

Policies, Procedures, Guidelines and Protocols

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1	Jul 2013	Title changed from Wound Photography Guidelines (Feb 2011) and additional guidance incorporated covering the wider topic of clinical photography
2	Mar 2016	Review of policy: update roles to reflect organisational changes. Addition of new guidance on use of mobile smartphones for taking and sending of wound management photographs
3	Jan 2019	Review of policy, update roles and include guidance on preparing and uploading photographs to the RiO Electronic Record Keeping system
4	Sep 2023	Review of guidelines and updated with additional guidance from the Practical Recommendations for use of Digital Images in Wound Care, National Wound Care Strategy

Clinical Photography Guidelines

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1 Introduction

Clinical photography and video recordings are a valuable part of assessing and evidencing a patient's condition. Specifically in Tissue Viability, the digital photography of a patient's wounds is an essential technique used to assess healing. The value of clinical photography in wound management lies in the ability to achieve repeated views over time, adding objective visual confirmation to the written record and can provide evidence of rates of healing, capturing therapeutic efficacy. They are also beneficial in Allied Health Professional (AHP) areas of practice to demonstrate improvements of a particular condition over time.

Clinical photography should be a routine part of wound documentation to compliment and support the clinical data recorded in the patient's Electronic Patient Record (EPR). Clinical photographs are confidential medical records which may contain sensitive personal information. They should be treated with the same care as written/electronic medical notes/records.

2 Purpose

To give guidance to all staff to ensure that clinical photography undertaken to support the care of a patient is carried out in a safe, secure, and confidential means. These guidelines primarily cover guidance on clinical photography relating to digital images supporting the wound management process, but the basic concepts covered are still appropriate to any other type of clinical photography, both stills and video.

3 Definitions

For the purposes of these guidelines the following definitions apply:

3.1 Clinical Photography

Clinical photography is defined as stills or video photography undertaken by clinical staff to support the care and treatment of a patient.

3.2 Medical Photography

Medical photography is defined as stills or moving images taken by professional medical photographers. Guidance on this type of photography is covered by the medical photographer's professional codes of practice (e.g., Institute of Medical Illustrators National Guidelines).

3.3 Recordings

The term "recording" (or "recordings") is used to refer to photography (either conventional or digital) and video recordings (either conventional or digital). It refers to original and/or copies of images. It does not include pathology slides containing human tissue or Close Circuit Television (CCTV) recordings of public areas on the Organisation's premises.

4 Duties

These guidelines apply to all staff employed by Shropshire Community Health NHS Trust (SCHT) when undertaking clinical photography.

4.1 Tissue Viability Team

Tissue Viability Team is responsible for:

- a) giving advice and guidance to staff on the use of wound photography in relation to Tissue Viability
- b) making a clinical decision whether digital photographs need to be retained for a specific period of time
- c) reviewing the Clinical Photography Guidelines

4.2 Clinical Staff

All clinical staff are responsible for:

- a) assessing when a clinical photograph is required
- b) obtaining and recording appropriate informed consent from the patient
- c) ensuring matters of privacy, dignity and safeguarding are practiced in accordance with existing Trust standards and professional bodies' principles. In particular consideration should be taken when sending photographs of intimate/sensitive areas of a patient's body.
- d) ensuring images are sharp, clear, and well formatted (centred, at an appropriate angle) free of extraneous detail and with as plain a background as possible. The photograph should contain a means of identifying the patient, e.g., scale with a patient identifier on it.
- e) uploading relevant clinical photographs to the patient's electronic record (RiO) with associated progress note
- f) ensuring that all reasonable steps are taken to ensure the confidentiality and security of the photographs. Where there is a need to send a photograph to another healthcare professional, the Trust guidelines in the secure sending of images must be adhered to

5 Consent and Confidentiality

It is the responsibility of the individual taking the clinical photograph to ensure that informed consent is obtained for digital imaging that includes where and how the images will be used.

Photographic and video recordings which are made for treating or assessing a patient must not be used for any purpose other than the patient's care or the audit of that care, without the express informed consent of the patient or a person with parental responsibility for the patient. For full guidance on consent refer to the Trust's *Consent to Examination and Treatment Policy*.

A key point relating to clinical photography is to ensure informed consent is obtained from patients prior to taking any clinical photographs.

Verbal consent is acceptable if the photograph is part of the patient's treatment or care record. It should be clearly documented in the patient's clinical record that the reason for the photograph has been discussed and the patient has given informed consent. If the circumstances require, a consent form can be completed (see below).

If the photograph is for a purpose other than the person's treatment or care (e.g., education or publication as part of an academic paper) written consent must be obtained for that specific purpose using the appropriate consent form which are available as part of the Trust's clinical documentation (see Appendix 1: *Consent*

Form 5, Consent to photograph/Video recording and Appendix 2: Wound Photography Consent Form for examples of these forms).

If a person does not have the capacity to decide about their treatment and they have not appointed a lasting power of attorney (LPA), digital imaging can happen if the healthcare professionals believe it is in the person's best interests. This should be noted in the patient's record.

Remember, clinical photographs are confidential medical records which may contain sensitive personal information. They should be treated with the same care as written/electronic medical notes.

6 Clinical Indications for use of Clinical Photography

Clinical photography should only be taken if necessary, for care. This is particularly relevant if the wound is located on or close to a private and personal part of the body.

The following are suggested indications for clinical photography:

- As part of initial wound assessment
- To monitor for healing progress
- To confirm healing (usually as part of a research study)
- On transfer to another health or care provider service to support interdisciplinary care
- To record notable changes which could have implications for treatment (e.g., Category 1 pressure damage, wound improvement, deterioration, pre-or post-debridement)
- Prior to starting new treatment
- To support remote assessment and care
- As part of documentation for safeguarding, incident reporting, or pressure ulcer incidence and prevalence surveillance
- As part of a strategy for surgical site infection surveillance
- To support patient engagement strategies (e.g., to allow a patient to see a wound and/or to enable self-monitoring of healing)
- To support education for patients, carers, and clinicians
- Medico-legal purposes

Clinical photography should be a standard part of wound assessment but not undertaken so frequently that it places unnecessary burden on patients/carers or health and care professionals.

All Pressure Ulcers Category 3, 4, Unstageable and Deep Tissue Injuries (DTI) and cavity wounds should as standard have clinical images taken at least weekly.

Clinical photography should be completed as part of the wound dressing procedure before a dressing is applied or after a dressing is removed. Removing a dressing for the sole purpose of taking an image should be avoided.

7 Privacy & Dignity

Privacy and dignity should be always protected and matters of privacy and dignity should be practiced in accordance with existing Trust standards and professional governing bodies' principles. The patient should be afforded privacy throughout and care must be sensitive to and respectful of dignity, ethnicity, and religious beliefs.

- Where possible, cover private and personal body parts (e.g., genitals, breasts) and identifiable features (such as face, tattoos, or birthmarks) and consider editing/cropping of photograph where this is not possible.
- Care should be taken to ensure that any editing does not render the photograph unfit for purpose
- The area surrounding the focus of the photograph should be clean (unless this information is needed for legal or safeguarding purposes)
- Identification information should be contained within the photograph. If taken on a secure Trust device (i.e. requires password/PIN to access) then the patient identification could be a patient label next to a wound measuring guide/scale. If taken on a non-secure device e.g. digital camera the patient information should be restricted to patient initials and last four numbers of their NHS number, rather than name
- The offer and use of a chaperone (or companion present) should be offered where possible and documented

8 Video Recording

The concepts of consent, confidentiality and quality relating to stills photography apply to any video photography but any clinician undertaking video clinical photography must consider some additional aspects.

8.1 Individual Video Sessions

Where there is a requirement to record aspects of a patient's care, the reason for the recording must be discussed beforehand and informed consent obtained as to whether the recording will be:

1. retained as part of the patient's record or,
2. as a one-off recording to access a particular aspect of their treatment and deleted after the documenting of the findings in the patient's record and completion of the process.

Note: If the recording is to be kept as part of the patient record it must be documented in the patient's record and appropriately labelled and included securely within the record. If the recording cannot be kept within the record the secure location of the recording must be clearly documented in the patient record.

8.2 Group Video Sessions

In some clinical situations it may be required to video a patient's interaction with other patients/people in a group environment. In these situations informed consent of all those involved in that group session must be obtained and the reason for the recording clearly documented. In these cases it is most likely that the recordings will be reviewed by the clinicians after the session in order to make detailed notes. The recording should be deleted once that process is complete. If there is a

requirement to retain the recording this must be agreed by all involved in the group session and the recording stored in a secure location and documented in the patient's records.

9 Photographic Equipment

Only Trust specific devices should be used. The practitioner should also ensure that the correct date and time is set on the device. The device must be cleaned with appropriate multi-surface wipes to prevent cross infection between patients.

Where digital devices such as Tablets or Smartphones are used, they must have the access security, i.e., use of password/PIN, enabled.

10 Lighting and Background

It is important to consider the lighting available to ensure sufficient detail of the wound can be recorded in the final image. The background should be plain and neutral.

10.1 Position of the Patient

It may be easier to photograph the patient lying down because some wounds (particularly those on the buttocks) distort easily. Additionally, the natural curvature of the patient's body can also cause a problem - especially where wounds extend around a limb e.g., pressure ulcers on a heel. Consider repositioning the patient in order to get a better view of the wound. It may be helpful to photograph such wounds in a "relaxed" position and then again with the assistance of a helper. The patient should be in a comfortable position and the camera/device should be held perpendicular to the wound. Avoid including any hands in the image wherever possible.

10.2 Scale

Disposable paper rulers must be used to give an impression of scale and the extent of a wound. It should be noted that wound measurement using digital photography is not sufficient enough to be used as a basis for accurate measuring of wounds, see Appendix 4: *Wound Measuring Guide*.

for single use only															
	Patient's Identification: _____ Date: ____ / ____ / ____ (Initials and last four of their NHS Number)														
	<h2 style="margin: 0;">Wound Measuring Guide</h2>														
	<small>Version 2 - Feb</small>														

11 Downloading Images from a Digital Camera/Device to a Computer

Digital images should be transferred from the device to a Trust computer as soon as possible and deleted from the camera/device on completion of transfer and checking of the image. In these situations, you can either connect to the computer via the device USB cable or by directly using the camera/devices smart media/memory card (e.g., SD Card) and the card reader installed in your computer.

In order to ensure the file size of these images are able to be viewed easily from within the patient's RiO a Quick Reference guide has been produced to guide staff through the process of resizing and saving the image. For further details see Appendix 5 *Saving and Uploading Photographs/Images to RiO*.

It is good practice to download the image to a folder you will be able to identify when you need to retrieve/upload the image later e.g., Download Folder or Pictures Folder and create a folder specific to the patient. The folder/filename conventions to be used should be LAST NAME (in uppercase), First Name, and NHS Number e.g. BROWNE Sam 123 456 7890. For individual images you can number them 001, 002, 003 etc. By using three digits the images will be filed electronically in that order.

Name
BROWNE Sam 123 456 7890 - Image 001.JPG
BROWNE Sam 123 456 7890 - Image 002.JPG
BROWNE Sam 123 456 7890 - Image 003.JPG

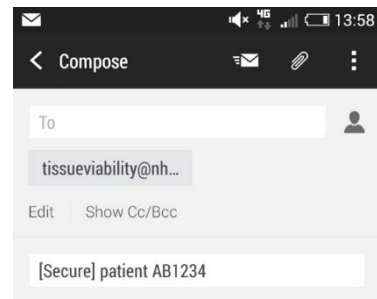
Once the images have been uploaded to the patient's electronic RiO record and have been checked/viewed the folder and images on your computer should be deleted.

Note: some teams may use a team networked shared folder to save images so they can be accessed by others within their team and can be involved in the uploading process. As above, images should be deleted once they have been uploaded to the patient's electronic record and have been checked/viewed in the patient's record.

12 Sending of Wound Photographs/Images from a Smartphone

Some circumstances may require that the images are sent directly from your Smartphone for specialist advice. Images can be sent securely via e-mail using the Trust's mobile smartphones.

When sending the image by e-mail via these mobile smartphones you must encrypt a message by including in the message header [Secure] (in the square brackets).



See Appendix 6 for simple generic guidance on sending a photograph via a Trust's Smartphone. Please note as there a number of types of smartphone in use within the Trust this appendix is for basic guidance only. Refer to manufacturer's instruction for guidance on a specific type of smartphone.

13 Printed Photographs

If you are dealing with a printed photograph, you should have the patient's First Name, Last Name, NHS number and Date of Birth printed onto the photograph and signed by the clinician, including their printed name, designation, date and time. These photographs should be scanned and uploaded to the patient's electronic record and the original can then be confidentially destroyed once the image has been checked in the patient's electronic record.

14 Uploading Images to the Patient's Electronic Patient Record

Photographs/Images should be uploaded to the patient's EPR in the same way as any other document being uploaded. For further information please refer to specific

guidance for the EPR system being used e.g. the RiO Quick Reference Guide "[Saving and Uploading Photos to Rio](#)" and the "[RiO Scanning and Uploading of Documents briefing paper](#)". These are available in the Trust's SharePoint portal under the [Rio User Guidance Library](#).

15 Uploading Images to the Datix Incident Reporting System

When a digital image is required to support an incident reported on the Trust's Incident Reporting system Datix it can be uploaded to be included in the actual incident report. This is stored within a secure environment and will mean it is available to anyone involved in investigating the incident e.g., carrying out a Root Cause analysis. Instructions can be found in Appendix 7: *Attaching a Photograph to an Incident Report in Datix*.

16 Storage of the Photographs/Images

Patient photographs/images must be kept in the patient's records so they are available to others involved in the care and treatment of that patient. Most services/teams will have access to the patient's Electronic Patient Record and this should be used as the primary storage of these images. If services/Teams do not have access to the patient's EPR then the images should be stored in a secure folder on a Trust's network server location.

17 Disposal

Once the photograph/image has been uploaded to the patient's record and viewed from within that record, the original image can be securely deleted. The photograph/image is then part of that patient's record.

The patient record should be retained for the period of time appropriate to the patient/specialty. Refer to the Trust's Records Management Policy, Retention Schedule section for more details.

18 Advice and Guidance

For any advice/guidance regarding wound care photography please contact the Tissue Viability Service on 01952 670925 or email: shropcom.tissueviability@nhs.net

19 Consultation

In the development of this guidance the following have been included in the consultation process:

- Tissue Viability Team
- Clinical Services Manager
- Locality Lead
- Clinical Lead for Quality
- Information Governance Team

20 Dissemination and Implementation

These guidelines will be disseminated to all relevant clinical teams by:

- Managers informed via DATIX system who then confirm they have disseminated to staff as appropriate.

- Staff via Team Brief.
- Published to the Staff Zone of the Trust website.

Training and awareness raising will be included as part of Tissue Viability assessments and study sessions.

21 Monitoring Compliance

Tissue Viability Service Lead and team leaders will monitor compliance of these guidelines by:

- a) Clinical audits, including clinical record keeping audit and wound care audit.
- b) Responding to any incidents reported on the Trust incident reporting system and ensuring appropriate lessons learnt are identified and action plans implemented and completed.
- c) Monitor feedback from clinical staff and that any concerns raised are addressed.

22 References

- Institute of Medical Illustrators (IMI) National Guidelines (March 2007) Clinical Photography in Wound Management
- Photography in wound assessment: Journal of Wound Care 4:7, Bellamy K. 1995
- Telemedicine: an innovative way of managing patients with leg ulcers, Samad, A. et al. British Journal of Nursing; 11.6, (Supl) S38-S52 (March 2002)
- Digital imaging versus conventional contact tracing for the objective measurement of venous leg ulcers, Samad, A. et al (2002a). Journal of Wound Care; 11: 4, 137-140.
- Practical Recommendations for the use of Digital Images in Wound Care – National Wound Care Strategy Programme (2021)

23 Associated Documents

The following Trust policies should be read in conjunction with these guidelines:

- Consent to Examination or Treatment Policy
- Confidentiality Code of Practice
- Information Security Policy
- Incident Reporting Policy
- Information Governance Policy (Data Protection section)
- Records Management Policy (which includes Records Retention, Archiving and Disposal guidance)
- Clinical Record Keeping Policy

These policies can be found in the Policy section of the Trust's website:

<http://www.shropscommunityhealth.nhs.uk/rte.asp?id=10667>

Appendix 1: Consent to photograph/Video recording

First Name: _____
Last Name: _____
Date of Birth: _____
NHS Number: _ _ _ _ _

Shropshire Community Health 
NHS Trust

Consent Form 5**Consent to photograph
/video recording**

I give my permission for a photograph*/video* of:

Name: **Date of Birth:**

Address:

.....

.....

Telephone Number:

to be taken and used for assessment*/examination*/treatment*/display*/publication*/
/training*/research* purpose(s) (**Please delete as appropriate*).

The use of this photograph/video has been fully explained to me.

I consent for this photograph/video to be used indefinitely*/or until
expiry date: (**Please delete as appropriate*).

I understand that when the photograph/video reaches its expiry date it will be
destroyed and no longer used.

However I understand that it may not be possible to destroy or withdraw those
recordings that I have consented to be used and held in the public domain.

When the photograph/video is kept as part of the clinical record, it will be stored in
a secure area in accordance with the Trust's Clinical Record Keeping Policy.

I am the Patient*/Person with parental responsibility* (**Please delete as
appropriate*).

Signature: **Date:**

Name: (PRINT)

**Statement of health professional (to be filled in by health professional
photographing or videoing the patient)**

I have explained each individual section outlined in the Trust's Policy for Consent to
Examination or Treatment to the patient and they understand the whole procedure.

Signature of health professional

Signature: **Date:**

Name: (PRINT) **Job title:**

TO BE RETAINED IN THE PATIENT'S NOTES

Appendix 2: Wound Photography Consent Form

First Name: _____
Last Name: _____
Date of Birth: _____
NHS Number: _ _ _ _ _

Shropshire Community Health 
NHS Trust

Wound Photography Consent Form

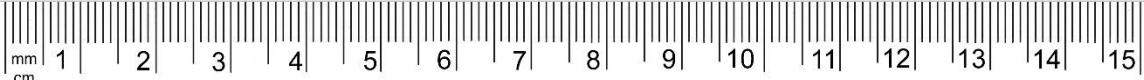
(To be completed prior to photographing each wound care episode)

Wound Site(s):	
Statement of Patient	
1. The reason for taking a photograph has been explained:	Yes <input type="checkbox"/> / No <input type="checkbox"/>
2. I agree to a photographic record as part of the Community Nursing Care Plan:	Yes <input type="checkbox"/> / No <input type="checkbox"/>
3. I give permission for the photographs to be used for educational purposes and understand my name will not be used.	Yes <input type="checkbox"/> / No <input type="checkbox"/>
4. I am aware that the photographs are the property of Shropshire Community Health NHS Trust.	Yes <input type="checkbox"/> / No <input type="checkbox"/>
I am the Patient*/Person with parental responsibility* (*delete as appropriate)	
Signature:	Date:
Name: (PRINT)	
Statement of Healthcare Professional	
I have explained the reason for taking a photograph of the wound(s) and that this will be shared with healthcare professionals involved in the care of the patient.	
Signature:	Date:
Name: (PRINT)	Designation:

TO BE RETAINED IN THE PATIENT'S NOTES

Appendix 3: Wound Measuring Guide

for single use only




mm
cm

Patient's Identification: _____ Date: ____ / ____ / ____
(Initials and last four of their NHS Number)

Wound Measuring Guide

Version 2 - Feb 2015

for single use only




mm
cm

Patient's Identification: _____ Date: ____ / ____ / ____
(Initials and last four of their NHS Number)

Wound Measuring Guide

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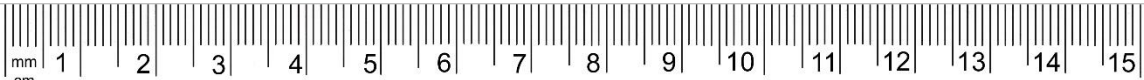
mm
cm

Patient's Identification: _____ Date: ____ / ____ / ____
(Initials and last four of their NHS Number)

Wound Measuring Guide

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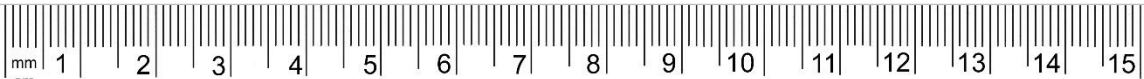
mm
cm

Patient's Identification: _____ Date: ____ / ____ / ____
(Initials and last four of their NHS Number)

Wound Measuring Guide

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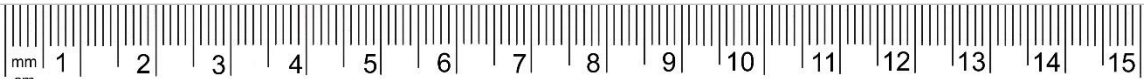
mm
cm

Patient's Identification: _____ Date: ____ / ____ / ____
(Initials and last four of their NHS Number)

Wound Measuring Guide

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mm
cm

Patient's Identification: _____ Date: ____ / ____ / ____
(Initials and last four of their NHS Number)

Wound Measuring Guide

Version 2 - Feb 2015

Appendix 4: Simplified recommendations for taking clinical photographs

Preparation for taking images of wounds

1. Explain to the patient why you wish to take a digital image and seek their verbal consent. Document consent in their notes.
2. Before starting, ensure everything necessary is to hand and if assistance is needed, there are sufficient staff.
3. Ensure the imaging device is functioning correctly and has sufficient power and storage capacity/memory.
4. Make sure the patient is in a comfortable position, with the entire wound visible but private and personal body parts (e.g., genitals, breasts) and identifiable features (such as face, tattoos, or birthmarks) covered (If there are previous images, seek to replicate the previous position).
5. Where possible, use an uncluttered pale or neutral background (ideally non-reflective and neutral grey, or surgical drape or sterile sheet with no personal identifying items or other people visible. Ambient (natural) light is ideal. Avoid extremes of light or dark and minimise shadows. If flash is used, document use.
6. Clean your hands, remove the dressing, and cleanse the wound, surrounding skin and any skin or clothing that will be visible in the digital image (unless this is needed for legal or safeguarding purposes).
7. Decide how many images will be needed. (The recommended minimum is an image of the wound plus an image of the site of the wound e.g., leg, abdomen).

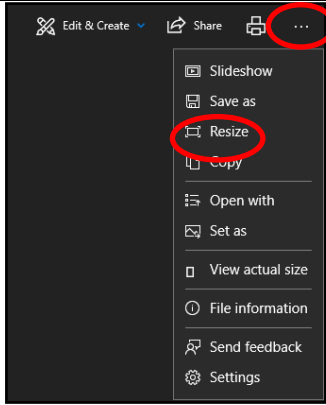
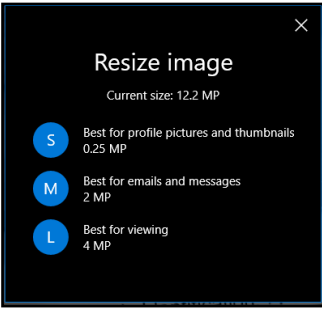
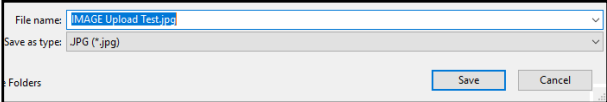
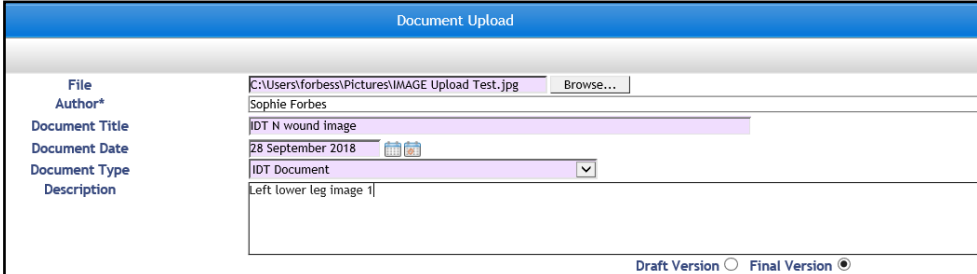
Instructions for taking images of wounds

1. Use a single-use disposable measuring scale, or an auto-scale (if available on the device).
2. If the digital imaging device does not automatically immediately upload the image to the patient's digital clinical record, a patient identifier (e.g., the patient's initials and last four digits of their NHS number) should be visible either within the image or at the beginning and end of the image sequence.
3. Scales with colour control patch to take account of variation of skin tones are recommended.
4. Aim to take a clear, close-up photograph of the wound. Hold the camera or device at a distance so that you can photograph the whole wound if possible:
 - a. If the wound is long, you may need to take more than one image to capture the whole wound.
 - b. For some sites (e.g., the heel) It may be easier to use a mirror to view the wound (do not use the camera flash if a mirror is used).
 - c. Gentle tension on excess body tissue or the separation of skin folds may be necessary to reveal the depth of a cavity, or you may need to lift the leg to photograph the heel or separate toes.

5. Where possible, point the camera or device directly at the wound (i.e., straight in front of the wound and not at an angle).
6. Allow the device to focus on its own (auto-focus). If needed, focus manually. This can usually be done by tapping the screen or pressing down the button slightly. You may need to move the camera or device further away if it cannot focus.
7. Check the image(s) on the display screen. It should be in focus (unblurred), well-lit and ideally with no shadows over the wound. You can try taking a picture with and without the flash (if available) to see what looks best. It is very important that the photo does not show any identifiable features, such as the patient's face, tattoos etc.). If you need to, take another photo until you are happy that you have the clearest photo possible.
8. Delete unsuccessful photos as you go along so you are only left with the ones that you want.
9. Decontaminate your hands and equipment before and after taking the photos.

Appendix 5: Saving and Uploading Photographs/Images to RiO

Guidance for saving and uploading clinical photographs/images to RiO

RiO Screen	Instructions
	<p>Once you have taken the image on your mobile, either email it securely (using your NHS mail) or plug your phone into your laptop/PC and download it.</p> <p>Locate the image and double click on it to open in the default photo viewer.</p> <p>On the top right-hand side click the ... and select Resize.</p>
	<p>Select/Click on the M option to save as a medium size image.</p>
	<p>The dialog box will open for you to save the image. Select the appropriate secure drive and folder for your image to be saved, update the file name in line with the Trust naming conventions (SURNAME first name NHS number etc) and save.</p>
	

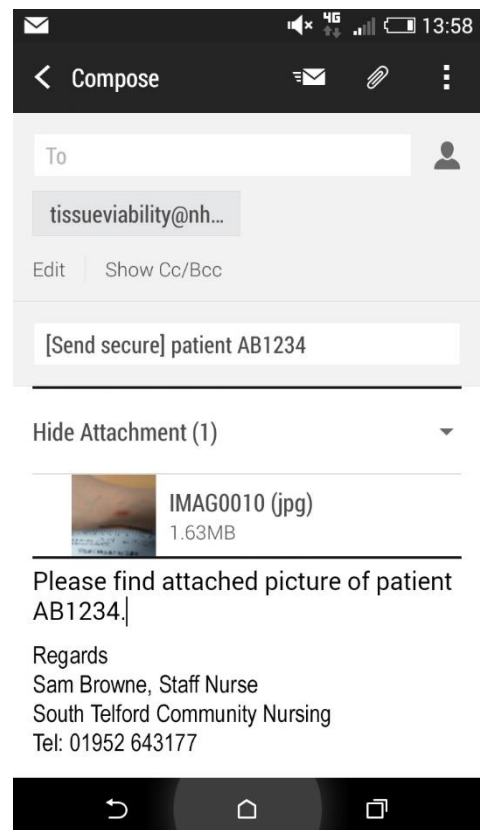
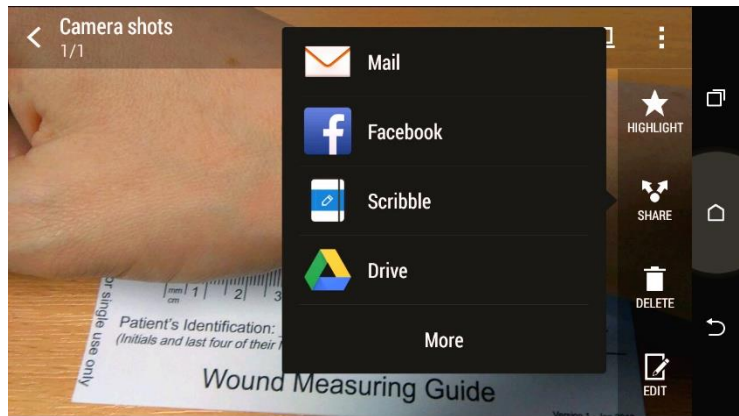
Open RiO and locate the patient's record.

Select **Document Upload** and complete the details for the image, please use the description box to add specific detail to assist others in viewing and opening the correct image then upload to the record.

The image will now be saved in **Document View** ready to be viewed. If you need to enlarge or reduce the image when viewing within RiO, use the CTRL key and + or - (zoom in and zoom out).

Appendix 6: Guidance on sending a photograph via a Smartphone

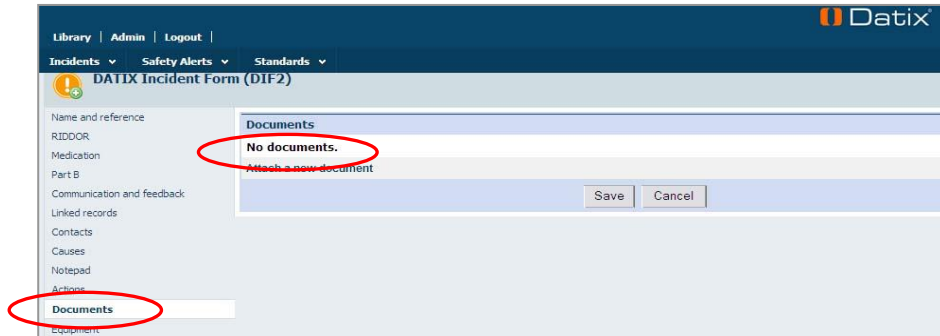
1. Take the photograph including a Wound Measuring Guide with the pseudonymised reference to identify the patient e.g., patient initials and last four digits of their NHS number – AB1234.
2. From the Camera mode click on the thumbnail image in bottom righthand corner to open up the photograph album (Camera Shots).
3. Tap the screen to bring up menu options and select the **Share** option and **Mail** to open up a new message with the photograph attached (**note:** you may have to select the **More** option in **Share** the first time and select mail from an extended list. After that the **Mail** option should be in the first list).
4. Select the address you want to send the photograph to. Ensure you double check to ensure it is the correct address.
5. To encrypt the message, type in **[Secure]** in the message header when using your NHS.Net Mail e-mail account
6. Only use the pseudonymised patient identifier in the message header to identify the patient concerned.
7. Ensure you include your contact details in the message so that the Tissue Viability Team know who has sent the message and can get in touch with you if required.



Appendix 7: Attaching a Photograph to an Incident Report in Datix

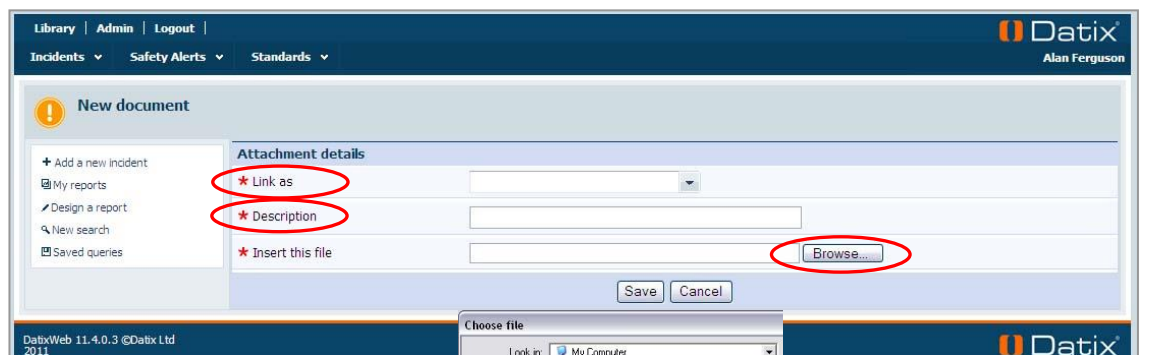
After connecting your digital camera to your computer, open up the relevant incident on Datix.

- Select Documents from the list on the left-hand side and then choose “Attach a new document”

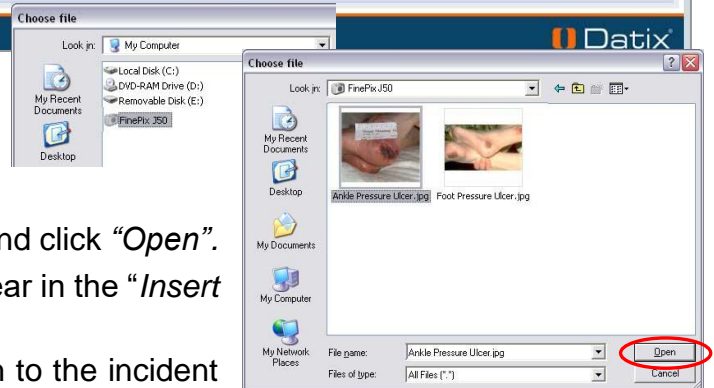


From the New Document page:

- Select an option from the “Link as” dropdown list.
- Type in a brief description for the photograph in the “Description” field.



- Click on the “Browse” button and navigate to the photograph e.g., to the camera used as in example opposite.
- Click on the photograph to select it and click “Open”.
- The path for the image will now appear in the “Insert this File” field.
- Select “Save” to add the photograph to the incident report.



The image is now linked to the Datix Incident report and can be accessed from there.

Note: a print of the photograph should be printed off and placed in the patient's record.

Once the image has been uploaded to Datix and/or printed ensure you now delete the photograph from the camera.

