## Notes from Meeting – re: Care of Mrs Dulcie Middleton 01/08/02

## Present:

Jane Williams – investigator Kathryn Fuente (nee Gunn) – Dietitian, Fareham and Gosport

These notes are not a verbatim transcript of the meeting, but a record of key points and important issues raised.

The medical and nursing notes were available at this meeting for reference.

Kathryn had obtained the dietetic notes kept by her during Mrs Middletons inpatient stay on Daedalus Ward and the notes from her dietetic care following transfer to Queen Alexandra Hospital. A copy of these notes can be obtained from Kathryn if necessary — Code A will not have seen the full dietetic notes.

Mrs Middleton was referred to the Dietetic Service on the 15<sup>th</sup> June 2001, as Kathryn visits the ward once a week Mrs Middleton was seen on the 20<sup>th</sup> June 2001. A nutritional assessment was undertaken. The assessment included:-Record of weight

Height reported by Mrs Middleton

Calculation of Body Mass Index – 30 (at the upper end of overweight definition)

Appetite – Mrs Middleton said she didn't like the puree diet or the options and the portions were too large. Mrs Middleton reported that her appetite was poor.

No previous gastro-intestinal problems were documented

Kathryn recommended smaller portions with supplements in between and for nursing staff to record intake.

Kathryn continued to see Mrs Middleton weekly which is unusual for a Daedalus patient and Kathryn took this to be an indication of her on-going complex needs.

Kathryn did not meet the daughter but on one visit the grand-daughter was present and they thought at this point that Mrs Middleton was 'doing OK'.

It became evident that Mrs Middleton's intake was inadequate, weight loss was evident and recorded, but food and fluid charts were inadequately completed. Kathryn was aware of fluctuating urea and electrolyte levels, and struggle to maintain balance of cardio-vascular system. This level of complexity was also unusual for Daedalus Ward and Kathryn stated that (with hindsight) on an acute ward, the dietitian would probably have reviewed Mrs Middleton more frequently than weekly.

When Naso-Gastric feeding was instigated Kathryn provided advice regarding nutritional requirements and consulted with medical team regarding fluid intake and balancing oral and enteral intake.

Naso-gastric feeding was not successful and a PEG placement was organised quickly. Kathryn spoke with Dr Yikono (recorded in dietetic notes) about nutritional requirements at this stage as there were increasing concerns regarding her fluid balance, metabolic balance and nutritional needs at this time. It was obvious that Mrs Middleton was quite unwell.

Kathryn's involvement with Mrs Middleton ceased when she was transferred to QAH.