D-01001-	2018 TE		GRO-A	GRO-A Closed	Secondary status
₄ General					
Report Received By	Christine Galloway	Closure Details		ACTIVITIES	NOTES
Coroner *	Mr J McCrisken	Case Outcome	1	Enter a note	
Date Case Closed	GRO-A 2018	Pro Forma Received		FoxPro Notes 13/03/2018 13:08:25 [Christine Galloway] spoke to	Limether MOK to pive aCOM charts details at
BF Date		Doctor Cause of Death		She agreed for tissues to be held for histoloy. 13/03/2018 13:14:29 [Christine Galloway] phoned	
Supervising Team		Date Disposal Form Generated		Egjinton. 12/06/2018 13:43:09 [Christine Galloway] Linette phoned for an update - advised PM report still not received. 02/07/2018 15:17:45 [Christine Galloway] Voicemail left for Linette to expect my closure letter in the post. 02/07/2018 17:09:39 [Melanie Watson] Form 17 signed 29 June - emailed 2/7 to Derry and Strabane and listing meeting date 29/6 as per Denise. 03/07/2018 09:47:25 [Melanie Watson] Signed PM3 and Form 19 emailed Final PM report posted to Dr Cosgrove	
Case Owner *	Le Christine Galloway	Date of Coroners			
Case Progression Officer		Form Sent to Registrar			
CLO		Coroner's Direction		Final check complete and hard copy papers destroy Leanne Butler - 29/09/2022 09:08	red.
Medical Advisor File Generated		Directed by			
Inquest Directed				FoxPro Death Report 01001-2018	
🚏 QA Check		Additional Attention No Required?			

Deceased Details		Home Address	Place of Death	
Reference *	➡ D-01001-2018		Died at Home	
Last Name *	GRO-A	Postcode GRO-A	Died at Hospital	
First Name *	GRO-A	Find No Address Found	Postcade	GRO-A
Sex	Male	·		
Date of Birth	GRO-A ¹⁹⁵⁸	Line 1 GRO-A	Find No Address F	Found 🗸
Date and Time of Death	GRO-A2018 19:36	Line Z	Line 1	
Dr PLE	Dr Hunter	Line 3	Line 2	GRO-A
Calculated Age Years	ê 59	City GRO-A	Line 3	
Calculated Age Months	9 9	County	City	GRO-A
Found Dead	Yes	Country	County	GRU-A
Stillborn			Country	
Additional Information		Related Postcode GRO-A		
Maiden Surname	···· ···· ···· ···· ··················		Related Postcode	GRO-A
Marital Status		Secondary Next of Kin		
Place of Birth		Secondary Next of Kin		
Occupation	Unemployed	Relationship to Deceased	Point of Contact	

	NOK GRO-A da	ughter GRO-A			and a second sec
4	Medical / Circun	istances			
	PSNI Involved?	Νο	PSNI Serial Number		
	Investigating Officer		Police District	н	
			Police Station		
	Alternative PSNI Officier		 		The second se

Please enter Medical a	nd Circumstances Information		
GP Practice		GP	•
Hospital Dr			
Health and Care No (HSCNI)		Pacemaker/Reactive	
Notes			
By answer machine:			and a second
LPE: dr Hunter - WHUC	view Medical Practice - Spencer Rd GRO-C		of AMP is the first of the set of
	get in touch wite GRO-A II day, were concerned. Went round to his house, no answer at the door, so they went rou IO to give us a call regarding who last saw the deceased alive and when. Not being treated as suspicious. No marks of		101 1 11111111111

Body transferred to NIFRM Discused with Mr McCrisken - Ring GP on Monday NIFRM informed.

AG - 12.3.18 - Dr McNeill - hepatoma cellular carcinoma of the liver with nutritional failure. Sever hemophilia A. admitted for radiation therapy and chemotherapy, severe COPD - ex smoker, nothing in the notes to suggest asbestos exposure. Hep c. asthma.

Last seen by a GP in Jan 2018 for chest infection. Dr cannot give a COD.

Spoke to Mr McCrisken - referred to Dr Andrew.

09:59 - Const Milling collected the Clinical Summary from GP.

AG -Dr Andrew requested A&E notes and blood results from admission last wednesday. Ward clark will forward them asap.

AG - Dr Andrew has spoken to NOK and Coroner - PM directed. NIRFM informed.

GA: Updated note: Long d/w GP- mulitple medical issues including HCC and recent nutritional issues relating to same. H/O HTN and COPD (severe but stable) recent LRTI but not recurrent. No recent/recurrent hospital admissions. HTN has normalised (likely 2ry to other disease/deterioration in cardiac function)On oramorph/MST for pain relating to haemophilia. Previous bleeds into elbow. no h/o falls.

Recent blood-stable; normal renal function.

Advised collateral history may be helpful GP asked me to liaise with NOK.

from NOK: Pt had collapse last week-seen by ED.

Notes reviewed from ED- no major abnormailities- NA 128 K+ 5.1 (4.2) renal fun normal. HB/WCC/CRP ok. ECG:No acute ischaemic changes-mild prolonged QTC @478 (normal <450, but <500 so ? significant) not on any relevant prolonging meds. Other electrolytes not measured.

? diagnosed with low BM-record unclear regarding this.

Likely cardiac anythmia secondary to electolyte disturbance due to hepatocellular carcinoma; COPD; HTN 2) haemophilia, hepatitis C

D/w GP: Not prepared to provide PFL given recent hospital attendance and family wishes for definitive COD, explained PM unlikely to provide further evidence other than disease processes already known, circumstances consistent with sudden cardiac anythmia as above but DR not prepared to issue.

Pm directed by Joe.

NOTE infection risk

statement required-see memo.

Cause of Death - Lookup Cause of Death and click Add >>	
Condition Text	Study Category Natural
Add I(a) >> Add I(b) >> Add I(c) >> Add I(d) >>	
Cause of Death I (a)	Cause of Death I (b)
Metastatic Hepatocellular Carcinoma	
Cause of Death I (c)	Cause of Death I (d)

Cause of Death II Chronic Hepatitis C Infection