JTHORISATION FORM 1 RESTRICTED INQUEST / PART A / PART B / NFA I&S **OFFICE** • Office number: Date inquest opened: USE ONLY: Cert 'A' / Cert 'B' Burial / Cremation Cert to: IN/ CO: CHRISTINE HURST CHESTER Division: HMC No: PD MrMrs Miss Ms Married Divorced Widowed Single Separated Baby X Partner MALE Surname: Forename(s): Former name: Child P Child P Address: **Personal Data** DOB: PD 06/2016 Place of birth: Religion: Осси-AGE: CHESTER pation: NOT KNOWN GP: Irrelevant & Sensitive **Irrelevant & Sensitive** Address tel: 01 | 1&S l&S / Tel: Dr last seen alive by: Doctor V Date: 24/06/2016 Address / Tel: COUNTESS OF CHESTER HOSPITAL, LIVERPOOL ROAD, CHESTER, CH2 1UL Reporting Dr: Address: COUNTESS OF CHESTER HOSPITAL, LIVERPOOL **Doctor V** Bleep No: ROAD, CHESTER, CH2 1UL I&S Date of death: 24/06/2016 Place of NEO NATAL UNIT, COCH Time: 16:00 death: Consultant: Doctor V Hospital No: Date of admission: Have the family been notified? YES NONext of kin: Mother O&P&R Address / **Personal Data** Relationship: MIIM Tel: Name of Spouse (former spouse) Occu-DOB: pation: Identified by (if different from above); Address DAD - Father O&P&R PD CIRCUMSTANCES SURROUNDING THE DEATH (write additional info overleaf if required) From Dr - Born in good condition at 33 weeks + endays weighing 2.066Kg. APGAR score of 5 at 1 min, 7 at 5 min and 8 at 10 min. Number 1 of triplets. Put on CPAP and screened for infection and started on antibiotics. Remained well but after death of his brother was screened for infection and re started on antibiotics. Last night (23/06) abdomen has become distended so milk feed was stopped. O2 levels dropped and heart rate went down. Then from 9am needed many episodes of resuscitation and drugs none of which have worked and he has eventually passed away. Nothing suspicious but Dr does not have a cause of death due to no background of infection. SEE ADDITIONAL INFO Past Medical History Medication: Recommendation: PM Pacemaker: Yes No 🖂 Type:

Sig

PD

VARIOR

Reason/s for recommendation: NEONATAL BABY DEATH

Name:

Approved by Coroner/Deputy:

Industrial;