

Directorate of Legal Services

PRACTITIONERS IN LAW TO THE HEALTH & SOCIAL CARE SECTOR

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

Your Ref: AD-0510-13

Our Ref: HYPW50/1 Date: 26th February 2013

Ms A Dillon Solicitor to the Inquiry Inquiry into Hyponatraemia-related Deaths Arthur House 41 Arthur Street Belfast BT1 4GB



Dear Madam

RE: INQUIRY INTO HYPONATRAEMIA RELATED DEATHS - RAYCHEL FERGUSON

We refer to the above and to your letter dated 31st January 2013, referenced above.

We now attach copy signed letter which we have now received from Mr Gilliland, in response to points 1, 2, 3, 4 and 6 of your said letter.

We shall provide you with the Western Trust's response to point 5, under separate cover.

Yours faithfully

Angela Crawford Solicitor

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Providing Support to Health and Social Care







Dear Ms Beggs

Further to the recent letter from Ms Dillon dated 29-1-2013, here are the answers to the questions posed by the inquiry.

1. Under 5.3 (ii)

UpToDate(<u>www.uptodate.com</u>) is an online resource for medical knowledge that has been in existence for approximately 20 years. The website provides an easily accessible resource for doctors where research evidence for the diagnosis and management of the majority of medical conditions are summarised. This resource is used by an estimated 700 000 doctors around the world (according to data published on its own website).

The knowledge contained in UpToDate is evidence-based and continuously updated and is used to provide recommendations that can be acted on at the point of care. Each topic has an author who is an expert in the area discussed, and at least two separate medical reviewers. This group works together under the direction of an Editor-in-Chief to perform a comprehensive review of the literature and carefully select studies for presentation based on the quality of the study and the clinical relevance.

The quotation which I set out in my answer is taken from an article on Acute Appendicitis in Children and outlines the advice with regards the use of analgesia. The paper quoted in this article (Green et al. Pediatrics 2005; 116; 978-983) is included in the literature submitted with my statement (044/3).

2. Under 5.3 (v)

I believe it is highly likely that I was informed about Raychel on the morning of the 8th June because it would be my usual practice to inquire about all patients admitted under my care and to ensure that they were progressing satisfactorily.

3. Under 7.2

It was my responsibility as the Consultant to ensure that all patients admitted under my care were reviewed by a member of the team who was competent to assess that patient's progress or who would consult with a more senior member of the team if they felt that they could not manage the patient competently. The members of the surgical team understood that all patients needed to be seen and would often take responsibility for reviewing patients. Thus, whilst I would usually conduct the post-take ward round, on occasions there were patients who would be reviewed by other members of the team rather than myself.

4. Under 12.7

Mr Bhalla states that he performed an examination on Raychel and made arrangements for her further care (095-017-075). Given the nature of this examination and the steps that were apparently taken thereafter, I would have expected Mr Bhalla to have made a clinical note. On reviewing the clinical notes it is apparent that Mr Bhalla did make a clinical note at that time (020-007-014).

RF - INQ 316-054-002

6. Under 6.5

"The advice that was given was to commence oral fluids and step down the IV fluids" is my interpretation of the advice given by Mr Zafar on the morning of the 8th June and is based on his statement (WS-025/1 p.3, Q1 ii) in which he says "I advised to start sips of oral fluids and gradually reduce the IV fluids. The plan was to stop IV fluids as soon as she was tolerating the oral fluids"

Yours sincerely

Robert Gilliland

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