

Re: Daniel WILLIS

I have looked at Daniel Willis's notes (17 November 1999), including the anaesthetic chart for his operation on 25 May 1993.

On the anaesthetic chart, the anaesthetists written as being involved with the anaesthetic on 25 May 1993 are SM/GABBOTT. The SM refers to me, Sally Masey.

The writing in this box is that of Dr. David Gabbott (this can be seen from further writing inside the anaesthetic chart), who was an anaesthetic trainee.

The writing in the assessment section is different. It is not my handwriting, nor is it Dr. Su Underwood's, nor is it Dr. Gabbott's. I have looked at the anaesthetic rotas for this period and these rotas suggest that it would have been myself who would have been scheduled to anaesthetise for Daniel's operation on 25 May 1993. The only other consultant's name on the rota for that date was Dr. Bolsin, with a query that he may have only been available for the morning. As I was on call that night, it was our normal organisation that the anaesthetist on call would anaesthetise the paediatric case, if one was scheduled.

It is my normal practice to see patients, and parents if the patient is a child, the night before surgery. It is not possible from reading the notes to ascertain if that was the case for Daniel. I see from the notes that Daniel was transferred from the Special Care Baby Unit at St. Michael's Hospital to Ward 5 at the BRI on 24 May 1993. There is no note as to the time of his transfer. If this had occurred late on 24 May 1993 then it is just possible that I had already gone home and that I asked the on call trainee to see the patient for me. From looking at the anaesthetic on call rotas for this date I note that the trainee on call on the night of 24 May 1993 was Dr. Pippa Swayne. I do not know whether the handwriting in the assessment box is Dr. Swayne's. However, Dr. Swayne does have children, and at that time she may have had a child who was 5

months old. Consequently, it may have been Dr. Swayne who had the conversation with Mrs. Willis that she so vividly recalls. I am certain that it was not Dr. Su Underwood as she was not rostered for duties that week at all and I have subsequently checked with her to discover that she was on annual leave.

It is understandable that this confusion has arisen as Dr. Underwood's name would automatically be given if someone queried who the anaesthetist was and she was described as having young children. There are only two female consultant anaesthetists who undertake anaesthesia for cardiac surgery, myself and Dr. Underwood, and I have no children. However, the person who told the Willis's that the anaesthetist must have been Dr. Underwood failed to remember that we do have female trainees, who have children, who do training attachments to cardiac anaesthesia.



Dr. Sally Masey, Consultant Anaesthetist

17 November 1999