

After discussion and examination it was not felt that [Child O's] condition was due to an underlying heart problem.

Dr Gibbs is another consultant colleague who joined in from about 17:00 as he had been on-call and was participating in the resuscitation with Dr Brearey and [Doctor U] and me.

As we had been unable to obtain a gas due to the lack of circulation, a lumbar puncture needle was inserted in his right tibia for the intraosseous route with a flash-back which was sent for blood cultures and a blood gas was obtained. This showed a pH of 7.01 (very low) with a pCO<sub>2</sub> of 5.35(normal) with a base excess of -17 (very high). The gas showed that his ventilation was effective but circulation was very poor.

[Child O's] abdomen was noted to be significantly distended. Dr Brearey inserted an intravenous cannula line to his McBurney's Point (the right side of lower abdomen), to try and decompress the abdomen. A small amount of blood was obtained which was sent for a blood culture.

Resuscitation attempts were continued for a further 30 minutes without any improvement or return of effective circulation. [Child O's] parents were updated on a regular basis about his deteriorating condition. At 17:47 resuscitation attempts were discontinued and the baby was handed to the parents to hold.

During the resuscitation between 16:00 and 17:00 there was a brief period of stability and with Dr Brearey, Dr Gibbs and [Doctor U] present, we discussed about speaking to the neonatal consultant for the transport team to discuss management and potential transfer.

I discussed [Child O] with Dr Rackham, who was the neonatologist on-call at Arrowe Park Hospital, and updated him on the management so far. Dr Rackham advised that he agreed with the management so far and advised to try for central access in the form of an umbilical venous and arterial catheter.

It was agreed that he would call back to enquire of [Child O's] condition and also for further arrangements for potential transfer.

Unfortunately, shortly after I spoke to Dr Rackham, [Child O's] condition deteriorated again and after prolonged and unsuccessful resuscitation attempts [Child O's] death was declared at 16:47. [Child O] was given to mum to hold and this was my last contact with the [Child O]

Signed .....

**Doctor V**

Dated .....

03-11-2016