

## GOSPOAT-Inquest (i)

# Code A

- 2 Lise Lavender (dec) <sup>died '96</sup> Multiple medical problems. Lack of documentation. Inadequate assessment. Likely to be terminal phase of illness. Cannot say if death was hastened (Black). Dr Barton - suboptimal care - Excessive diamorphine. "Could have contributed to her death (Wilcock).
- 3 Melena Sencè (dec) - Died '97 Cause of death was unsatisfactory. Diamorphine and Midazolam given. Cannot prove that life was shortened - even if so - hours or days (Black). Diagnosis was hopeless (Petuk). Excessive diamorphine. Difficult to distinguish if A contributed to death.
- 4 Ruby Lake (dec) - Died '98  
Lack of medical record keeping. Doubt whether in terminal phase of illness. Inappropriate use of  
h

(ii).  
 diamorphine "could have contributed more than  
 minimally to death. (Wilcock).

5 Arthur Cunningham (dec) Code A No doubt that he was

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Dr Sutton -  
 inadequate records. Large doses of diamorphine - but  
 were not administered. Use of diamorphine was  
 appropriate (Wilcock). Challenging and complex  
 problem. Multiple illnesses. Managed appropriately.  
 Cannot say if increased dosages hastened his life.  
 (Black).

6 Robert Wilson (dec) Code A

Poor documentation. Prescription of morphine was  
 excessive - contributed more than minimally to death.  
 (Black). Lack of note keeping. Large dose of morphine  
 difficult to Code A with certainty of large dose contributed  
 to death (Wilcock).

7 Eric Spurgin (dec). Code A

Prognosis was poor. Lack of assessment - lack of  
 documentation. Starting dose of diamorphine was  
 too high. Cannot say death was hastened by anything  
 other Code A Inappropriate  
 doses of diamorphine - "would" have contributed more  
 than minimally to her death. (Wilcock).

Geoffrey  
& Pamela (Dec). (iii). Code A. Higher than  
conventional dose of diamorphine. Died of natural  
causes - little difference to the eventual outcome (Black).  
Doses of diamorphine not justified. Dr Barrow. Believe  
that GI haemorrhage was not adequately managed.  
Should have been managed. Contributed to his  
death (Wilcock).

9 Elise Reuné (Dec) Complex and challenging  
problem in geriatric medicine. Lack of documentation.  
Drug treatment "suboptimal". Life may have been  
shortened by hours or days. Terminally ill. Cannot say  
if the care was negligent (Black). Dying from a  
combination of amyloidosis, progressive renal failure  
& dementia. Had undetected infection. (Dudley).  
Sub-optimal care. Failure to keep records. Doubt that  
she had entered a terminal phase. "could" have  
contributed more than minimally to death.

10 Sheila Gogony (Dec) Died '99. Code A  
Very poor prognosis. Documentation unsatisfactory. Died  
of natural causes - adequate management. (Black).  
Not an appropriate use of diamorphine. Lack of documentation.  
Natural decline - in terminal phase of death. (Wilcock).