

NAME OF CHILD: Raychel Ferguson

Name: Clodagh Loughrey

Title: Consultant Chemical Pathologist

Present position and institution: Consultant Chemical Pathologist,
Belfast City Hospital

Previous position and institution:
[As at the time of the child's death] As above

Membership of Advisory Panels and Committees:

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

1. Member of QUB Research Ethics Committee 2001-2004
2. Member of N. Ireland Research Ethics Committee 2 March 2004-present
3. Member of Belfast City Hospital Nutrition Working Group 1996-7; 1998-present (Chair since 2001)
4. Member of Association of Clinical Biochemists' Clinical Sciences Reviews Committee 2001-present
5. Member of Working Group convened by Dr Miriam McCarthy, Senior Medical Officer, Dept of Health N Ireland, to develop guidelines for the prevention of hyponatraemia in children, published in 2002.

Previous Statements, Depositions and Reports:

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

Report prepared 24/10/01 for the Coroner at the request of Dr Brian Herron, Consultant Histopathologist, Royal Group of Hospitals Trust, giving my opinion as to any potential connection between the abnormal biochemistry results noted in this child and the cerebral oedema noted by Dr Herron at autopsy.

OFFICIAL USE:

List of previous statements, depositions and reports attached:

Ref:

Date:

012-019-124	24.10.01	Letter of opinion
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Particular areas of interest

[Please attach additional sheets if more space is required]

1. Describe in detail the circumstances whereby you were asked to assist in determining the cause of death of Raychel Ferguson, to include:
 - (i) the information that was provided to you; and
 - (ii) any discussions you had and with whom.

I was asked by Dr Brian Herron, Consultant Histopathologist, Royal Group of Hospitals Trust, for my opinion, as an expert witness for the Coroner's Court, as to any potential connection between the abnormal biochemistry results noted in this child and the cerebral oedema noted by Dr Herron at autopsy. I was provided with photocopies of Raychel's Altnagelvin medical notes.

2. Explain the basis for your statement in the opening paragraph of your letter to Dr Herron dated 24.10.01 that significant hyponatraemia was noted after the seizure.

From the photocopied medical notes, Dr Johnson, who was the first doctor to see the child after the seizure at 03.15 on 9/6/1, raised the question of a potential blood result abnormality and sent blood samples to the lab for urgent analysis. The subsequent note from Dr Hanna, Paediatric 2nd term Senior House Officer who saw Raychel at 04.15 stated that the serum sodium result was very low at 118 mmol/L.

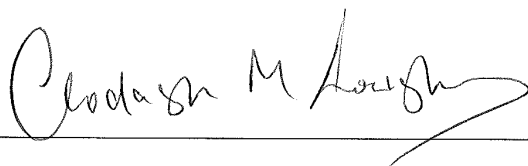
3. Give details of your experience of hyponatraemia prior to October 2001.

I was a registrar in Chemical Pathology from 1994 and completed Specialist Training in January 2001. I have been working as a consultant Chemical Pathologist since June 2001. Mild hyponatraemia is a relatively common biochemical abnormality in hospital medicine and I am quite frequently asked for advice in dealing with it. I should point out that my work is generally with adult patients and I have had no direct experience of hyponatraemia in children.

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]

Signed:



Dated:

2/27/15