

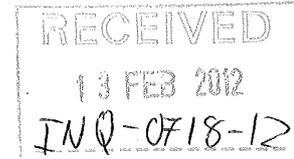
2 Franklin Street, Belfast, BT2 8DQ  
DX 2842 NR Belfast 3

Your Ref:

Our Ref:  
HYP B04/01

Date:  
10.02.12

Ms Bernie Conlon  
Secretary to the Inquiry  
Arthur House  
41 Arthur Street  
Belfast  
BT1 4GB



Dear Madam,

**RE: INQUIRY INTO HYPONATRAEMIA RELATED DEATHS**

I refer to the above and previous correspondence herein. We have today consulted with Ms E Boyce (formerly Donaghy). Having gone through the original the UKSSTA transplant form (document 058-009-027) with Ms Boyce we note that some of the detail thereon is not apparent from the copy displayed on the Inquiry website. I enclose a further copy of same for your information and you will note that the information which is not legible from the copy on the website is "? Third artery tied off. + cut off patch".

I trust that this is in order.

Yours faithfully,



Joanna Bolton  
Solicitor Consultant  
Email: 

*Providing Support to Health and Social Care*



INVESTOR IN PEOPLE

U L Z U 4 U

**RIGHT KIDNEY**

24. Time perfusion commenced (24hr clock) 01:42 Time (24hr clock) 01:42

25. Quality of perfusion 3/7  
 1. good  
 2. fair  
 3. poor  
 9. not recorded

**Anatomical Details**

No. of arteries 1 No. of arteries 2

No. of arterial patches 1 No. of arterial patches 1

No. arteries on patches 1 No. arteries on patches 3

No. of veins 1 No. of veins 1

**Branches tied?**

1. no   
 2. yes   
 9. not recorded

**Kidney Damage**

Capsule stripped  Capsule stripped

Capsule torn  Capsule torn

Small Haematomas  Small Haematomas

Cut Polar artery  Cut Polar artery

Cuts to renal vein  Cuts to renal vein

Cuts to renal artery  Cuts to renal artery

Patch excluding an additional artery  Patch excluding an additional artery

Ureter cut short  Ureter cut short

Other, please specify  Other, please specify

**LEFT KIDNEY**

Time (24hr clock) 01:42

Quality of perfusion 1

No. of arteries 2

No. of arterial patches 1

No. arteries on patches 3

No. of veins 1

**Branches tied?**

1. no   
 2. yes   
 9. not recorded

Line organ: Lymph node 2 Lymph node

Spleen 2 Spleen

Blood 1 Blood

Separated cells 1 Separated cells

**Additional Information**

HEART LUNGS LIVER + GALLBLADDER ALSO RETRIEVED

This section of the form completed by DEBORAH WORSLEY (NAME PLEASE PR)

Signature [Signature] Date 26 11 1999

**SECTION II TO BE COMPLETED BY THE RECIPIENT SURGEON**

1. Recipient Name ADAM STRAIN

2. Transplant Centre BELFAST

3. Kidney removed from ice at time 08:30 (24hr clock)

4. Kidney perfused with recipient's blood at time 10:30 (24hr clock)

5. Recipient's Blood Group, including rhesus and where known, subtypes of A A

6. Recipient's HLA phenotype

HLA - A	<u>1/32</u>
HLA - B	<u>44/14</u>
HLA - DR	<u>7/8</u>
Other loci	