means that, providing consent is given, we will test a sample of urine of all female patients aged 12–16 years before the procedure is undertaken. If consent for a pregnancy test is refused, we will then discuss the safest way of dealing with the emergency.

We are aware of the how stressful emergency admissions can be for patients and their relatives and we hope you recognise the reasons for requesting a pregnancy test. Your understanding will be greatly appreciated.

**Pregnancy testing before an operation or investigation: suggested wording for information for young female patients**

When you need an operation or investigation that needs us to put you to sleep for a little while (anaesthetised), we will have to ask you lots of questions about your health, any medicines you might be taking and any allergies you have. This is so we can make sure that you will be safe in hospital. We also need to be sure that you are not pregnant, as being put to sleep or having an operation is not a good idea during pregnancy. This is particularly important if you will also need X-rays to be taken while you are anaesthetised.

Very soon after becoming pregnant (a woman’s period may only be a week or two late), there are many changes happening within the body. How drugs affect the body, and how the body deals with drugs can be different during pregnancy. Some drugs that are sometimes used during anaesthesia may damage an unborn baby and are best avoided. There is also a chance of miscarriage (losing the baby) if a woman has an operation or investigation during early pregnancy.

To check about pregnancy, we need to ask you some questions. These questions can feel quite embarrassing, so you may want to talk about them in private. You should be offered this option. We will need to ask you if you have started your periods, when was the date of your last period, and if there is any possibility that you could be pregnant. This will involve asking if you have had sex and we have to ask this because some girls begin to have relationships with boys earlier than others.

If there is any possibility that you could be pregnant, we will ask you if it is OK for us to test a sample of your urine. For most young people, the test will be negative, showing that they are not pregnant, and the operation can go ahead as planned. For a small number of young people, the test may be positive
and we would then have to think very carefully about the best way to proceed and to make sure the right care was organised to help with the pregnancy.

For some operations, it is usual to check a urine pregnancy test for everyone. You have the right to refuse to allow the pregnancy test, but we would want to discuss the reasons why in order to help us to make the best decisions on how to proceed with your care and keep you safe.