

Date:

12 June 2001

## TO WHOM IT MAY CONCERN

Re: Rachael Ferouson

My name is Dr Brian McCord. I am Consultant Paediatrician at Altnagelvin Area Hospital.

As such I was paediatrician on-call for the week-end of 08 – 10.06.2001. At approximately 03.45a.m. I received a call from my registrar, Dr Trainor, regarding this 9 year old girl previously admitted under the care of surgical colleagues with a history of abdominal pain and subsequently treated with an uneventful appendicectomy. Post operatively she had given few concerns although there was some vomiting recorded. She was on i.v. fluids.

In the early hours of the morning of 09.06.01 she developed an epileptiform episode requiring treatment with rectal and i.v. Diazepam.

I was subsequently called in view of concerns about her general condition, i.e. she looked very unwell and the finding of a few discrete petechiae. My verbal advice via telephone was to commence high dose antibiotics and seek anaesthetist assistance should there be any further deterioration in condition.

I then proceeded to the hospital and on arrival she had been intubated and was being manually ventilated. She was well perfused but unresponsive. Pupils were fixed and dilated. Fundi were sharp. By this stage she was also noted to have a marked electrolyte disturbance with profound hyponatraemia and low magnesium. I.v. fluids were switched to normal saline and infusion rate was reduced. She was given i.m. magnesium sulphate. Once stabilised and airway secured an urgent CT scan was arranged.

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Rachael Ferguson

Initial impression of CT scan was one of subarachnoid haemorrhage and raised intracranial pressure.

Subsequently Rachael was to be transferred to intensive care for stabilisation and there was to be liaison between surgical colleagues and neurosurgical colleagues in Belfast regarding further management.

F B McCORD, MB, FRCP, DCH Consultant Paediatrician

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