

NAME OF CHILD: Adam Strain

Name: Tommy Ryan

Title: Mr

Present position and institution: Retired

Previous position(s) and institution(s):

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

Senior Technician

Membership of Advisory Panels and Committees:

[Identify by date and title all of those between January 1995-December 2010]

RBHSC Health and Safety Committee

RBHSC Security Committee

MORE Project

Other 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:	

IMPORTANT INSTRUCTIONS FOR ANSWERING:

Please attach additional sheets if more space is required. Please identify clearly any document to which you refer or rely upon for your answer. If the document has an Inquiry reference number, e.g. Ref: 049-001-001 which is 'Chart No.1 Old Notes', then please provide that number. If the document does not have such a number then please provide a copy of the document.

I QUERIES

- (1) Describe your role with, and work commitments to, the Royal Belfast Hospital for Sick Children (RBHSC) from the date of your appointment and particularly over the period 26th November to 28th November 1995**

I first started in the RBHSC in 1974 as a theatre attendant in their theatres with a minor role in PICU as requested. I went to the UHD from 1976 to 1979 obtaining C&G qualifications as an Operating Department Assistant finishing as a Senior ODA. I returned to the royal site as a Medical Physics Technician in Neurosurgical theatres. In 1982 I applied for and was successful in filling a vacancy in PICU. In November of 1995 I was the senior of two technicians with responsibility for theatre and Intensive Care, the other technician being Mr Peter Shaw. My normal duties in 1995 would include cleaning ventilators, checking and making sure ventilators ready for use, checking stock levels and anything else required by staff. I don't recall anything specific to the dates 26th to 28th November 1995.

- (2) State which Medical Technical Officer(s) was/were involved in the transplant surgery of Adam Strain on 27th November 1995 and identify the evidence upon which that is based**

The technician on call that night was Mr Peter Shaw, the only evidence being the memory of the event. When the trust asked for information in 2005 I discussed it with Peter and he agreed he was on duty.

- (3) Describe exactly what is involved in the role of a Medical Technical Officer during a transplant surgery in particular in:**

- (a) Setting up pressure transducer systems**
- (b) Zeroing, calibrating and replacing pressure transducers**
- (c) Taking blood samples from an indwelling arterial or venous catheter**

During major surgery of any kind the technician would check the anaesthetic machine to make sure all gases were connected and flowing, cylinders (back up) were full and all vaporisers were filled. Arterial and CVP lines were ready at the anaesthetists request. Transducer lines would be connected to the monitor and zeroed to atmospheric pressure; this would also act as a check to make sure the monitor was working properly. The amplitude would be adjusted to suit the patient. After attachment to patient the system would have a final zeroing and be left to continuously monitor Arterial and Cvp pressures. It would normally be the anaesthetist who took samples for blood gas analysis but sometimes on instruction from the anaesthetist the technician would be asked to take it.

- (4) State whether on 27th November 1995 you knew how to use a blood gas machine to measure blood gases and electrolytes, and whether you were trained and authorised to do so and if so:**

I was trained to use the blood gas analyser and authorized to do so by the medical staff.

- (a) State when you were trained**

I was trained by the company at the time of purchase and installation.

- (b) Identify the person(s) who trained you**

Trainers employed by the supplier with back up and any queries supported by the local rep.

- (c) Describe what was involved in the training**

Principles, use and fault finding.

- (5) Describe and explain who, in the course of paediatric surgery, would normally transport blood samples from the operating theatre for:**

- (a) Laboratory analysis and/or**

Normally during surgery if a sample was required to go to the laboratory it would have been Nursing staff who organised it by means of the portering service.

- (b) Analysis by the nearest blood gas machine**

If a technician was in the theatre they would take a sample to the in house analyser which would have been in PICU. If the technician was not in theatre the anaesthetist would send it with another member of staff to give to the technician, who would in turn bring the results to the anaesthetist. As far as I recall the blood gas analyser machine in PICU was the only one in use in the RBHSC in 1995.

- (6) State how, in 1995, blood tests results would have been communicated from the laboratory to the theatre and how long the laboratory analysis of the blood sample and reporting back of the results to theatre would typically have taken:**

- (a) During normal working hours**

- (b) Out of hours**

In 1995 a blood specimen taken for laboratory analysis would firstly have been packed in ice (if for blood gas analysis), then the laboratory informed the specimen was being sent and then the porters contacted to transport it to the laboratory. This would take from half an hour to forty five minutes depending on availability of portering staff. This would be the normal times during the working day; it could take a little longer out of hours. It would have been normal practice if results were taking a long time for the anaesthetist to request someone to ring the lab for the results, but on most occasions the lab would ring with the results first.

(7) State whether, by 27th November 1995, you had spoken to any medical personnel about use of the blood gas machines in obtaining bedside blood tests and reliance upon the results by said machines. If so:

- (a) Identify all those to whom you spoke**
- (b) State when you spoke to them**
- (c) State what was said and/or discussed about the use of blood gas machines**

I have no recollection of having any issues about the reliance of results and have no recollection of having any discussion about this with any member of the medical staff.

(8) State whether you, as line manager, were informed that, during Adam's transplant operation, transducers were discarded, and new transducers were installed, and if so:

- (a) State when you were informed**
- (b) Identify who informed you**
- (c) State the means by which you were informed**

I have no recollection of having any issues with any transducer problem.

(9) State whether you sent any of those 'faulty' transducers (in relation to Adam's transplant surgery) back to the manufacturer and if so:

- (a) Identify the manufacturer concerned**
- (b) State when and how many 'faulty' transducers were sent back to the manufacturer and identify where that would be recorded**

I have no recollection of having sent any transducer to the manufacturer for testing.

(10) Identify any 'Protocols' and/or 'Guidelines' which governed your conduct in relation to Adam's renal transplant surgery

There were no protocols or guidelines relating to that case or any other cases. MTOs provide technical support as required by the consultant anaesthetist".

(11) Provide any further points and comments that you wish to make, together with any documents, in relation to:

- (a) The care and treatment of Adam from his admission for the renal transplant surgery on 26th November 1995 to his death on 28th November 1995**
- (b) Record keeping**
- (c) Maintenance and checking of equipment**

(d) Lessons learned from Adam's death and its effect on your work

(e) Any other relevant matter

As a technician I was not involved in the treatment of any patients other than providing and checking equipment. The anaesthetic machines and monitors no longer exist and the daily check logs are long since gone. At the time our recording and daily checks were examined by Mr J Wilson and Mr B McLaughlin and were found to be consistent with the normal procedures approved by the anaesthetists at the time.

(12) Identify precisely any entries in notes/records that you made or signed in relation to Adam and state below:

(a) When you made/signed them

(b) The source of the information recorded in any entry you made

I have no recollection of signing any documents regarding this case.

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

Signed:

Thomas Reyer

Dated:

4/5/11