

The witness described starting work at 7.45am. She commented that Mr. Ferguson had been getting tea when Raychel pointed out the mistake on the chart. She noted no deterioration in the patient's condition, and she said this did not cause any concerns in her professional opinion. Again, she was aware of Mrs. Ferguson's disagreement.

With reference to the '+' system and the entries on page 37 of the notes Mr. suggested that there was a 'large' vomit at 10.00am, then two 'medium' ones. The Staff Nurse replied she had seen only one, but was aware Raychel had vomited, and that it was a 'medium' vomit from '+' '+' being noted. When asked if nurse Rolston had signed for the fluids, she said she did not know, and 'maybe' it had been. As before the Corner ruled these questions could go no further as Mr. Gilliland had addressed these points.

Mr. McAllinden asked Staff Nurse Rice when it was she last saw Raychel, to which she replied that it had been about 7-8.00pm when she was going off duty.

At this point both parents, who had been muttering throughout both nurses' evidence, shouted 'that's a lie', Mrs. Ferguson, crying, shouted 'my daughter died because of what you did and you're lying'. Shaken, the witness began crying. Mr. Leckey strongly admonished both parents, saying they would be removed if the behaviour was repeated, specifically saying to Mrs. Ferguson that but for the fact of who she was, she would have been removed by security staff. Mr. McAllinden asked no further questions.

Evidence of Staff Nurse Noble.

The Staff Nurse read her deposition with the following amendments:-

- * References throughout to 'committed' changed to read 'vomited'
- * At page 2, paragraph 3, 'Surgical SHO' changed to read 'Surgical JHO'
- * At page 4, paragraph 2, 'Staff Nurse Gillespie' changed to read 'Staff Nurse Gilchrist'

Mr. Leckey clarified that *Flagyl* was an antibiotic. Again, the witness said she was unaware of hyponatraemia. She had been a nurse for fourteen years, with four years break, ten years in total. She became involved after Sister Millar before Raychel's fit.

She had been informed by Nurse Gilchrist of the appearance of 'coffee ground' material in the patient's vomit, she then thought an anti-emetic might be appropriate.

Mr. Foster asked the Staff Nurse if she knew the difference between saline and No. 18 solution, she replied that No. 18 solution had about a fifth the amount of sodium on it, she knew it at that time also.

Nurse McAuley (Rice) had told her Raychel had been sick, and Zofran had been prescribed. The witness was unaware of vomiting at 9.30am. When Mr. Foster referred her to page 37 Mr. Leckey commented that the Nurse had stated she was unaware of hyponatraemia, and the questions depended on the witness knowing about the condition. Mr. Foster said in submission all were aware of the individual elements of the condition, but no one person put everything together.

Staff Nurse Noble had not been concerned about the vomiting as fluids were being replaced, all solutions contained saline. Mr. Foster began to ask about 'coffee ground' material, and once more the Coroner said he would not go over this again.

The witness said she was not concerned by three 'small' vomits, even up to twenty hours after surgery, she had seen patients in the same position vomit more, and this was not unusual.

Questions were not permitted regarding a what time the witness said Raychel's parents left, Mr. Leckey said this was for a civil trial if necessary.

Staff Nurse Noble said she had tried to contact by telephone Mr. Ferguson but got no answer. Nursing Assistant Lynch had informed her that Raychel was fitting, alerted by the noise she had been in the next cubicle. The Coroner again halted a question on the volume of vomit referred to in the deposition.

Mr. McAllinden had no questions.

Evidence of Staff Nurse Gilchrist

The witness read her deposition, again, as those nurses before her had, she said she had no knowledge of hyponatraemia in her personal experience, but had heard of it. It had not crossed her mind at the time. She also said she had not been concerned by the vomiting, as it was not unusual in post-operative children.