

Witness Statement Ref. No.

228/1

**NAME OF CHILD:** Adam Strain

**Name:** R J Stewart

**Title:**

**Present position and institution:**

Consultant Paediatric Surgeon

Queens Medical Centre, Nottingham University Hospitals, Nottingham NG7 2UH

**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 - November 2011]*

*None*

**Previous Statements, Depositions and Reports:**

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

*None*

**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 an Inquiry reference number, then please provide a copy of the document attached to your statement.

**I. QUERIES ARISING OUT OF AN OPERATION ON ADAM STRAIN DATED 29<sup>TH</sup> MAY 1992**

With reference to the operation notes dated 29<sup>th</sup> May 1992 (Ref: 053-015-052), please provide clarification and/or further information in respect of the following:

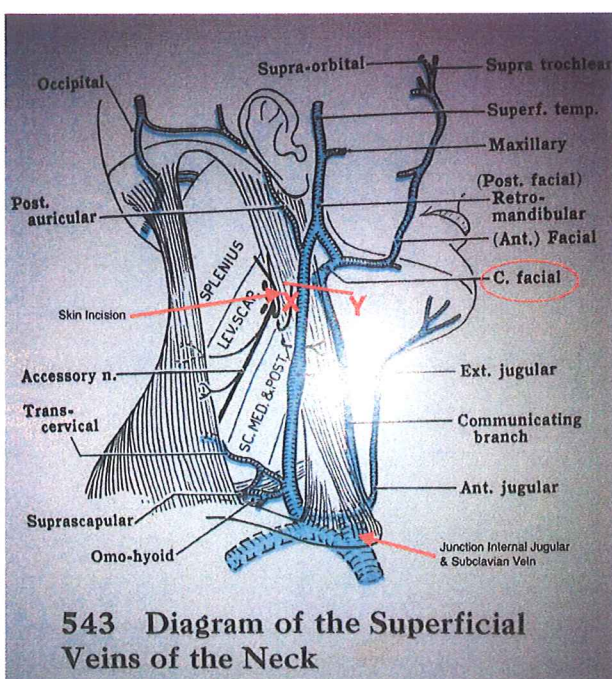
(1) "Surgeon: Mr W A McCallion / Mr R J Stewart / Mr S Brown" (Ref: 053-015-052)

(a) Describe your role and responsibilities in Adam's surgical procedure of 29<sup>th</sup> May 1992 and that of "Mr WA McCallion" and "Mr S Brown".

From the operative note I was the 2<sup>nd</sup> assistant – helping Mr McCallion, with Mr Brown as the 3<sup>rd</sup> assistant.

(2) "1) Insertion Broviac Line into left common facial vein. Transverse cervical incision. Left common facial vein identified, entering left internal jugular. Left common facial ligated with 5 X 0 PDS. Broviac line tunnelled from anterior chest wall using Westminster and inserted into common facial vein and then internal jugular. Check X-ray confirmed tip of broviac line in proximal SBC. Neck wound closed in layers of 5 X 0 PDs and wound anterior chest wall closed 5 X 0 PDS." (Ref: 053-015-052)

(a) State exactly where incisions were made on Adam's neck to insert the Broviac line, illustrating with a diagram if helpful, and explain the purpose of each incision.



I do not have a diagram illustrating the left side of the neck but the anatomy is identical to 543 Diagram of the superficial veins of the neck. An single incision was made from X to Y in the upper portion of the neck to identify the left common facial vein at its point of insertion into the left internal jugular vein. The common facial vein was ligated proximally with 5/0 PDS and after tunneling the Broviac catheter subcutaneously it was inserted via an incision in the common facial vein and manipulated via the left internal jugular vein into the proximal superior vena cava (SVC).



- (b) Explain what, if anything was done with the left internal jugular vein during this procedure and explain the reasons.

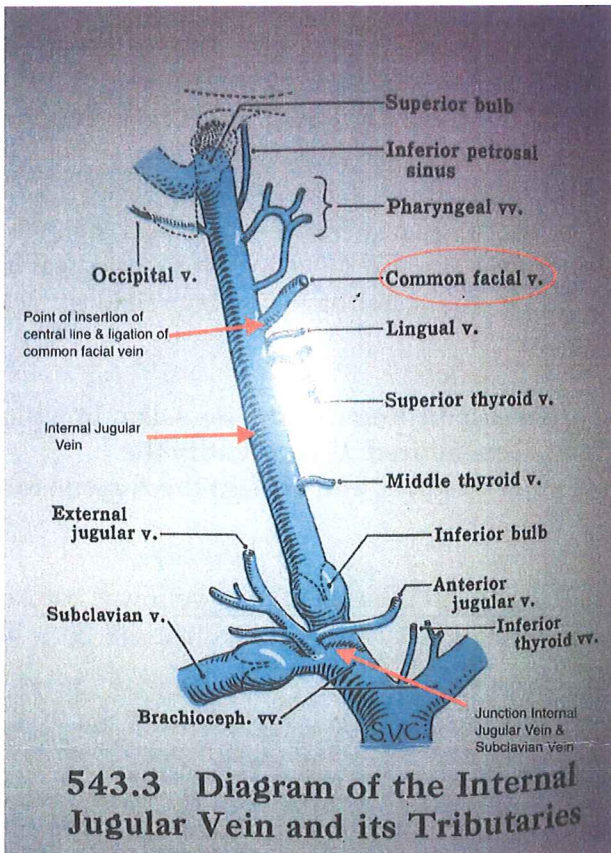


Fig 543.3 illustrates the internal jugular vein – the point of insertion of the Broviac catheter and the junction of the internal jugular vein with the subclavian vein. The catheter was manipulated internally through the internal jugular vein but the vein was not otherwise explored and it would not have been possible to reach the junction of the internal jugular vein and the subclavian vein from the incision X-Y.

- (c) Describe the qualities of the “5 x 0 PDS” sutures which were used to ligate the left common facial vein.

PDS is a synthetic absorbable suture material, prepared from the polyester, poly (p-dioxanone) and can remain up to 6 weeks, however tensile strength decreases to about 70% at 14 days and 25% at 42 days. A 5/0 suture is 0.1mm in diameter.

- (d) State for how long the Broviac line remained in place, and in particular, state whether or not it was:

- (i) Removed on 9<sup>th</sup> February 1995 (Ref: 057-102-189)

I cannot say when the left sided Broviac line was removed - as this is not clear from the medical records provided.

- (ii) Still in place at the time of Adam’s renal transplant operation on 27<sup>th</sup> November 1995

I am unable to comment - as it is not clear from the medical records provided.

- (e) Describe what you knew of the state of Adam's left internal jugular vein as at 27<sup>th</sup> November 1995 and explain the reasons why.

I have no knowledge of the state of Adam's left internal jugular vein at that time.

- (f) In Dr. Alison Armour's report of her autopsy on 29<sup>th</sup> November 1995 (Ref: 011-010-034), she states that there was "*a suture in situ on the left side of the neck at the junction of the internal jugular vein and the sub-clavian vein*" (Ref: 011-010-039). Please comment generally on this statement, and explain the reasons for your answer.

I cannot explain this finding on the basis of the operation at which I assisted on the 29<sup>th</sup> of May 1992. The junction of the left internal jugular vein and left subclavian vein was not explored at the procedure of the 29/5/1992 and it would not have been possible to access this anatomy from the incision made at that time.

- (i) In particular, state if you are aware of any procedure carried out on Adam in which his left internal jugular vein would have been sutured. If so, identify the procedure, where it is noted in Adam's medical notes, and explain the reasons for your answer.

I am not aware of any procedure where Adam's left internal jugular vein was sutured.

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

Signed:

A large, stylized handwritten signature in blue ink, consisting of several loops and a long horizontal stroke at the bottom.

Dated:

11/1/12