

Pan-Cheshire CDOP Form C Analysis Pro-forma

CDOP Ref: Child A	Age at Death: PD Day
Date of Birth: PD 06/2016	Gender: Male
Date of Death: 08/06/2016	

Cause of Death:

1a) Unascertained
Inquest: Narrative

Case Summary:

The child weighed 1660g at birth there was good tone, no heart rate and only minimal respiratory efforts. He was given inflation breaths but there was minimal or no chest wall movements but heart beat were audible soon after. He was transferred to the Neonatal unit and put in an incubator on CPAP. Peripheral IV access was gained. At 2-3 hours after birth his condition was fairly stable on CPAP. An umbilical catheter was inserted under sterile condition. X-ray review showed that UVC was not ideally placed. UC was re-sited. Review again showed it to be not ideal. The plan was to remove the UVC and a long line to be inserted however apparently UVC was left in situ and a long line was inserted. Xray review showed that the long has crossed the midline and possibly the tip to be in Rt subclavian/and superior vena cava. The line was supposed to be pulled back later the patient went into apnoea bagging was started immediately.. There was good chest movement seen but saturations were poor. It was thought to be related to long line, so long line was removed and help was called. Intubation was attempted blood clots were noted in the tube. The heart rate dropped chest compressions were started, full resuscitation was attempted with no significant response and was discontinued when the child sadly died.

Chronology of any previous CDOP discussions:

Date	Note:

List of anonymised documents available for discussion:

- Combined Form B
- PM report

Death Expected:	NO
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CDOP should categorise the **likely/cause of death** using the following schema. *The classification is hierarchical: where more than one category could reasonably be applied, the highest up the list should be marked.*

Cat	Name & description of category
1	<p>Deliberately inflicted injury, abuse or neglect This includes suffocation, shaking injury, knifing, shooting, poisoning & other means of probable or definite homicide; also deaths from war, terrorism or other mass violence; includes severe neglect leading to death.</p> <input data-bbox="1333 327 1409 394" type="checkbox"/>
2	<p>Suicide or deliberate self-inflicted harm This includes hanging, shooting, self-poisoning with paracetamol, death by self-asphyxia, from solvent inhalation, alcohol or drug abuse, or other form of self-harm. It will usually apply to adolescents rather than younger children.</p> <input data-bbox="1333 474 1409 541" type="checkbox"/>
3	<p>Trauma and other external factors This includes isolated head injury, other or multiple trauma, burn injury, drowning, unintentional self-poisoning in pre-school children, anaphylaxis & other extrinsic factors. Excludes Deliberately inflicted injury (category 1).</p> <input data-bbox="1333 627 1409 695" type="checkbox"/>
4	<p>Malignancy Solid tumours, leukaemias & lymphomas, and malignant proliferative conditions such as histiocytosis, even if the final event leading to death was infection, haemorrhage etc.</p> <input data-bbox="1333 783 1409 850" type="checkbox"/>
5	<p>Acute medical or surgical condition For example, Kawasaki disease, acute nephritis, intestinal volvulus, diabetic ketoacidosis, acute asthma, intussusception, appendicitis; sudden unexpected deaths with epilepsy.</p> <input data-bbox="1333 938 1409 1005" type="checkbox"/>
6	<p>Chronic medical condition For example, Crohn's disease, liver disease, neurodegenerative disease, immune deficiencies, cystic fibrosis, even if the final event leading to death was infection, haemorrhage etc. Includes cerebral palsy with clear post-perinatal cause.</p> <input data-bbox="1333 1102 1409 1169" type="checkbox"/>
7	<p>Chromosomal, genetic and congenital anomalies Trisomies, other chromosomal disorders, single gene defects, and other congenital anomalies including cardiac.</p> <input data-bbox="1333 1241 1409 1308" type="checkbox"/>
8	<p>Perinatal/neonatal event Death ultimately related to perinatal events, eg sequelae of prematurity, antepartum and intrapartum anoxia, bronchopulmonary dysplasia, post-haemorrhagic hydrocephalus, irrespective of age at death. It includes cerebral palsy without evidence of cause, and includes congenital or early-onset bacterial infection (onset in the first postnatal week).</p> <input checked="" data-bbox="1333 1396 1409 1463" type="checkbox"/>
9	<p>Infection Any primary infection (ie, not a complication of one of the above categories), arising after the first postnatal week, or after discharge of a preterm baby. This would include septicaemia, pneumonia, meningitis, HIV infection etc.</p> <input data-bbox="1333 1575 1409 1642" type="checkbox"/>
10	<p>Sudden unexpected, unexplained death Where the pathological diagnosis is either 'SIDS' or 'unascertained', at any age. Excludes Sudden Unexpected Death in Epilepsy (category 5).</p> <input data-bbox="1333 1736 1409 1803" type="checkbox"/>