

Witness Statement Ref. No. 040/1

NAME OF CHILD: Raychel Ferguson

Name: Dara O'Donoghue

Title: Dr

Present position and institution: Research Fellow in Child Health

Previous position and institution: Clinical Fellow in Paediatric Intensive Care
[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]

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 statement, depositions and reports attached:

Ref:	Date:	

Particular areas of interest

[Please attach additional sheets if more space is required]

1. Describe your role in the treatment and care of Raychel Ferguson from her arrival at RBHSC on 9th June 2001 to her death on 10th June 2001, to include:
- (i) your concerns and observations in respect of Raychel when you first treated her;
 - (ii) your thoughts at that time as to the possible cause of her condition; and
 - (iii) details of colleagues with whom you spoke about Raychel's condition and the nature of those conversations.

On the morning of 09/06/01 I was the junior doctor on-call for the Paediatric Intensive Care Unit (PICU) in the Royal Belfast Hospital for Sick Children (RBHSC). Dr P Crean, Consultant Paediatric Anaesthetist was my immediate superior. Raychel Ferguson was transferred from Altnagelvin Hospital to RBHSC that morning. On Raychel's arrival to PICU I contacted Dr Crean and also Dr Hanrahan, Consultant Paediatric Neurologist and informed them of her admission. They agreed to review her. I read the transfer letter, which had been completed by Dr B Trainor, and noted the history of hyponatraemia. (063-005-010 to 012).

I examined Raychel and noted the following:

Glasgow Coma Scale 3/15

Cardiovascular system: Haemodynamically stable

Respiratory system: Chest Clear

Gastrointestinal system: Nil of note

Neurological examination: Pupils dilated and unreactive to light

Gag reflex absent

Corneal reflexes absent

Hyperreflexic upper and lower limbs with upgoing plantar reflexes

I wrote up Raychel's admission, summarizing her clinical course and my examination, in the clinical notes at 13:50 (063-009-018 to 021). On the basis of her history and investigations, my impression was that Raychel had raised intracranial pressure and cerebral oedema. At the time, the cause of this was unclear. After discussion with Dr Crean, the possibility that it was infectious in origin was considered, and the intravenous antibiotics which had been commenced in Altnagelvin were continued. There was a suggestion of a subarachnoid haemorrhage on a CT scan of brain done in Altnagelvin. There was a history of polyuria and Diabetes Insipidus was also considered.

It would be usual to make a treatment plan with the responsible Consultant shortly after arrival. The immediate plan in Raychel's case was to keep her mechanically ventilated in order to maintain her oxygen level in the normal range, but to keep her carbon dioxide level slightly lower than normal, which is often done to treat raised intracranial pressure. The intravenous fluids prescribed were to be restricted to 2/3 of her maintenance requirements. This is also a common treatment for raised intracranial pressure.

I rechecked Raychel's blood tests and inserted a central venous line into Raychel's right subclavian vein (063-009-023).

Particular Areas of interest (Contd)

I prescribed a number of medicines for Raychel including a single dose of DDAVP, Hypromellose eye drops, lacrilube eye ointment and paracetamol in the appropriate doses for her weight (063-014-029 to 030). I also prescribed co-codamol for Raychel's parents (063-014-031,033). I prescribed the intravenous fluids: 500mls Normal Saline with 20mmol Potassium Chloride added to run at 37mls/hour, and heparinised saline to maintain the patency of the arterial line (063-026-058).

Raychel had two sets of brain-stem tests performed by Drs Hanrahan and Crean. The latter set was performed at 10:00 on 10/06/01. These were negative. I recorded that the Coroner's office was contacted at 10:05 on 10/06/01 (063-012-026).

2. Give details of all your communication with the parents of Raychel Ferguson both before and after her death.

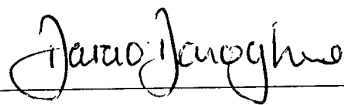
After noting Raychel's history and performing a medical examination at the time of her admission to PICU on 09/06/01, I spoke with both of Raychel's parents and informed them that Raychel was critically ill and that the outlook was very poor.

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

[Please attach additional sheets if more space is required]

THIS STATEMENT IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

Signed: Dara O'Donoghue



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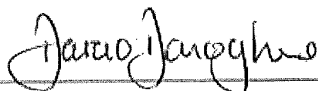
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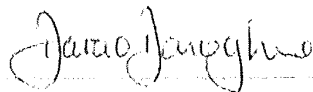
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