STATEMENT OF WITNESS

STATEMENT OF: IVOR MITCHELL

Name

Rank

AGE OF WITNESS (If over 18 enter "over 18"):

OVER 18

To be completed when the statement has been written.

I declare that this statement consisting of one page signed by me is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence at a preliminary enquiry or at the trial of any person, I shall be liable to prosecution if I have wilfully stated in it anything which I know to be false or do not believe to be true.

Dated this

SIGNATURE OF MEMBER by whom

statement was recorded or received

SIGNATURE OF WITNESS

When Conor was in the side ward and having a seizure I queried Dr Murdoch if he was confident that the amount of fluid being used for Conor's rehydration was accurate. He assured me that he had contacted one of his colleagues and he was confident that the dosage was okay. He said that he had been most careful because a child had with disastrous results, at Altnagelvin Hospital. overdosed, Shortly after this my wife exclaimed that Conor had stopped breathing. Some difficulty was experienced in getting a working oxygen mask short after which Conor was ventilated manually.

FORM 38/36

SIGNATURE OF WITNESS

MMMM