## RAYCHEL FERGUSON

#### SUPPLEMENTAL REPORT

## PREPARED BY SALLY RAMSAY

## 1.0 Introduction

I have been asked to consider and comment on the following witness statement:

Mr. Ragai Reda Makar, dated 13<sup>th</sup> December, 2011 and 20<sup>th</sup> December, 2011 (WS-022)

Dr. Vijay Kumar Gund, dated 11th January, 2012-02-11 (WS-023)

Dr. Claire Jamieson, dated 20th November, 2011 (WS-024)

Mr. M. H. Zafar, dated 13th January, 2012-02-11 (WS 025)

# 2.0 My opinion

## 2.1 Intravenous therapy

Mr. Makar says he prescribed Solution 18 after being advised that this was in line with the Ward 6 protocol. In view of Raychel's normal requirements, period of fasting and inflamed appendix, he prescribed a volume of 80mls. His rationale for this volume was not written in the medical record and consequently the information not available to the nurses, had they looked.

Dr. Jamieson apparently estimated the volume of Hartmann's solution given in the operating theatre. It is not within my area of expertise to comment on whether visualisation and estimation were appropriate ways to measure the volume of fluid given to children intra-operatively.

Dr. Gund was told by Dr. Jamieson that post-operative fluids would be prescribed by the paediatricians on Ward 6 and therefore, he discontinued the Hartmann's solution used during the operation. The paediatricians appear to have been unaware that they had assumed this responsibility. I believe this confirms my conclusion that there was lack of clarity regarding responsibility for prescribing fluid post-operatively.

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Mr. Zafar advised that Raychel should take sips and that the intravenous fluids should be gradually reduced. He did not write the latter instruction in the medical notes. I believe it would have been common nursing knowledge to reduce intravenous fluids as oral intake increased therefore, specific instructions were not essential. I believe a more detailed record would have made the expectations clear.

### 2.2 Vomiting

It appears Mr.Makar did not have responsibility for managing Raychel's post-operative care, although he visited her and spoke with her father. Mr. Zafar, a member of a different surgical team, was responsible for post-operative care. When he saw Raychel he was not aware of any vomiting. The time he visited her is unknown. Therefore, I cannot determine whether she had not vomited or he was not told. It is now known whether he checked the fluid balance chart. In my experience, doctors did not always check charts, but relied on information given by the nurse.

#### 2.3 Observation

Mr. Zafar said he had no concerns about Raychel and used the term "continuing" in relation to observations. All post-operative patients need to be observed to some degree on a continuing basis until discharged home.

# 3.0 Summary

I do not think the information provided in the statements changes the conclusion I reached in my report of January, 2012.

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