

CORONERS ACT (NORTHERN IRELAND) 1959

Deposition of Witness taken on TUESDAY the 17TH DAY OF FEBRUARY 2004, at inquest touching the death of LUCY CRAWFORD, before me J L LECKEY Coroner for the District of GREATER BELFAST as follows to wit:-

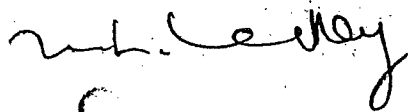
The Deposition of STAFF NURSE MRS SALLY MCMANUS

of ERNE HOSPITAL, ENNISKILLEN who being sworn upon her oath, saith

My involvement in the care of Lucy Crawford [L. C.] (deceased) was as follows: My dealings with Lucy began at 02.55 hours when I was called to see her by E/N T McCaffrey. Prior to this the history as documented by myself in the nursing kardex was as follows: Lucy was admitted with the day staff at 19.30 hours with a 36 hour history of vomiting, but no diarrhoea and had been becoming drowsy for the previous 12 hours. On admission Lucy was examined by Dr Malik (SHO), who was unable to successfully cannulate her. Dr O'Donohoe (Consultant on call) was called Dr O'Donohoe also had difficulties and small quantities of oral fluids were offered and tolerated, she appeared keen to drink. 50mls juice and 150mls dioralyte were taken slowly over the following 11/2 hours. At 22.30 hours cannulation was successful into the left hand. Intravenous fluids were commenced by S/N B Swift as per Doctors instructions at a rate of 100mls/hr. At 24.15 hours Lucy had a large vomit and Intravaneous fluids remained unchanged. At 02.30 hours I was informed by E/N McCaffrey that Lucy had had a large offensive episode of diarrhoea – Lucy was apprexial at this time, and awake in mum's arms while the bed was changed. At this time I was with another patient in a side room. I asked E/N McCaffrey to take routine stool specimens for Rotavirus, Culture and Sensitivity and Ecoli and to move Lucy to a side room to prevent cross infection as at this time she was being nursed on the open ward. At 02.55 hours E/N McCaffrey was called by Lucy's mum, she immediately alerted

n On entering the room I found Lucy rigid in mum's arm. I took Lucy from mum and laid her on the bed, she had no loss of colour, but was rigid with lip smacking and twitching of eyelids. Oxygen therapy was commenced at 5 litres/minute and observations recorded. Dr Malik was bleeped to come urgently to the ward, suction was brought into the room though not required at this time. Before the SHO arrived Lucy appeared to come out of the episode, limbs loosened and eyes opened but then became rigid again. SHO arrived, history given and full examination done. 2.5mg per rectum diazepam was given but within 1 minute of being given Lucy had a large watery stool. Intravenous fluids were changed to 0.9% Sodium Chloride as Blood Sugar Monitoring recorded as 13.4 mmols. At 03.20 hr ✓ 1 Lucy was noted to have decreased respiratory effort, an airway was inserted and bagging commenced via face mask. Dr O'Donohoe now present, repeat Urea and Electrolytes ordered, also chest and abdominal x-rays. Anaesthetist requested to attend. I was not involved with the resuscitation of Lucy. On arrival of the Anaesthetist this role was carried out by S/N T Jones as documented by herself within the nursing kardex.

TAKEN before me this 18TH DAY OF FEBRUARY 2004



Coroner for the District of Greater Belfast

CORONERS ACT (Northern Ireland), 1959

Deposition of Witness taken on _____ the _____ day
of _____ 20 _____, at inquest touching the death of
_____, before me

Coroner for the District of _____

as follows to wit:—

The Deposition of S/N SALLY McMANUS.

of _____

(Address)

who being sworn upon h

oath, saith

Mr. McManus : 2.55 a.m. was the first time I
was involved with the care of Lucy. The
Radar was completed on the basis of what
was told by a number of persons including
S/N Swift. Fluid management is the
responsibility of the doctors. I was not present
during resuscitation.

Mr. Good : On the ward I would see
resuscitation attempts. The resusc kit has
trays 2 of each item. If they are not there
they are obtained from the Treatment Room.
Some equipment ^{and drugs} may have to be brought in to the
side-room. It may give an impression of
panic. S. McManus.

S

P.T.O.

013-027-101

TAKEN before me this 18th day of February 2004

Michael J. Conroy, Coroner for the District of Greater
Belfast

The witness concerned: **Staff Nurse Sally McManus**

Mr Murnaghan: 2.55 am was the first time I was involved with the care of Lucy. The kardex was completed on the basis of what I was told by a number of persons including Staff Nurse Swift. Fluid management is the responsibility of the doctors. I was not present during resuscitation.

Mr Good: On the ward I would see resuscitation attempts. The resuscitation trolley keeps 2 of each item. If they are not there they are obtained from the treatment room. Some equipment and drugs may have to be brought in to the side room. It may give an impression of panic.