

From: Fitchet, Chris,15387
Sent: 17 September 2013 11:36
To: Warhurst, Rebecca,43420
Subject: RE: Operation Rochester

Attachments: Marshall report.doc
Sorry - here it is.....

Hi Chris

Dont think the report's attached!!

Rebecca

Rebecca Warhurst | Public Access Manager
Joint Information Management Unit | Hampshire Constabulary & Thames Valley Police
Telephone 01962 814789 | Internal 79 1765
Address Hampshire Constabulary Police HQ, West Hill, Romsey Road, Winchester, SO22 5DB

From: Fitchet, Chris,15387
Sent: 17 September 2013 11:29
To: Warhurst, Rebecca,43420
Subject: RE: Operation Rochester

Rebecca,

Here is cut and pasted version of Dr Marshalls report (from Holmes archive -A tidier hard copy is available if required) I haven't gone through it myself yet as I've walked in to an urgent piece of work for FPG but sent to you for your info.

Regards,

Chris F.

Rebecca Warhurst | Public Access Manager

Joint Information Management Unit | Hampshire Constabulary & Thames Valley Police

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Address Hampshire Constabulary Police HQ, West Hill, Romsey Road, Winchester, SO22 5DB

REPORT

regarding

Robert WILSON /N5 (BJC/55)/X142

PREPARED BY: Dr J. MARSHALL

AT THE REQUEST OF: Hampshire Constabulary**CONTENTS**

1. INSTRUCTIONS
- 2. BRIEF CURRICULUM VITAE**
3. DOCUMENTATION
4. CHRONOLOGY/CASE ABSTRACT
5. EXAMINATION OF THE FACTS IN ISSUE
6. OPINION
7. LITERATURE/REFERENCES
8. EXPERTS' DECLARATION
9. STATEMENT OF TRUTH

APPENDICES**1. INSTRUCTIONS**

I received instructions from D/Insp David GROCOTT/N966 for and on behalf of Hampshire Constabulary, to provide a medical report in relation to Mr Robert WILSON. To this end I was asked to review Mr WILSON's medical records which I have now done. I was asked to address the following issues:

1. Can you review the papers and establish whether or not Mr WILSON was suffering with a **Code A** if he was, does this mean that the prognosis is poor?
2. Can you establish at what point Mr WILSON entered what could be described as his **Code A**
3. What treatment should have been considered in Mr WILSON's case? Especially in light of **Code A**
4. What would have been the impact on a patient with Mr WILSON's ailments when he is

Code A

5. In your opinion was the deterioration in Mr WILSON's condition in keeping with a

Code A

Student elective: Professor COTTON, Duke University, North Carolina.

Basic endoscopic skills learnt as an SHO with Dr. BARRISON.

Clinical and endoscopic skills further developed at Welwyn Garden City.

The North Middlesex Hospital, presented a wide range of gastroenterological problems due to the ethnically diverse and mobile nature of the local population.

The Royal Free Hospital provided specialist hepatology, liver transplantation and inflammatory bowel disease training.

Research for MD thesis into *H.pylori* in alcoholic liver disease enabled development of a special interest in this area.

The Whittington allowed further development of general and therapeutic endoscopic skills.

King George Hospital, Ilford, enabled further development of therapeutic endoscopy including ERCP.

Currently perform two out-patient clinics and 2-3 endoscopy lists per week.

Endoscopic Training:

Trained to BSG guidelines for Upper Endoscopy (diagnostic and therapeutic), flexible sigmoidoscopy and colonoscopy (diagnostic and therapeutic).

Clinical lead for endoscopy on the Horton Hospital site for the Oxford Radcliffe NHS Trust.

PUBLICATIONS:

Published Papers and Abstracts

Marshall JC, Sharp E, BARRISON I.G.

'Once bitten, twice shy'. Multiple abscesses in an 18 year old female.

BMJ (1994) 309: 1694-1695.

Lagnado L, Marshall JC, Lodge L.

S-methyl-3-propranolamine (S-MDP) but neither papaverine nor noscapine is an N-methyl aspartate antagonist.

Neuroscience letters (1985) 21: 56A

Marshall JC, Gordon HM, Madden AM, Morgan MY

Alcohol consumption and Severity of Liver Disease Influences: *Helicobacter pylori* infection in cirrhotic liver disease.

Alcohol Clin and Exp (1998) 22: 172A

Marshall JC, Gordon HM, Madden AM, Morgan MY

Seroprevalence of *Helicobacter pylori* in Chronic Liver disease and its relation to Alcohol Misuse.

Hepatology (1998) 28: 199A.

Marshall JC, Morgan MY, Walker MM

Upper Gastrointestinal Pathology in relation to *Helicobacter pylori* Status in Alcohol Misusers Gut (1999) 44 A118

Marshall JC, Karim QN, Worku M, Morgan MY, Walker MM

Motility and Survival of *Helicobacter pylori* in Alcoholic Beverages.

Gut (1999) 45 A15

Wallace DF, Gordon HM, Marshall JC, Walker AP, Dooley JD, Morgan MY

The Role of HFE Mutation in Determining predisposition to Alcohol Related Cirrhosis in a Celtic Population.

Gut (1999) 45 A36.

Marshall JC, Karim QN, Worku M, Morgan MY, Walker MM

Motility and Survival of *Helicobacter pylori* in Organic and Non-Organic Alcohol Beverages.

Gut (2000) 46 A87.

Marshall JC, Lample F, Gordon, HM, Morgan MY

Seroprevalence of *Helicobacter pylori* is Influenced by Alcohol Consumption and Severity of Liver Injury Gastroenterology (2000) 118 A1270

Marshall JC, Karim QN, Worku M, Morgan MY, Walker MM

Motility and Survival of *Helicobacter pylori* in Alcoholic Beverages

Gastroenterology (2000) 118 A1356.

Chapters

Marshall JC, Mettler F. Management of accidentally radioactively contaminated patients. In Radiation Accidents ed Mettler.

Poster Presentations

Alcohol Consumption and Severity of Liver Disease Influences *Helicobacter pylori* infection in cirrhotic liver disease.

Poster Presentation, Ninth Congress of the International Society for Biomedical Research on Alcoholism (ISBRA) Copenhagen (1998).

Seroprevalence of *Helicobacter pylori* in Chronic Liver Disease and its Relation to Alcohol Misuse.

Poster presentation at the International Association for the Study of the Liver (IASL) Biennial Meeting Chicago (1998).

Upper Gastrointestinal Pathology in relation to *Helicobacter pylori* Status in Alcohol Misusers.

Poster presentation, British Society of Gastroenterology (BSG) Glasgow (1999)

Motility and Survival of *Helicobacter pylori* in Alcoholic Beverages

Poster Presentation, The European *Helicobacter pylori* Society Helsinki (1999)

Motility and Survival of *Helicobacter pylori* in Organic and Non-Organic Alcohol Beverages.

Poster Presentation, British Society of Gastroenterology (BSG) Birmingham (2000)

Accepted Papers

Walker MM, Marshall JC

Helicobacter pylori and Gastric Pathology-Ask your Semmelier

Accepted Z. Gastroenterology December 2000

Marshall JC, Lample F, Morgan MY

Helicobacter pylori Infection and Hepatic Encephalopathy: The Problem of Confounding Variables

Accepted as poster International Meeting on Hepatic Encephalopathy Strasbourg November 2001

Papers Submitted or in Preparation

Marshall JC, Lample F, Madden M, Gordan H.M, Morgan MY

Seroprevalence of *Helicobacter pylori* in liver disease: Influence of liver disease and alcohol consumption in preparation for Gastroenterology

Marshall JC, Morgan MY, Walker MM

Chemical Gastritis is Not Influenced by Alcohol Consumption in preparation for J. of Clinical Pathology.

3. DOCUMENTATION

This Report is based on the following documents:

Full paper set of medical records of Robert WILSON. BJC/55

Summary of events as provided by the police.

Copy of death certificate.

4. CHRONOLOGY/CASE ABSTRACT

The numbers in brackets refer to the page of evidence.

Robert WILSON a 74 year old gentleman in 1998 attended Queen Alexandra Hospital, L194 Portsmouth, A&E Department, on the 21st September, 1998. (125-127) ~~Code A~~

Code A

Code A

Code A

Code A

2. Can you establish at what point Mr WILSON entered what could be described as his terminal Phase"

Response to question 2

Mr WILSON entered a terminal phase at or around the 16th October 1998. There is an entry

Code A

3. What treatment should have been considered in Mr WILSON's case? Especially in light of his increased weight (possibly due to fluids)

Response to question 3

Treatments that might have been considered in Mr WILSON's case were the administration of

Code A

Code A

4. What would have been the impact on a patient with Mr WILSON's ailments when he is

Code A

Response to question 4

Code A

Code A

5. *In your opinion was the deterioration in Mr WILSON's condition in keeping with a progression in his liver disease or was it due to the increasing medication that he was receiving.*

Code A

6. *Could you comment on the fact that the cause of death that was recorded on the death certificate was Bronchopneumonia?*

Response to question 6

The post mortem diagnosis of bronchopneumonia was not surprising. Bronchopneumonia is usually the terminal event in many conditions. It is a frustrating post mortem diagnosis for practising clinicians who having struggled and failed to make a definite diagnosis in life don't receive any useful information after death to improve knowledge. It is not however an uncommon situation.

Code A

Code A

6. OPINION

Code A

7. LITERATURE/REFERENCES

British National Formulary (BNF) March 2002 number 43. [Any version of BNF will contain similar information under 'morphine']

8. EXPERTS' DECLARATION

1. I understand that my overriding duty is to the court, both in preparing reports and in giving oral evidence. I have complied and will continue to comply with that duty.
2. I have set out in my report what I understand from those instructing me to be the questions in respect of which my opinion as an expert is required.
3. I have done my best, in preparing this report, to be accurate and complete. I have mentioned all matters which I regard as relevant to the opinions I have expressed. All of the matters on which I have expressed an opinion lie within my field of expertise.
4. I have drawn to the attention of the court all matters, of which I am aware, which might adversely affect my opinion.
5. Wherever I have no personal knowledge, I have indicated the source of factual information.
6. I have not included anything in this report which has been suggested to me by anyone, including the lawyers instructing me, without forming my own independent view of the matter.
7. Where, in my view, there is a range of reasonable opinion, I have indicated the extent of that range in the report.
8. At the time of signing the report I consider it to be complete and accurate. I will notify those instructing me if, for any reason, I subsequently consider that the report requires any correction or qualification.
9. I understand that this report will be the evidence that I will give under oath, subject to any correction or qualification I may make before swearing to its veracity.
10. I have attached to this report a statement setting out the substance of all facts and instructions given to me which are material to the opinions expressed in this report or upon which those opinions are based.

9. STATEMENT OF TRUTH

I confirm that insofar as the facts stated in my report are within my own knowledge I have made clear which they are and I believe them to be true, and the opinions I have expressed represent my true and complete professional opinion.

Footer Details

Statement
Date: 28/04/2006

Number of Pages:

Signed: J MARSHALL

Signature
witnessed by:

Attachments
s426.lnb





Print reason is required.

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Without Markup

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Disclosure Print Censored

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State of Indexing

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Court Print Censored

Case Urn :

Reason:*

From: Fitchet, Chris,15387
Sent: 09 September 2013 15:40
To: PUBLIC ACCESS Mailbox
Subject: RE: HC/001552/13
Update

Hi Rebecca,

I've now spent best part of 2 days on this, both with the Holmes team at SC and today at the CAF in Portsmouth. The Rochester database is very large and involves significant searching and reading of holmes docs and sifting at the CAF, because many documents exist as hard copy only (at the CAF), with a brief reference on Holmes (There are a total of 4154 hard copy docs in 16 crates)

From my research I am reasonably confident of the following:

The medical experts who examined Robert Wilsons medical records are:

Mrs Irene Waters
Dr Robert Ferner
Dr Peter Lawson
Prof David Black
Dr Andrew Wilcock
Dr Richard Baker
Dr Jonathan Marshall

Waters, Ferner and Lawson were part of what became known as the Key Clinical Team (KCT) and identified those cases that on initial exam warranted further examination by specific experts (in Wilsons case - Black, Wilcock, Baker and marshall)

In respect of these 3 KCT I have located the following:

Waters - An extract from her overall report relevant to Wilson
Ferner - A clinical team scoring form
Lawson - An extract in a police report quoting Dr Lawson relevant to Wilson (requires redacting)

In respect of the remaining 4 experts I have taken the following from the CPS submission papers re Robert Wilson:

Prof Black - V2 of complete report 19/11/2005 (20 pages) re Wilson
Dr Wilcock- Draft report (BJC/55 medical records Robert Wilson) (46 pages)
Dr Baker - Draft report re Robert Wilson (20 pages)
Dr Marshall- witness stmt (19 pages) re Wilson

I am struggling to confirm to whom Dr Marshalls report was sent to (other than CPS). I have found receipts for other papers in respect of the GMC but not for Marshalls. I have spoken to DS Stephenson (ret'd) who was the case officer and

he is confident that Marshalls report went to the GMC and possibly the nursing and midwifery council but cant be sure, and I haven't found (so far) confirmation in doc form either way -This would require more research of our system or contact with relevant bodies to be sure.

Interestingly Roy Stephenson says he passed a full file of evidence to Robert Wilsons son at Fareham police station prior to inquest so the requested reports have probably been passed. The comment in the request that Marshalls report has been withheld is surprising as Roy could not imagine why that might be.

Regards,

Chris F.

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Hi Chris

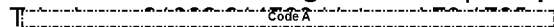
Hope you had a nice holiday.

Sorry to chase you on the request below but I have to get a response out next week so wondered if you were able to assist, please.

Many thanks
Rebecca

Rebecca Warhurst | Public Access Manager

Joint Information Management Unit | Hampshire Constabulary & Thames Valley Police

 Code A

Address Hampshire Constabulary Police HQ, West Hill, Romsey Road, Winchester, SO22 5DB

From: PUBLIC ACCESS Mailbox

Sent: 19 August 2013 11:16
To: Fitchet, Chris,15387
Subject: HC/001552/13

Hi Chris

We have another FOI request about Operation Rochester....

My father Robert Wilson, was one of a number of deaths that took place at the Gosport war memorial hospital and was investigated by Hampshire Constabulary as part of Operation Rochester. A number of medical experts were employed by the police to examine my fathers medical records and to compile a report on their findings.

Please supply me with a list of all the medical experts who examined my fathers medical records and compiled a report for Hampshire Constabulary.

Please supply me with a copy of each report submitted by the medical experts to Hampshire Constabulary.

Please supply me with a copy of the expert opinion given in a report compiled by Professor Marshall, this report was passed by Hampshire Constabulary to the coroner at the inquest into my fathers death, but has to date been withheld from me.

Please supply a list of all persons or official bodies that Hampshire Constabulary has given copies of the report compiled by Professor Marshall to.

Many thanks for your help on this.

Best wishes
Rebecca

Rebecca Warhurst | Public Access Manager
Joint Information Management Unit | Hampshire Constabulary & Thames Valley Police

Code A

Address Hampshire Constabulary Police HQ, West Hill, Romsey Road, Winchester, SO22 5DB