

**RESTRICTED**

Form MG11(T)

Page 1 of 5

**WITNESS STATEMENT**

(CJ Act 1967, s.9; MC Act 1980, ss.5A(3) (a) and 5B; MC Rules 1981, r.70)

Statement of: LANCASTER, TESSA VICTORIA

Age if under 18: OVER 18 (if over 18 insert 'over 18') Occupation: CONSULTANT RADIOLOGIST

This statement (consisting of 6 page(s) each signed by me) is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated anything which I know to be false or do not believe to be true.

Signed: Tessa V LANCASTER

Date: 13/01/2005

I qualified as a doctor in 1975 gaining a MBChB, Bachelor of Medicine and Surgery degree at Leeds University. I became a FRCR, Fellow of the Royal College of Radiologists in 1981. This qualification is part work base experience and examination and allowed me to become a radiologist. I have been a consultant radiologist for Portsmouth Hospitals since 1983. Previously I was a house officer and senior house officer at various hospitals in the West Country. I was a registrar in radiology from 1977 to 1983 at Southampton hospitals.

As a consultant radiologist I basically work 8.30am (0830) to 5.30pm (1730) weekdays. I am part of an on call rota. My job requires me to report on x-rays, ultrasound and CT scans. My specialist area within radiology is ultrasound, this is the use of sound waves to produce an image. My GMC number is 2307075.

As a consultant radiologist I am responsible for my own decisions, my supervisor would be the Clinical Director of Radiologist but only as my administered manager not clinically. Within Portsmouth Hospital there are 17 consultant radiologists.

I have been asked to detail my involvement in the care and treatment of Elsie DEVINE. I have no personal recollection of the patient but from entries in her medical records (exhibit BJC/16/PG375&376 and BJC/16/PG381 and 382) I can state the following.

Pages 375 and 376 relate to a diagnostic imaging report on Mrs DEVINE which reads as follows:-

Signed: Tessa V LANCASTER  
2004(1)

Signature Witnessed by:

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Continuation of Statement of: LANCASTER, TESSA VICTORIA

Form MG11(T)(CONT)  
Page 2 of 5

Portsmouth Hospitals NHS Trust                      Final report  
Diagnostic Imaging

DEVINE Elise                      87YF 26/06/1911 File:26 06 11/04  
119A The Avenue                  Casenote No.Q680266  
PO143DP                              Elderly Services Unit

Exam date: 07/04/99 (07/04/1999)

US Renal Tract : Both kidneys are slightly small, the right is 8.7cm and the left 8.4cm, no other renal abnormality. Normal bladder.

Chest : Normal heart size. Lungs are clear.

Dr T V LANCASTER  
Consultant Radiologist

L99 - 5527 R99 - 13045

Dr T V LANCASTER FRCR

LOGAN RF

Exam date: 07/04/99 (07/04/1999)

Dictated : 07/04/99 (07/04/1999)

Typist : NS

So this is a report that I would have dictated and a typist would have entered onto a computer. I would have then checked the report before sending it back to the referrer. This is denoted by the fact it is a final report and the referrer was someone from the Elderly Services Unit. The report includes Mrs DEVINE's name, age, date of birth, her district number, case note number. These are included so as to ensure that the report relates to the current x-ray and patient.

The examination date was the 07/04/99 (07/04/1999) and I dictated the report on the 07/04/99 (07/04/1999).

Signed: Tessa V LANCASTER  
2004(1)

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Continuation of Statement of: LANCASTER, TESSA VICTORIA

Form MG11(T)(CONT)  
Page 3 of 5

This report relates to an ultra sound scan that I would have carried out on Mrs DEVINE it concentrated on Mrs DEVINE kidneys, US (ultrasound), renal (kidney), tract (and bladder). I reported that both kidneys were slightly small the right one being 8.7cm and the left 8.4cm. The size of a person's kidneys decreases with age and is dependent on the persons overall size. I would expect an elderly frail lady to have a kidney size of 9cm's or more.

This indicates to me that Mrs DEVINE had a renal complaint and her renal function should be accessed. There was no other renal abnormality, ie, nothing else was wrong with her kidneys and her bladder was normal.

I also reported on a chest x-ray and found that Mrs DEVINE had a normal heart size and that her lungs were clear, ie, they were normal L99 - 5527 is the ultrasound number and R99-13045 is the x-ray number.

Also written on the report in the top left hand corner is RFLOPD 15/4/99 (15/04/1999) is not my handwriting and I didn't write it.

Pages 3281 and 382 relate to another diagnostic imaging report on Mrs DEVINE that read as follows.

DEVINE, Elise (26061104) Order R99-15697 Exam 555

Doc: 1 of 1

Portsmouth Hospitals NHS Trust

Final Report

Diagnostic Imaging

DEVINE Elise 887

26/06/1911

File 2606 11/04

119A The Avenue

Case note no:Q680266

PO143DP

Services for the Elderly St Ja

Report to SELD

Exam Date : 29/04/99 (29/04/1999)

Signed: Tessa V LANCASTER  
2004(1)

Signature Witnessed by:

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Continuation of Statement of: LANCASTER, TESSA VICTORIA

Form MG11(T)(CONT)  
Page 4 of 5

Chest : There seems to be a small right effusion but elsewhere the lungs are clear. Normal heart size.

Skeletal Survey: No evidence of myeloma or any other focal bone abnormality. The bones look demineralised especially the spine.

Dr T V LANCASTER

\*More  
Quit

Again this is a report that I would have dictated and a typist entered onto a computer. It is not the original report but appears to have been printed off of the computer at a later date and not by the X-ray Department. The examination date was the 29/04/99 (29/04/1999) when Mrs DEVINE was 87 years of age, the report shows Mrs DEVINE's age as 88 years so it would of been printed between 26/06/1999 and 25/06/2000.

Again it includes Mrs DEVINE's name, her christian name as on the other report appears to have been spelt incorrectly and her age, date of birth, district number, case note number.

SELD is Service for the Elderly who had asked for the report.

I reported on a chest x-ray. There seemed to be a small amount of fluid (effusion) outside of the lung. There could be a number of reasons for this fluid including heart failure, infection pulmonayembolism or malignency (cancer). Apart from that the lungs were clear (normal).

The skeletal survey is a series of x-rays dependant on what you are looking for.

There was no evidence of myeloma, myeloma has a specific appearance of holes in the bone. There was no other focal (specific) abnormality ie, there was nothing wrong with any specific

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Form MG11(T)(CONT)

Page 5 of 5

bones ie, fractures, tumours. The bones look demineralised, reduced bone density, this is shown by the whiteness of the bones in the x-ray, this would be common in elderly people but due to the fact that I have mentioned it within the report I suspect that the demineralisation was worst than I would have expected in a patient of this age. I have noted that the demineralisation could easily be seen by looking at the spine.

Bone density, demineralisation of the bones is easier to identify by using a bone densitometer.

Taken by:

Signed: Tessa V LANCASTER  
2004(1)

Signature Witnessed by: