

EXPERTS' MEETING 22<sup>ND</sup> FEBRUARY 2012

NOTE: INFORMATION TO BE GIVEN TO EXPERTS

1. Prof. Gross sought clarification on the sodium concentration in Adam's 1.36% dextrose dialysis solution. He had understood that this solution had a sodium concentration of 132mmol/L. Our research has shown that this type of solution has a sodium concentration of 132mmol/L.
2. The usual number of peritoneal dialysis cycles: Adam commenced on dialysis "of 1.36%" on 24 August 1994<sup>1</sup>. Adam normally received peritoneal dialysis 6 nights a week with 750ml volume cycles and 15 cycles given over 13 hours on a normal evening.<sup>2</sup> On the 26<sup>th</sup> and 27<sup>th</sup> November 1995 Adam had a shorter period of dialysis with 8 cycles for a period of approximately 7-8 hours with 750 ml fluid volume cycles of 1.36% Dextrose solution.<sup>3</sup> The peritoneal dialysis in PICU was intended to have 10 cycles of 1.36% Dextrose solution also<sup>4</sup>
3. Prof. Kirkham asked whether Adam had an EEG in PICU after his surgery on 27<sup>th</sup> November 1995. There is no record of an EEG. There was an ECG mentioned in the printed nursing care plan at Ref: 058-038-153.
4. Drugs administered as recorded in the anaesthetic record. To be discussed at meeting.
5. Prof. Gross asked whether Adam had major hyperkalemia problems (p.34 transcript). We have provided a table to assist you.

6<sup>th</sup> March 2012

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<sup>1</sup> Ref: 056-029-061

<sup>2</sup> WS001/2, p.4 Q12, WS002/3, P. 8 Q2(n). Ref: 058-035-143

<sup>3</sup> WS002/3, p.8, Q2(n), Ref: 011-001-001, 011-015-109 to 011-015-110

<sup>4</sup> Ref: 058-015-021