From Procedure to Personal Impact: A personal case study and reflection navigating iatrogenic complications and asks the question- are we really ready for Advanced and Consultant practice?

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Are we really ready for when things go wrong?

(Advanced and Consultant practice)

Background:

- Second Victim Syndrome (SVS) describes the emotional or psychological distress (and physical symptoms) healthcare professionals experience following an adverse event, error, or near miss[1].
- While investigated in other professional groups[2], SVS is underexplored in sonography practitioners performing interventional procedures, despite their emerging increased clinical responsibility and procedural autonomy.
- Complications can occur, regardless of adherence to best practice and clinical skill level[3].

Aim: To present a reflective case study illustrating the personal and professional impact of SVS on an interventional sonographer and to discuss implications for staff wellbeing, training and organisational cultures.

Context: This case study uses a validated reflective tool[4] to learn from my experience as a Trainee Consultant Radiographer Sonographer during a procedure that resulted in a significant and unexpected adverse outcome for the patient. The event prompted profound emotional distress and then professional reflection, which will be explored in this case study, while patient confidentiality is fully maintained.

Description:

- Serious unexpected complication during an ultrasound interventional procedure
- The situation was managed safely and appropriately, but the patient had life-changing outcomes
- I drafted my resignation the same evening as the event, as I did not feel capable of fulfilling a role that required managing this level of risk or future potential complications
- I avoided similar procedures for several weeks, and when re-starting them required extra support to feel confident

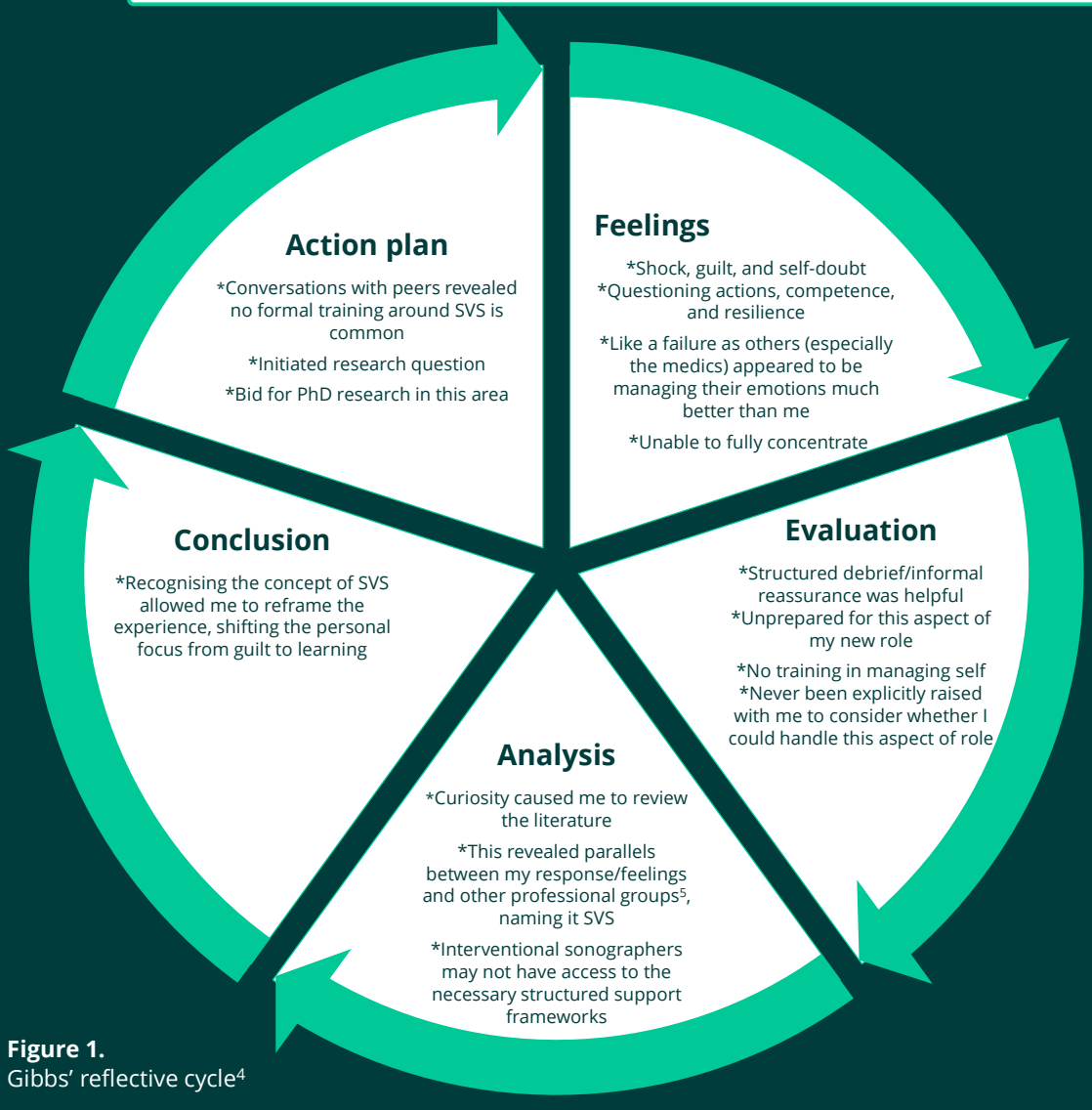

Figure 1.
Gibbs' reflective cycle[4]

Discussion:

- Highlights radiographers are at risk of SVS emotional sequalae
- Literature demonstrates SVS typically follows pattern of shock, self-blame, isolation, learning OR withdrawal[6]
- Support/organisational response affects recovery[7]
- SVS can lead to burnout, attrition and potentially compromise patient safety[7]

Conclusion:

- Case illustrates hidden professional dimension of interventional imaging for sonographers
- Support for SVS safeguards sonographer wellbeing and patient safety
- Addressing SVS should form part of sonography education
- Embedding resilience support could improve workforce sustainability

Scan for full references