

Witness Statement Ref. No. 025/1

NAME OF CHILD: Raychel Ferguson

Name: Mr M H Zafar

Title: Mr

Present position and institution:

Clinical Research Physician.

Faculty of Health and Medical Sciences

Surrey Clinical Research Centre

University of Surrey

Previous position and institution:

Senior House Officer - General Surgery

Altnagelvin Hospital.

[As at the time of the child's death]

Membership of Advisory Panels and Committees:

[Identify by date and title all of those between January 1995-December 2004]

HEAD OF QUALITY

17 JAN 2012

AND SAFETY

Previous Statements, Depositions and Reports:

[Identify by date and title all those made in relation to the child's death]

OFFICIAL USE:

List of previous statements, depositions and reports attached:

Ref:	Date:	
012-024-134	03.04.02	Statement
012-046-218	05.02.03	Deposition at the Inquest into the death of Raychel Ferguson

Particular areas of interest

[Please attach additional sheets if more space is required]

1. Describe in detail your observations of and directions given in relation to the treatment of Raychel Ferguson during your ward round at approx. 9am on 8th June 2001, to include:

- (i) your knowledge if any that she had vomited at 8am that morning; and**
- (ii) Your decision that she should continue to have fluids administered and that she could have small amounts of clear fluid.**

1. (i) On 8th June 2001 I conducted a morning ward round in ward 6. I saw Raychel Ferguson. She did not complain about nausea or vomit and the ward staff did not mention any vomiting earlier that morning. I have no recollection or knowledge of any vomit at 8 am.

(ii) On my round it was recorded that she appeared to be making satisfactory progress following her operation. At that time she was nil by mouth.

She was bright and alert. She did not complain of pain, nausea or vomiting. She was afebrile as confirmed by the observation chart. She was fairly stable (observations were within normal limits) and I advised to start sips of oral fluids and gradually reduce the IV fluids. The plan was to stop IV fluids as soon as she was tolerating the oral fluids. I think this would be a normal form of care following appendicectomy.

On my examination, her temperature was normal, regular heart rate with regular heart sounds. My recollection is that her abdomen was soft and with bowel sounds.

2. Describe in detail why you directed continuous observation of Raychel on the morning of 8th June 2001.

I saw Raychel Ferguson in ward 6 in the morning round on 8th June 2001 after her straight forward appendicectomy was performed on 7th June 2001. The operation was uneventful. This was her first post operative day and mostly day one post operation patients stay on observation even if there are no concerns. Perhaps it would clarify my intentions to use the term "continuing" observations. I had no concerns at this stage about her but felt we should keep her on observation as a surgical patient.

Particular areas of interest (Cont'd)

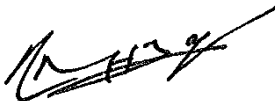
3 Describe in detail the actions you took and the observations you made in respect of Raychel when you arrived at ward 6 at approximately 5am on the morning of 9th June 2001.

At approximately 3.15am, my colleague surgical JHO bleeped me about reviewing Raychel Ferguson. At the time I was busy managing another difficult patient. I was not able to leave the patient immediately. I went to see her in ward 6 as soon as I had treated the patient.

I arrived at ward 6 at approximately 5am on the morning of 9th June 2001 and I saw the resuscitation team was resuscitating her. She had been intubated and was being manually ventilated. My senior colleagues were already present there and they had already taken over management of the child. Therefore I was not actively involved in treating Raychel at that stage. I have no recollection of the precise details of her resuscitation.

Other points you wish to make including additions to any previous Statements, Depositions and or Reports

Signed:



Dated:

13/01/2012