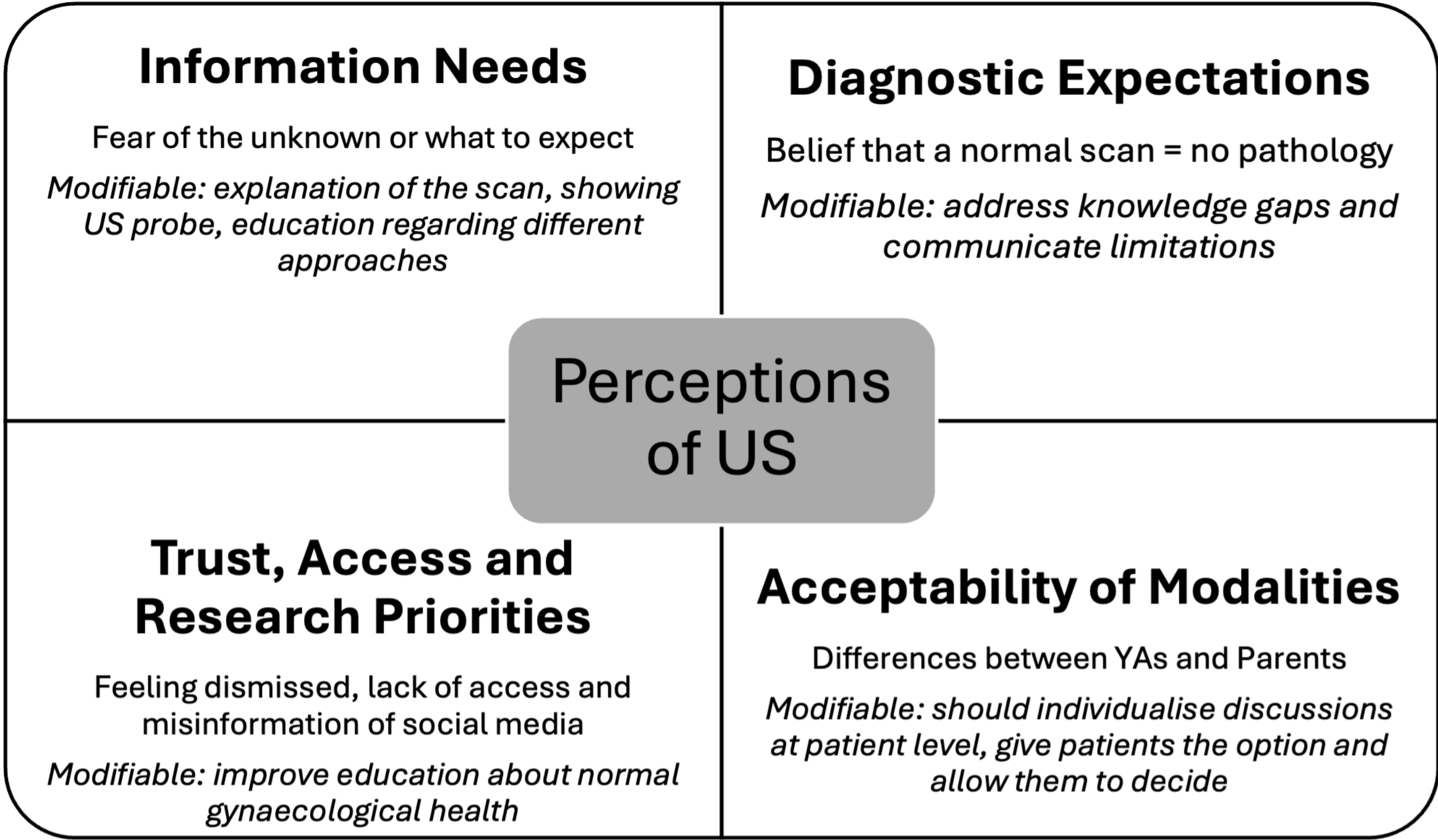


AIMS
To **explore attitudes to ultrasound** (US) for gynaecological symptoms among **adolescents, young adults and parents**.

METHOD:
Adolescents, young adults (YAs) and parents were invited to a **voluntary patient and public involvement event**. Participants shared views on investigation of gynaecological symptoms.

Feedback was collected through **facilitated group discussions or written responses** according to participant preference. Responses were analysed using a **modified thematic analysis** informed by the Braun and Clarke approach.

- RESULTS**
- **27 participants** took part: 11 participants completed an anonymous online survey (3 parents, 4 adolescents & 4 YAs) and 16 participated in structured discussions (3 parents, 2 adolescents & 11 YAs)
 - **Four key themes** were identified (table 1)
 - Across all themes, **modifiable barriers to ultrasound** were identified (figure 1)



- CONCLUSIONS**
- YAs and parents generally view TA and TV US as acceptable, however parents expressed greater concerns than YAs themselves. TV was generally preferable over TR approaches.
 - Improving education about US diagnostic value, alongside addressing online misinformation, may improve acceptability.
 - As a small patient and public involvement activity, these conclusions are preliminary and hypothesis-generating rather than generalisable, and warrant further investigation.

Theme	Subthemes	Key points
Acceptability of US modalities	• Modality-specific acceptability (TA, TV, TRUS) • Influence of diagnostic value • Parental concerns	• YAs accepted TA/TV; TRUS largely unacceptable • Acceptance driven by speed, accuracy and clinician recommendation • Parents more concerned, particularly for younger or sexually inactive adolescents
Information needs and fear of the unknown	• Anxiety about unfamiliar procedures • Desire for visual information/ to see probe beforehand	• Fear driven by lack of understanding • Acceptability improved by seeing probes • Clear explanations needed • Preference for smaller probes
Understanding of US and expectations	• Misinterpretation of normal results • Limited awareness of diagnostic scope	• Most believed a normal US excludes pathology. • Limited awareness of US role in conditions such as endometriosis
Trust, access and research priorities	• Preference for female clinician • Social media and misinformation • Perceived dismissal by clinicians • Access disparities • Research topics	• YAs reported reliance on online sources due to feeling dismissed • Uncertainty around validity of social media information • Concerns about access • Priority areas included endometriosis, PCOS, pain and fertility