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Appendix 12

Reid

16104
3/15/04

Acute Services Directorate

Ext: [REDACTED]

21 April 2000

Dr Quinn
Consultant Pediatrician
Altnagelvin Hospital
Londonderry

Dr Quinn

Re: Lucy Crawford

Further to my telephone conversation I am enclosing for your information a copy of the notes of the most recent admission of the late Lucy Crawford.

I would be grateful for your opinion on the range of issues discussed which would assist Dr Anderson and my initial review of events relating to Lucy's care.

These were:

- 1 The significance of the type and volume of fluid administered.
- 2 The likely cause of the cerebral oedema.
- 3 The likely cause of the change in the electrolyte balance ie was it likely to be caused by the type of fluids, the volume of fluids used, the diarrhoea or other factors.

I would also welcome any other observation in relation to Lucy's condition and care which you may feel is relevant at this stage.

Can I thank you for agreeing to offer your assistance.

Yours sincerely

E Fee (Mr)
Director of Acute Hospital Services



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Lucy Crawford

Was the resuscitation adequate?

The notes state that the child had a good heart rate and colour throughout this event and that initially the child's respirations were adequate. Obviously when she became apnoeic in and around 03.20hours she required an airway insertion and bagging and she was ultimately then intubated by an Anaesthetist. During resuscitation it obviously became apparent that the child's sodium had dropped to 127 and potassium down to 2.5 and a decision to use normal saline was made. I am not certain how much normal saline was run in at that time but if it was suspected that she was shocked then perhaps up to 20mls/kg could have been given.

I hope these comments are helpful. I find it difficult to be totally certain as to what occurred to Lucy in and around 3.00a.m. or indeed what the ultimate cause of her cerebral oedema was. It is always difficult when simply working from medical and nursing records and also from not seeing the child to get an absolutely clear picture of what was happening. However I hope I have attempted to be as objective as possible with the information available to me.

Yours sincerely

R J M QUINN, MB, FRCP, DCH, MFPaedRCPI
Consultant Paediatrician