Code A

19 February 2004

Detective Inspector N. Niven,
Western Area Headquarters,
12-18 Hulse Road,
Southampton SO15 2JX

Dear Det. Inspector Niven,

I am appalled that after a 2½-year investigation into the Gosport War Memorial Hospital by so-called experts I should receive the enclosed Expert Review into the death of my mother, Mrs. Dulcie Middleton. I would call it a summary of her last month in hospital, when she was on a downward path to death.

There is no mention of the previous three months: on 29th May 2001 my mother was transferred from Haslar to Gosport War Memorial Hospital for **rehabilitation**.

The period from May to August is the crucial time needing in-depth investigation to determine the negligence and poor nursing that led to such a deterioration in my mother's condition that a gastrostomy feeding tube was required to be inserted on 31st July.

I wonder just what is going on as even this short Expert Review report contains at least the following inaccuracies:-

- My mother was 85 when transferred to Gosport Memorial on 29th May 2001 - she was not 86 until 28th August 2001.
- According to the Review my mother was not in the hospital in July - so where was she when the feeding tube was inserted, at home?

I find the Expert Review totally unacceptable and would appreciate your thoughts on the matter.

Yours sincerely,

Marjorie Bulbeck (Mrs.)

Enc.

FAX TO Code A Code A

Expert Review

Dulcie Middleton

No. BJC/33

Date of Birth: Code A

Mrs Middleton was eighty-six at the time of her admission to Gosport War Memorial Hospital on 15 August 2001.

Mrs Middleton died on 2 September 2001 in Petersfield Hospital under the care of Dr Varden.

Her past medical history had included left ventricular failure, angina, together with a dense stroke which required her to be fed through a gastrostomy feeding tube which was inserted on 31 July 2001.

Unfortunately, subsequent to the insertion of the tube, Mrs Middleton developed abdominal pain and vomiting. A possible abdominal obstruction was diagnosed and Mrs Middleton was commenced on Diamorphine which was 2.5-5mgs as required. This dose was increased when the pain was more severe and Midazolam was added when Mrs Middleton became agitated and distressed.

The expert review of this case confirms that Mrs Middleton was very unwell and was made comfortable with small amounts of analgesia which was gradually increased appropriately.