

**STATEMENT OF MR ROBERT LANGSTON****14. The Arterial Switch**

He described the Arterial Switch as a new development in major heart surgery. He drew a diagram to show us what the operation entailed, and said that the heart would have to be removed. He also described the Senning, but I could tell that he didn't really want Oliver to have it. He said that the Senning operation involved replacing the valves in Oliver's heart, and that they would have to change these in other operations, which would be needed every couple of years. Mr Dhasmana said that, if Oliver had the Arterial Switch, he would never have to be operated on again. He stated that we would not see the operation scar, but emphasised that Oliver's operation would have to be performed before he was fourteen days old.

**15. Lack of Space at the BRI**

Because of circumstances at the BRI, Mr Dhasmana said that he could not guarantee that Oliver would be operated upon within this timeframe, and that he would have to beg for bed space, and time in the operating theatre. He said that he would contact us in a day or so, in order to give us further details.

**16. My Father's Plan to Arrange Private Treatment for Oliver**

After this meeting with Mr Dhasmana, we went back to see Oliver. My parents were at his bedside, as they were visiting us. When we told them what Mr Dhasmana had said, my father stated that he wanted the operation to be arranged and performed privately, and that he did not care what this cost.

Signed RJ Langston  
Dated 16<sup>th</sup> June 99

**STATEMENT OF MR ROBERT LANGSTON****17. My Father Tells Mr Dhasmana of his Intention**

When we saw Mr Dhasmana the next day, my father (who was present at the meeting) told him of his intention to arrange for the operation to be done privately. Mr Dhasmana stated that there was no way that he was going to let us take Oliver out of the BCH to have his operation performed elsewhere. The reason he gave for this was that Oliver needed the operation as soon as possible, in order to prevent the heart muscle from thickening: if it did that, the heart would not develop to its full potential.

**18. The Risks Involved**

When we asked him what might go wrong, he said that there was "75% approval" that the operation would work. He said it was a straightforward operation, but also stated that it was fairly new. Mr Dhasmana seemed generally dismissive when we saw him on this occasion, and I had the impression that he thought that the things we were asking him about were not relevant.

**19. Oliver is Taken to the BRI**

On the eleventh day of Oliver's life, we met a priest, and said that we wanted him to be christened. The next day, at about lunchtime, Julie rang me at work to say that Mr Dhasmana had told her that a bed at the BRI and operating time were now both available. I was relieved by this, but nevertheless found the prospect of Oliver's operation nerve-wracking. When Oliver was transferred from the BCH to the BRI, at around 4 or 5 p.m., both Julie and I were there. They had arranged for Oliver to be taken in an ambulance, and I remember that he was still looking healthy. We were taken into a ward upstairs in the BRI.

Signed RJ Langston  
Dated 16<sup>th</sup> June 99