		Witness Statement Ref. No.	050/1					
NAME OF CHILD: Raychel Ferguson								
Name: Nurse								
Title: Registered General Nurse								
Present position and institution:								
Previous position and institution: [As at the time of the child's death]								
Membership of Advisory Panels and Committees: [Identify by date and title all of those between January 1995-December 2004]								
N/A								
Previous Statements, Depositions and Reports: [Identify by date and title all those made in relation to the child's death]								
None								
OFFICIAL USE: List of previous statements, depositions and reports attached:								
Ref:	Date:							

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Particular areas of interest

[Please attach additional sheets if more space is required]

- 1. Describe in detail your role in the treatment and care of Raychel Ferguson in theatre at Altnagelvin on the $7^{th}/8^{th}$ June 2001, to include:
 - (i) your concerns and observations in respect of Raychel at that time;
 - (ii) your understanding of the post operative i.v. fluids to be administered; and
 - (iii) whether the arrangement in respect of post operative fluids that day were, in your experience, in accordance with normal practice.

I am a Registered General Nurse. I qualified in 1976 and have been a theatre nurse since 1977. I have been on night duty in theatres Altnagelvin Hospital since 1980. In the context of the Theatres and Recovery area I am trained in Fluid Balance Management and documentation.

On the night of 7 June 2001 I was the nurse in charge of theatre along with Staff Nurse Vivienne Ayton and Registered Nurse Heather.Shaw. At 7.45pm when we commenced duty we were informed that a nine year old child Raychel Ferguson would be coming to theatre after 11.00pm for an appendicectomy. The child had eaten a solid meal at approx. 5.00pm therefore the anaesthetic registrar Dr Gund who assessed the child in the ward decided to wait until she was fully fasted before proceeding with surgery. (See 020-009-017)

Raychel arrived in the anaesthetic room at 11.30pm (See 020-012-020) accompanied by her mother and the ward nurse. I observed that she seemed a bit Lethargic and apprehensive and she told me her tummy was sore. I reassured her and explained to both herself and her mother what was going to happen while in the anaesthetic room, operating theatre and recovery. I then commenced the Theatre Nursing Care Plan and checked with the ward nurse any allergies Raychel may have had. I checked the blood results from the nursing notes. (See 020-007-012) Raychel had a Venflon in situ in her right arm through which she had been receiving intravenous fluids No.18 solution in the ward. These fluids were discontinued before coming to theatre as was normal practice. I was informed the fluids had been up for about an hour

(See 020-020-039 and 020-021-040).

Raychel was then moved from her bed onto the operating table and attached to various routine monitors which were, ECG monitor, oxygen saturation monitor, and blood pressure monitor. She seemed less apprehensive at this stage as Dr Gund had given her an injection through the Venflon to relax her (See Fenraryl and Cyclimorph in the Controlled Drugs used box at bottom of 020-012-020) Dr Jamison the anaesthetic SHO was also present in theatre. At this stage 1 Litre of Hartmann's Solution was attached to the venflon in the right arm via a paediatric giving set and the infusion commenced. The paediatric giving set has two chambers one of which can hold increments of 100ml so as the anaesthetist can calculate the amount of fluid given. The hove relating to the administration of Hartmann's solution is contained in the anaesthetic record 020-009-016. The anaesthetic drugs were then administered and Raychel's mother left theatre accompanied by the ward nurse. Following induction of anaesthesia and before surgery commenced by Mr. Makar I administered Voltarol supp 12.5mg and Paracetamol supp. 500mg P.R at 11.40pm as ordered by Dr Gund. (See 020-013-021 and 020-017-034) The operation then proceeded uneventfully (See 020-013-021) and at approx 12.30am Raychel was moved back to her own bed. As in normal practice at night time Raychel was kept in theatre to recover as the recovery ward is closed at night (See 020-014-022). Raychel was quite slow to wake up but the anaesthetist felt this was due to the opioid drugs administered. Her observations including heart rate, respiratory rate, blood pressure and oxygen saturation were all within normal limits (See 020-014-022) The intravenous infusion of Hartmann's Solution was still in progress and running



satisfactorily. Dr Jamison was present in theatre while Raychel was being recovered. When she woke Raychel was not in any pain and did not feel sick therefore she did not require any drugs in recovery. At 1.30am Raychel was ready to go back to the ward so I rang for the nurse to take her back. At this stage the infusion of Hartmann's Solution was discontinued with fluids to be recommenced on ward (See 020-014-022). When the ward nurse arrived in theatre I gave her the report including the findings at surgery, which concluded that the appendix was mildly congested. (See 020-010-018) I then checked that post-op pain relief was documented in the Medicines Kardex (See Cyclimorph 10 row A 020-017-035). Finally I checked the fluid balance chart and anesthetist's verbal instructions which stated that No 18 solution which was in progress pre-op should be re-commenced on return to the ward (See 020-020-039) In my experience children were given Solution 18 in ward prior to surgery. In surgery and recovery they were given Hartmann's Solution. This was discontinued when they left recovery and Solution 18 was recommenced in ward which in my experience was in accordance with normal practice.

At approx 1.50am after checking that Raychel was feeling alright she returned with the nurse to the ward.

Other points you wish to make including additions to any previous Statements, Depositions and or Reports						
[Please atta	ch additional sheets if mo	re space is require	ed]			
Signed:	MML Grath			Dated:	30-6-05	
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Altnagelvin Hospital Londonderry



General Training School for Aurses
This Certificate is awarded to

Mary Carmet Grant

/ / / / / lave	
who has completed a www. Training and Lectures fi	years Course of
to lebruary 1916 in	
Regulations for the North	
for Nurses and Midwe	ives
for Nurses and Midwe Buig By a District Administrative	Geeald G. Smyth
District Administrative Nursing Officer	Grincipal Nursing Officer (Education)
Eugene P. Y	min
Chairman, Medical	Staff Committee
Dule 1-4-176.	Signature of Nurse



Reg. No. A.....17535......

NORTHERN IRELAND COUNCIL FOR NURSES AND MIDWIVES (1970 Ch. II)

It is hereby Certified that

MARY CARMEL GRANT

Midwives, on....20th February 1976 tained by the Northern Ireland Council for Nurses and was admitted to the General part of the Register main-

and Midwives Act (Northern Ireland), 1970, to take and use the title of "Registered Nurse" without limit of and that ... She ... is entitled, in pursuance of the Nurses

Chairman of Council

The Seal of the Council was hereunto affixed this

.....day of

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Director of Nursing and Midwifery Education

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NURSING MIDWIFERY COUNCIL

Protecting the public through professional standards

MN: 73/4.0250N NAME: MC McGrath

EXPIRY DATE: 02/06

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North & West In-Service Education Consortium

Certificate of Attendance

is awarded to

Marian McGrath

who attended the undermentioned in-Service programme Annesthetic Nursing Module

20 Credit Points at Level 2 awarded by the University of Ulster

Duration One Semester

Date(s)

January – June 2002

In-Service Nurse Teacher

A & bokar



FEMORAL FRACTURE MANAGEMENT FOR NURSES

This is to certify that

MARRAN McGRATH

Has successfully completed the above course held at The Stormont Hotel, Belfast

15 June 1996

The Course consisted of practical workshops and theoretical instruction

6

Smith⊕Nephew

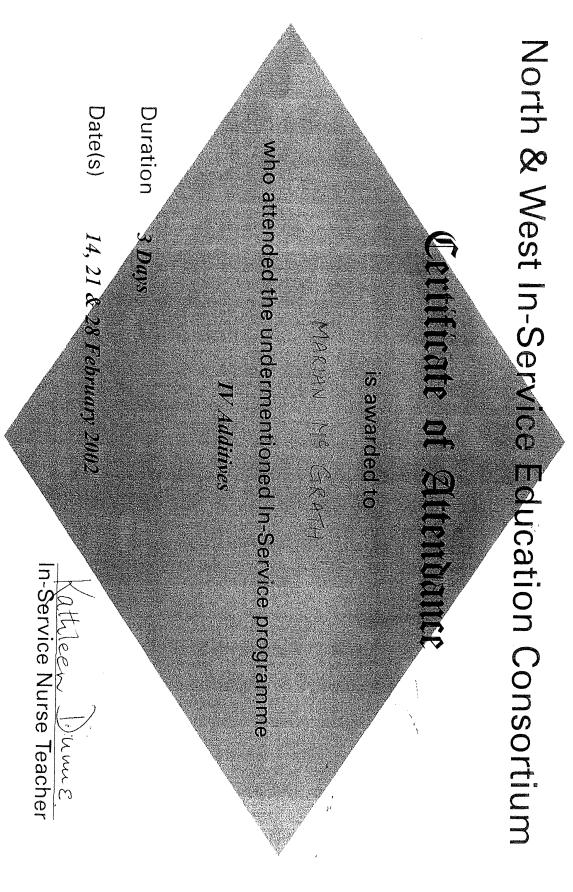
Consultant Orthopaedic Surgeon Royal Victoria Hospital, Belfast

Mr G McCøy FRCS

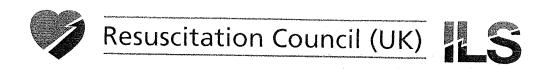
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Certificate

Awarded to: / / WKIUW / W QKAIN_	
For successfully completing the	
Immediate Life Support Course	
Demonstrating skills in:	
Basic Life Support	
Basic Airway Management	
Defibrillation: Manual AED	
LMA DATE AND	
Combitube 🗍	Į.
On: 19 April 2002	
At: Altnagelvin Hospital.	
I confirm that this course adhered to the Resuscitation Council (UK) ILS Course core programme, using the recommended course	e des
materials and in accordance with the Council regulations. This certificate is valid for one year.	
Signed by: USSWA M Collum. (Course Director)	
Name and title: URSULA MCCOLLUM, RESUSCITATION OFFICE (Please print)	ER.
Hospital: ALTNAGELVIN	
Candidate reference number:	
Course reference: ALT-19/04/2002-Ursula Mc Collum	
The award of this certificate indicates that you have successfully completed the ILS Course but does not constitute a licence to practise. This is a matter for your employer who may recommend further training.	

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