## **GMC - v - DR JANE BARTON**

## CHRONOLOGY: PATIENT L – JEAN STEVENS

Date of Birth: Code A

Date:	Event:	Source:	Page(s):
2/2/99	Reviewed by locum consultant re left iliac fossa pain.	Correspondence	154
		Clinical notes	205
9/3/99	Referred to consultant anaesthetist re abdominal pain.	Correspondence	144-145
			174
26/4/99	Admitted to Royal Hospital Haslar after experiencing chest pain and collapsing at home.	Nursing notes	92, 94, 96, 98,
	CT brain scan conducted.		100, 125, 131
		A&E notes	146-149
		Clinical notes	208-211
		CT scan results	255
		Drug charts	73-78, 703-725
27/4/99	Nasogastric tube feeding begins.	Intake notes	51-68
		Nursing notes	100
		Clinical notes	212
28/4/99	Transferred to Coronary Care Unit.	Nursing notes	100, 108
	Chest x-ray conducted.	Clinical notes	213-215
	Antibiotics commenced.		
30/4/99	Reviewed by HO on call.	Clinical notes	217-218
1/5/99	Reviewed on ward round.	Clinical notes	219
2/5/99	Reviewed by physiotherapist.	Clinical notes	219
3/5/99	Reviewed on ward round.	Clinical notes	219
4/5/99	Reviewed on ward round and by dietician.	Clinical notes	219-223
5/5/99	Patient begins taking food orally.	Intake notes	44-50
	Referred to Dr Code A consultant geriatrician.	Nursing notes	110
	Treated with oxygen and diamorphine for respiratory failure.	Clinical notes	224

Reviewed by Registrar.  Nasogastric feeding recommenced. Reviewed by Dr Tandy, consultant geriatrician.  Reviewed on SHO.  Reviewed on ward round.  Reviewed on ward round, and by dietician.  Reviewed by orthopaedic specialist.	Nursing notes Clinical notes Clinical notes Intake notes Correspondence Nursing notes Clinical notes Clinical notes Clinical notes Clinical notes Clinical notes	110, 112 226-228 229 32-43 6 114 229-233 233-234 234
Nasogastric feeding recommenced. Reviewed by Dr Tandy, consultant geriatrician.  Reviewed on SHO. Reviewed on ward round. Reviewed on ward round, and by dietician.	Clinical notes Intake notes Correspondence Nursing notes Clinical notes Clinical notes Clinical notes	229 32-43 6 114 229-233 233-234 234
Nasogastric feeding recommenced. Reviewed by Dr Tandy, consultant geriatrician.  Reviewed on SHO. Reviewed on ward round. Reviewed on ward round, and by dietician.	Intake notes Correspondence Nursing notes Clinical notes Clinical notes Clinical notes	32-43 6 114 229-233 233-234 234
Reviewed by Dr Tandy, consultant geriatrician.  Reviewed on SHO.  Reviewed on ward round.  Reviewed on ward round, and by dietician.	Correspondence Nursing notes Clinical notes Clinical notes Clinical notes	6 114 229-233 233-234 234
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Reviewed on ward round. Reviewed on ward round, and by dietician.	Clinical notes Clinical notes	233-234 234
Reviewed on ward round. Reviewed on ward round, and by dietician.	Clinical notes	234
Reviewed on ward round, and by dietician.		
	Clinical notes	
		234-235
	Drug charts	73
Subluxation of shoulder diagnosed.	Nursing notes	118
	Clinical notes	236
Reviewed by SHO, and by dietician.	Clinical notes	237
Liaison between Royal Haslar Hospital and GWMH.	Nursing notes	120
	Clinical notes	237-238
Reviewed by physiotherapist.	Clinical notes	238-239
Transferred to Daedalus Ward, GWMH.	Transfer record	70
Upon transfer, patient receiving aspirin, enalapril, digoxin, isosorbide, mononitrate and	Drug charts	73, 77-78
PRN subcutaneous diamorphine 5mg.	Nursing referral	86
Reviewed by Dr Barton.	Nursing notes (Haslar)	122
	Clinical notes	1292
	Admission notes	1296-1297
	Significant events	1299
	Nursing assessment	1302-1307,
		1318-1322
	Nursing care plan	1324-1337
	Reviewed by orthopaedic specialist. Subluxation of shoulder diagnosed.  Reviewed by SHO, and by dietician. Liaison between Royal Haslar Hospital and GWMH.  Reviewed by physiotherapist.  Transferred to Daedalus Ward, GWMH.  Upon transfer, patient receiving aspirin, enalapril, digoxin, isosorbide, mononitrate and PRN subcutaneous diamorphine 5mg.	Reviewed by orthopaedic specialist.  Subluxation of shoulder diagnosed.  Reviewed by SHO, and by dietician.  Liaison between Royal Haslar Hospital and GWMH.  Reviewed by physiotherapist.  Transferred to Daedalus Ward, GWMH.  Upon transfer, patient receiving aspirin, enalapril, digoxin, isosorbide, mononitrate and PRN subcutaneous diamorphine 5mg.  Reviewed by Dr Barton.  Reviewed by Dr Barton.  Drug charts  Nursing notes  Clinical notes  Transfer record  Drug charts  Nursing referral  Nursing referral  Nursing notes (Haslar)  Clinical notes  Admission notes  Significant events  Nursing assessment

	Drug charts indicate:	Drug charts	1342-1346
	Digoxin: Dr Barton prescribes 1.2ml od.		
	Enalapril: Dr Barton prescribes 5mg od.		
	Aspirin: Dr Barton prescribes 75mg od.		
	Isosorbide: Dr Barton prescribes 60mg. Not administered.		
	Suby C: Dr Barton prescribes. Not administered.		
	• Oramorph: Dr Barton prescribes 2.5-5ml (5-10mg) PRN. 2.5ml (5mg) administered		
	at 14.30, 18.30 and 22.45.		
	• Diamorphine: Dr Barton prescribes 20-200mg/24hrs PRN by subcutaneous infusion.		
	• Hyoscine: Dr Barton prescribes 200-800µg/24hrs PRN by subcutaneous infusion.		
	Midazolam: Dr Barton prescribes 20-80mg/24hrs PRN by subcutaneous infusion.		
21/5/99	Drug charts indicate:	Contact record	1309
	Digoxin: 1.2ml administered.	Drug charts	1342-1346
	Enalapril: 5mg administered.		
	Aspirin: 75mg administered.		
	GTN spray: Dr Barton prescribes 2 puffs PRN. Not administered.		
	• Oramorph: 2.5ml (5mg) administered at 07.35. Dr Barton then prescribes 5ml		
	(10mg) four times daily and 10ml (20mg) nocte. 5ml (10mg) administered at 10.00 and 14.00.		
	Diamorphine: 20mg/24hrs administered at 19.20.		
	Midazolam: 20mg/24hrs administered at 19.20.		
22/5/99	Drug charts indicate:	Contact record	1309, 1311
	• Diamorphine: 20mg/24hrs administered at 08.00. 20mg/24hrs administered at 10.30.	Drug charts	1342-1346
	• Hyoscine: 800µg/24hrs administered at 08.00. Dr Beasley then verbally prescribes		
	1600μg/24hrs by subcutaneous infusion. 1600μg/24hrs administered at 10.30.		
	• Midazolam: 20mg/24hrs administered at 08.00. 20mg/24hrs administered at 10.30.		
	Death recorded at 22.30.	Clinical notes	1292
		Significant events	1299
		Contact record	1311