CPS001769-0001

RESTRICTED

Form MG11(T)

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WITNESS STATEMENT

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

Statement of: CHIVERTON, STEPHEN GREGORY

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

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: S CHIVERTON Date: 02/02/2006

I am Stephen Gregory CHIVERTON and I live at an address known to Hampshire Police.

I am at present a Locum Consultant Urologist at St Richards Hospital, Chichester Sussex.

I qualified at Oxford University Medical School in June 1981 as a Bachelor of Medicine

My GMC registration number is 2728036.

Between August 1981 and February 1982 I was House Officer to Professor PJ MORRIS, Nuffield Department Surgery, John Radcliffe Hospital, Oxford.

Between February and August 1982 I was House Officer to Dr P COCHRANE, Consultant Physician, Stoke Mandeville Hospital, Aylesbury.

Between August 1982 and February 1983 I completed the Primary Fellowship Course, Royal College of Surgeons, London

Between February and August 1983 I was Senior House Officer to Professor PJ MORRIS, Renal Transplant Unit, Churchill Hospital Oxford

Between October 1984 and July 1985 I was Senior House Officer to Professor PJ MORRIS, Nuffield Department of Surgery, John Radcliffe Hospital, Oxford.

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Between July 1985 and July 1986 I was the Registrar in General Surgery to Mr PM PERRY, Queen Alexandra Hospital Portsmouth.

Between July 1986 and January 1987 I was the Registrar in General Surgery to Mr JM KELLY, Queen Alexandra Hospital Portsmouth

Between January 1987 and January 1989 I was Research Fellow in Gastroenterology to Professor RH HUNT, McMaster University, Hamilton Canada.

Between January and June 1989 I was Registrar in Urology and transplantation, St Mary's Hospital, Portsmouth.

Between June 1989 and March 1990 I was a Lecturer in Urology, University College London, and Assistant Urologist to Mr JEA WICKHAM and Mr HN WHITFIELD, London Clinic Lithotripter Unit. Associate Research Fellow of the Institute of Urology.

Between March and September 1990 I was registrar in Urology to Mr PJR SHAW, Dr SJ HARLAND, Mr WF HENDRY, Institute of Urology, Shaftsbury Hospital London.

Between September 1990 and February 1991 I was Registrar to Mr PG RANSLEY, Mr PG DUFFY, Shaftsbury Hospital, and the Hospital for Sick Children, Great Ormond Street London.

Between February 1991 and February 1994 I was Senior Registrar in Urology at St Mary's Hospital Portsmouth. Between June - December 1993 I had an attachment as Senior Registrar to Mr CJ SMART and Mr JD JENKINS at Southampton General Hospital.

Between February 1994 and February 2003 I was the Consultant Urologist, Portsmouth Hospitals NHS Trust. I was also the Visiting Consultant urologist to Jersey.

Between February 2003 and February 2004, during a sabbatical from the NHS I owned and ran a watersports centre in Spain

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Continuation of Statement of: CHIVERTON, STEPHEN GREGORY

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Between September 2004 and the present I am a Locum Consultant Urologist at St Richard's Hospital in Chichester and since 2005 I also work part time as a locum Consultant Urologist at Southampton General Hospital.

As I have previously stated I was Consultant Urologist at St Mary's Hospital Portsmouth in 1999.

I have been asked to detail my involvement in the care and treatment of Geoffrey PACKMAN.

I have no recollection of this patient whatsoever, even after viewing a photograph of him.

I have referred to his medical notes (Exhibit Reference BJC/34) and on pages 6 and 8 of those notes I see a referral letter regarding this patient from his GP, Dr CHINN dated 10th June 1999. This letter is date stamped in the Appointments Office at SMH (St Mary's Hospital) on 16 the June 1999

This letter which is referral no 850 indicates that the patient should be seen in the Urology Clinic. The letter reads," Dear Steve, Thank you for seeing this 67 year old man who came to see me at the end of April complaining of frequency and nocturia. An MSU was -ve and rectal examination was virtually impossible because of his huge size and inability to lay properly on his side, but I could find nothing obvious.

However, his PSA is slightly raised at 5 and I would appreciate your opinion and advice.

Other investigations were normal, including his U&Es, but his random blood sugar was slightly raised at 6.5 and he is having a GTT

As I said he is grossly obese, hypertensive and with leg ulcer problems".

Kind regards

Signed: S CHIVERTON 2004(1)

Signature Witnessed by: D WILLIAMSON

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Continuation of Statement of: CHIVERTON, STEPHEN GREGORY

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Yours sincerely Richard Dr RH CHINN.

On that letter I have written,"Prostate ass" This means prostate assessment.

The letter indicates that the patient had urinary tract problems (problems with his waterworks). I would assess that his Dr was not thinking the patient had cancer. He probably had a blockage from the bladder by the prostate gland, but probably not malignant.

I have perused the notes and can find no follow up letter from me.

This fact, coupled with the fact that I don't recall the patient, and I think I would do because of his size leads me to think that I didn't ever see the patient.

I would not see any patient within 8 weeks of referral and I see from the notes that he was admitted to the Queen Alexandra Hospital Portsmouth on the 6th August 1999.

A prostatic pathology would consist of a rectal examination. A blood test would have been done regarding his PSA (Prostate Specific Antigen) which is a test to detect Prostate cancer in men.

A flow rate test would also be completed. This would be to know how fast urine was passed from the bladder.

The last two tests were usually done before the appointment. I see from Dr CHINN's referral letter that Mr PACKMAN's PSA was slightly raised at 5. This means that there is an indication of a possivble benign enlargement of the prostate or an early indication of cancer.

-ve indicates that aurine test for infection was negative.