



Department of Medical Imaging
06th December 2001

Therese Brown
Risk Management Co-Ordinator
Altnagelvin Hospital

RE: RACHEL FERGUSON (deceased)
DOB: 04th February 1992 Hospital Number AH313854

Dear Mrs Brown

Thank you for your letter regarding the above named patient. My involvement in this case is as follows:-

I was requested to perform an emergency computerized axial tomographic examination of this patient's head at approximately 5.30am on the 9th June 2001.

The examination revealed evidence of cerebral oedema, with obliteration of the basal cisterns, resulting in raised intra-cranial pressure. Enhancement of the meninges suggesting an associated sub-arachnoid haemorrhage. Preservation of the normal grey-white interface was noted. This examination was image linked to the neurosurgical centre, at the Royal Victoria Hospital.

At the request of the neurosurgical member of staff on call, a repeat examination was performed to outrule a possible sub-dural empyema. This entity was outruled.

I contacted Dr Stephen McKinstry, Consultant Neuroradiologist on the 10th June requesting his opinion regarding the findings at the initial examination.

Dr McKinstry felt that the apparent sub-arachnoid haemorrhage was simply secondary to reduced brain density (cerebral oedema) hence apparent meningeal enhancement.

My report of these events is attached

Yours faithfully


DR C C MORRISON FRCR

RF - ALTNAGELVIN

021-065-155

Intensive Care Unit
MR. R. GILLILAND
DR EM ASHENHURST

SURNAME FERGUSON
FORENAME(S) RACHAEL
CASENOTE AH 313854
UPCI
D.O.B./SEX 04-FEB-1992 FEMALE
DATE TYPED 11-JUN-01 VW
DICTATED 11-JUN-01 12:32

ENHANCED CT SCAN OF BRAIN 09-JUN-01 08:51
Diagnostic Code

unenanced and enhanced scans were performed.
Hyperdensity is noted in relation to the meninges and there is loss of definition of the basal cisterns in keeping with raised intra-cranial pressure.
The grey white matter differentiates and is preserved.
Following contrast injection there is no interval change.
In particular, as requested a sub-dural empyema has been excluded.
I have discussed this case with Dr Steven McKinstry, who feels that appearances are more in keeping with cerebral oedema which is highlighting the meninges and normal structures.

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Dr. C.C.M. Morrison Consultant Radiologist

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A sub-arachnoid haemorrhage is therefore unlikely.

Dr. C.C.M. Morrison Consultant Radiologist

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