STATEMENT OF WITNESS

STATEMENT OF: CATHERINE MURPHY
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 2 pages, each 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 31 day of JANUARY 2006

P J Monaghan
SIGNATURE OF MEMBER *by whom statement was recorded or received*

PAMELA-JANE MONAGHAN, D/CON
PRINT NAME IN CAPS

Catherine Murphy
SIGNATURE OF WITNESS

I qualified as a Registered Sick Children's Nurse in 1990; I went straight from my training to Musgrave Ward at the Royal Victoria Hospital. I stayed here until I ceased nursing in 1997. Adam Strain was a frequent visitor to our ward, I had admitted him and nursed him on many occasions. I do not actually remember admitting Adam on 26th November 1995 as I had admitted him on many occasions before, however, from the notes I know that I was the admitting nurse on this date. As admitting nurse I recorded his temperature, pulse, blood pressure and weight. I took a patient history and noted his current medication; these are recorded on page numbers 057-011-015, 057-012-016 and 057-013-017, 018. I would have ensured that he did not eat and would have looked after the fluids that had been prescribed. I do not remember who else was on duty on the ward that night. Adam was given 180 mls of clear fluid per hour through his gastrostomy tube and 20 mls of IV fluids (intravenous fluids) per hour (057-010-013, 014). At 1.30 am Adam's IV cannula tissued. Dr O'Neill was informed and his clear fluids via gastrostomy were increased

STATEMENT OF: CATHERINE MURPHY

to 200 mls per hour (057-014-019). At 2.00 am I gave Adam 240 mg of paracetomol via his gastrostomy tube (057-021-033, 034 and 057-022-035). Adam had his normal peritoneal dialysis overnight which was stopped at 6.00 am as per doctor's order. Adam was transferred to theatre at 7.00 am. Although his patient notes say that he had his cannula re-inserted at 5.00 am I have a vague memory of the doctor having difficulty in inserting this and Adam going to theatre without IV access being obtained (057-014-019). My role with Adam ended when he went to theatre that morning. I can't remember seeing Adam after the operation. I have been asked if after the operation did I hear any chat or comments passed in relation to the central venous pressure and quantities of fluids during the operation, about the state of the kidney before and during the operation, did it perfuse or produce urine. I can say that I did not hear anything in relation to these matters.

N.I.H. Hospital. 12-HOUR RESPIRATION PULSE AND TEMPERATURE CHART

Physician or Surgeon	Ward	Surname and First Names	Sex	Age	Hospital No.
Dr Savage	Muss	ADAM STRAIN	M	44 R	364377

Day	6pm		Day
Day of Disease	9.30 pm		Day of Disease

M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E M. E

TEMPERATURE

C°	F°	F°	C°
41.0	105.8	105.8	41.0
40.5	104.9	104.9	40.5
40.0	104.0	104.0	40.0
39.5	103.1	103.1	39.5
39.0	102.2	102.2	39.0
38.5	101.3		
38.0	100.4		
37.5	99.5		

PULSE

80
70 70
60 60

RESPIRATION

50 50
45 45
40 40
35 35
30 30
25 25
20 20
15 15
10 10

Motions

Urine, ozs.

R.B.H.S.C. 17.

057-011-015

AS - PSNI

WEIGHT CHART

INFANTS

WARD MUSG

SURNAME (Block Letter) STRAIN ADAM

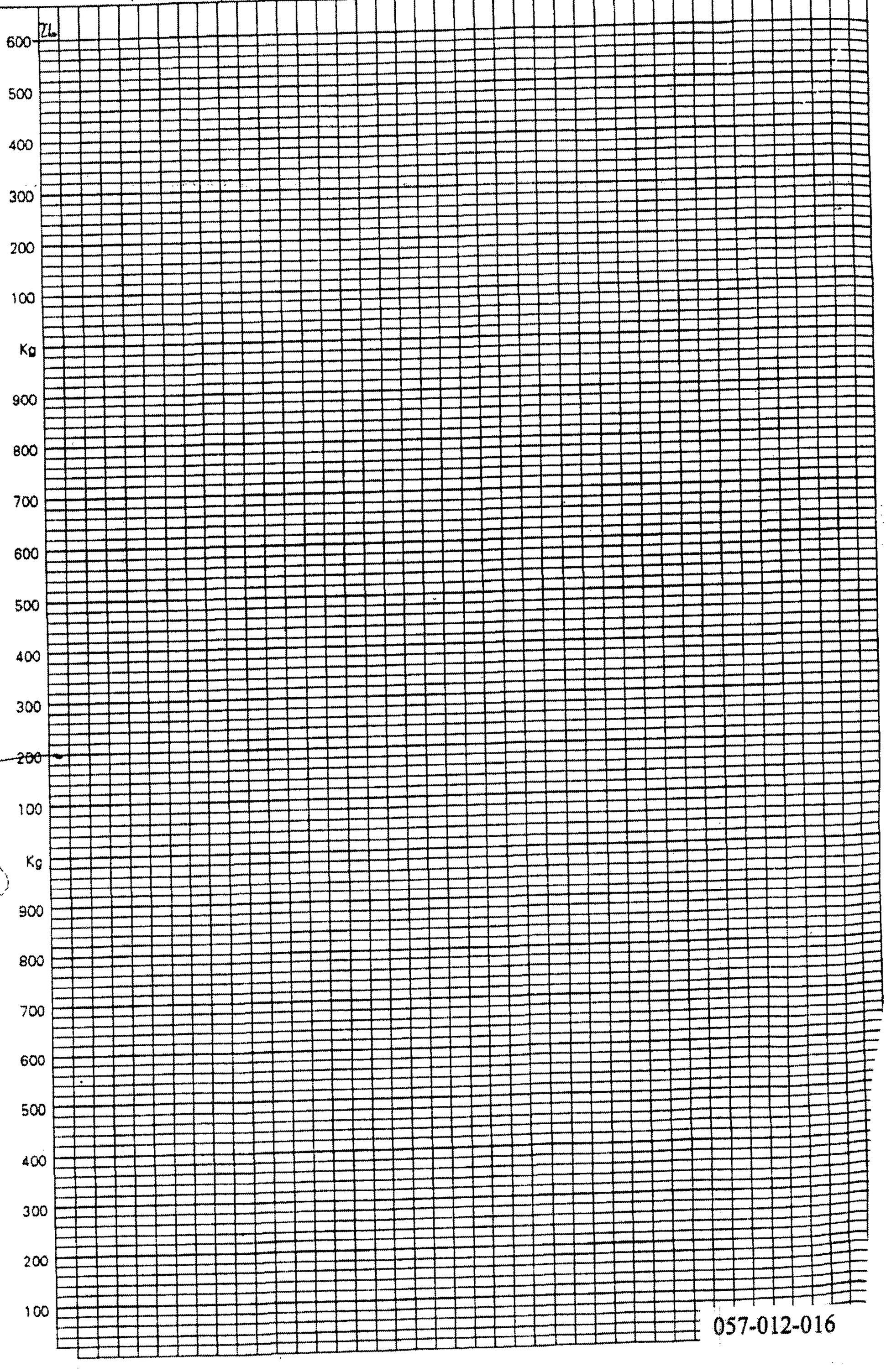
BIRTH WEIGHT

D.O.B.

M/F

YEAR 95 MONTH NOV

DATE



20

057-012-016

AS - PSNI

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

057-013-017

PATIENT'S NAME ADAM STRAIN

WARD MUSGRAVE

ADDRESS [redacted]

HOSP. NO. 364377

TEL. NO. [redacted]

SEX

AGE 4yr D.O.B. 4/8/91

RELIGION/BAPTISM

CONSULTANT DR SAVAGE

NAME KNOWN BY ADAM.

NEXT OF KIN (Relationship) MOTHER

NAME DEBORAH STRAIN

ADDRESS AS ABOVE

TEL NO. Day Night

WHO ACCOMPANIED PATIENT Mother

WHO MAY CONSENT TO TREATMENT MOTHER

SCHOOL/PLAYGROUP/NURSERY —

REASON FOR ADMISSION Possible Kidney transplant

PARENTS/PERCEPTION OF ADMISSION Deborah understands

DATE AND TIME OF ADMISSION 26/11/93 9 am.

PREVIOUS ILLNESSES/HOSPITAL ADMISSIONS/CONTACT WITH INFECTIOUS DISEASES

PREVIOUS ILLNESSES Dysplastic kidneys Obstructive uropathy

HOSPITAL ADMISSIONS numerous

RECENT CONTACT WITH INFECTIOUS DISEASES None.

IMMUNISATIONS RECEIVED Up to date

CURRENT MEDICATION Sod bic. Keflex. Kefzole One alpha Cal. Carbonate Ferrosmol.

KNOWN ALLERGIES None

DENTURES (Include crowns, plates) loose teeth

OTHER PROSTHESIS

DISCHARGE DETAILS

GP LETTER YES/NO

O.P. APPOINTMENT .....

MEDICATION YES/NO

COMMUNITY REFERRAL

HEALTH VISITOR

DISTRICT NURSE

SOCIAL WORKER

OTHERS

AS -PSNI

	USUAL/NORMAL ROUTINES	NURSING ASSESSMENT
COMMUNICATING AND SPECIAL NEEDS	Very active chatty	
MAINTAINING A SAFE ENVIRONMENT	Full Supervision	
BREATHING AND CIRCULATION	no problems normally.	Nothing noted.
CONTROLLING BODY TEMPERATURE	No problems normally	Apyrexic
EATING AND DRINKING	Feeds - bolus during day + continuous overnight	
ELIMINATING	wears a nappy. Passes large amounts of urine - Peritoneal dialysis overnight	
POSTURE AND MOVEMENT	walks + runs unaided	
REST AND SLEEP	sleeps in a bed	
PERSONAL HYGIENE	needs assistance	
DRESSING	needs assistance.	
PLAY AND EDUCATION	very active + happy	
EXPRESSING SEXUALITY		
MEETING SPIRITUAL NEEDS		
SOCIAL HISTORY	lives c mum + grandparents.	

VITAL SIGNS

T. 36.4 P. 97

R. B.P. 108/56

HT. WT. 26.2

URINALYSIS

Bag urine.

CONDITION OF SKIN HAIR AND TEETH

SIGNATURE OF ACCOUNTABLE NURSE

Catherine Murphy

DATE AND TIME 26/11/15

057-013-018

AS - PSNI

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

Fluid Balance and I.V. Prescription Sheet

Date 26/11/95

Weight 20.2 Kg

Name	D.O.B.	Hosp. No.
ADAMS STRAIN		364377

.8 SA. .8

3m

TIME (hr)	INTAKE						OUTPUT			
	INTRAVENOUS				ORAL		Urine	Aspirate or Vomit	Stool	
	1 Level	1 Amount	2 Level	2 Amount	Fluid	Amount				
17.00										
18.00										
19.00										
20.00										
21.00										
22.00										
23.00	5/N @ 20mls/hr				Glucuds @ 18mls/hr					
24.00										
01.00		18				269	NPN			
02.00	TISSUED.				P 200 mls/hr	403	Pn		BAD.	
03.00						569.				
04.00										
05.00						952,				
06.00										
07.00										

Total Intake		Total Output			
Intravenous ml	Oral ml	Urine ml	Aspirn ml	No. of Vomits	No. of Stools

24 – Hour INTAKE ml

24 – Hour OUTPUT

057-010-013

AS - PSNI

20 2kg

Name..... Date...../...../..... Hosp. No..... Wt..... Kgs

INTRAVENOUS FLUID PRESCRIPTION CHART

	AMOUNT (mls)	TYPE OF FLUID	NAME and AMOUNT of ADDITIVES	RATE mls/hr	TIME Start	TIME Finish	Prescribed by	ERECTED BY
1	500mls	0-18% NaCl 4% Dextrose		75			J Cranston	
2	500mls	0-18% NaCl 4% Dextrose		75			J Cranston	

TOTAL VOL

Per.....Hrs. .....mls. .....mls/kg

TOTAL ENERGY

.....kcals .....kcals/kg

PROTEIN	DEXTROSE	Conc.	FAT	Conc.
Vol. Cals.	Vol. Cals.		Vol. Cals.	

Amino Acids (grams)	Nitrogen (grams)	Nitrogen/Cal Ratio	CHO (grams)	Other Additives
Fat (grams)	NaCl mmols	Na Lactate mmols	K + mmols	
Cl− mmols	Ca + + mmols	Mg + + mmols	PO_4 = mmols	
Addamel (mls)	Solvito (mls)	Vitlipid (mls)	Critical Ag. Conc.	

057-010-014

AS - PSNI

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

057-014-019

DATE/TIME	EVALUATION	SIGNATURE	ADDITIONAL INFORMATION	SIGNATURE
26/11/95 10pm	admitted for renal transplant.			
	Clear fluids via gastrostomy @ 180mls/hr			
	I.V fluids @ 20mls/hr.			
	Normal PaC x until 6am.			
1.30 AM	I.V Cannula ~~issued~~ removed. Dr O'Neill informed			
4	Gastrostomy fluid ↑ 200mls/hr. Resection			
	of Cannula @ 5am.			
7AM	Transferred to theatre			

NAME ADAM STRAIN

AS - PSNI

$\frac{6}{20}\ \frac{2}{1}$

$12\overline{)120.0}$ → 1.6

$\frac{17}{86}\ \frac{.2}{72}$

$\frac{.25}{8}$ → 200

$\frac{500}{50}$

$\frac{50}{500}$ 10

500

$\frac{750}{36}$ → 4500

EASTERN HEALTH & SOCIAL SERVICES BOARD
ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

PRESCRIPTION SHEET 20/2kg

PARENTERAL DRUGS

REGULAR PRESCRIPTIONS

DRUG SENSITIVITI

Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration: AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times	Method and other Instructions	SIGNATURE	Discontinued: Date	Initials

DRUGS-ONCE ONLY PRESCRIPTIONS

Date Given	DRUG (Block letters please)	DOSE	Time of Admin.	Method of Admin.	SIGNATURE	Given by Initials
25 Mar	Vancomycin	25mg	[illegible]	[illegible]	[illegible]	
26 Mar	Gentamycin	6mg	[illegible]	[illegible]	[illegible]	
		0.6ml				
27 Mar	Amoxiclav	25mg	10.30 am	IV	[illegible]	[illegible]

057-021-033

AS - PSNI

			Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
			6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			e	Init
G	27/11/95 Paracetamol	240g	4	4	4hly	PRN						via gastric tube	[illegible]		
H															
I															
J															
K															
L															
M															
N															
O															
P															
Q															
R															
S															
T															
U															

	Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration: AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times	Method and other Instructions	SIGNATURE	Date	
V																
W																
X																
Y																
Z																

DIET

Date	Details	Initials

TAKE HOME DRUGS
INDICATE BY LETTER

Ward	Name of Patient	Age	Hospital Number	Consultant
Surgical	Adam Strain			

057-021-034

AS - PSNI

Ward

N° of Patient

ADAM STRAIN

REGULAR PRESCRIPTIONS — DRUG RECORDING SHEET

Date	6 a.m.	8.30 a.m.	12 noon	12.30 p.m.	5.30 p.m.	6 p.m.	9.30 p.m.	12 mn.	Other Times
26/11/25									2AM G DK