

15.08.08	BCH	Benson	DNA
21.11.08	BCH	Benson	ATT
02.04.09	BCH	Benson	ATT
07.08.09	BCH	Benson	DNA
03.12.10	BCH	Benson	DNA
14.01.11	BCH	Benson	DNA
03.06.11	BCH	Benson	DNA
01.07.11	BCH	Benson	DNA
07.10.11	BCH	Benson	DNA
03.02.12	BCH	Benson	DNA
06.04.12	BCH	Benson	DNA
03.08.12	BCH	Benson	DNA
04.01.13	BCH	Benson	DNA
05.03.13	ALT	Benson	DNA
04.06.13	ALT	Benson	ATT
04.10.13	BCH	Benson	DNA
07.02.14	BCH	Benson	ATT
21.11.14	ALT	Benson	ATT
27.02.15	ALT	Benson	DNA
25.09.15	ALT	Benson	DNA
27.11.15	ALT	Benson	DNA
26.02.16	ALT	Benson	DNA
12.08.16	ALT	Benson	ATT
09.06.17	ALT	Benson	DNA
08.12.17	ALT	Benson	DNA
09.03.18	ALT	Benson	DNA
03.04.18	ALT	Benson	DNA

10. A total of 62 routine outpatient appointments were provided for follow up over 16 years, from which attendance is recorded as 8. Standard practice in relation to patients not attending hospital appointments would have been to discharge them. This rule was not followed and ongoing outpatient appointments continued to be given. An accepted frequency for patients with severe haemophilia would be every 6 months. Mr S Conway was offered appointments at a greater frequency than this routine figure which would have been expected 32 appointments in 16 years. He was reached out to with double this frequency.

11. During the attendances, from 2008 when I was appointed, routine testing with regards to liver function, and full blood count, were undertaken and compared to the last recorded result and there was no significant deviation from the baseline noted. During the same time frame, attendances to the Emergency Department and Altnagelvin Hospital also occurred from which blood tests were taken. I note discharge summary 17.10.15 which highlights the liver function tests as 'no new worsening'. Blood samples below corresponding to haemophilia clinic review are samples numbered 8 and 10.

Benson
was
dying

Benson
would not
answer our
calls
for.