



Mr Robert Simpson
Assistant Coroner
West Sussex Coroners Service

11 August 2021

Dear Mr Simpson,

Re: Regulation 28 – Ann Bradley

Issued: 20 June 2021
Received: 23 June 2021
Responded: 11 August 2021

Thank you for sending your Section 28 notice to the Royal College of Physicians. This reply is on behalf of the organisation following consultation with appropriate officers and partners. In particular we have consulted with JAG (part of the RCP Accreditation Unit) and have liaised with the BSG President who is a member of RCP Council.

Summary of response

Having reviewed the detail, I would point out the multiple factors contributed to the sad demise of Mrs Bradley, including the importance of agreed protocols for tattoo placement and the responsibility of the surgeon to identify the location of the tumour per-operatively. The quality of pre-operative assessment and post-operative care should also be stressed. Placing credence on the lack of availability of a magnetic imaging device as the single rectifiable contributor to her death would be ill advised and not justifiable.

Details of Response

The following response is a summary of the JAG response drafted by Dr [REDACTED]:

“Having read the coroner’s report, including the narrative and the conclusion, my clinical view is that too much credence is being put by the clinicians involved in the case in the benefits of scope guide. This reflects an understandable desire to seek explanation for the poor outcome in factors other than human error or performance.

Further comment on the use of magnetic imaging is that it is not appropriate to mandate this equipment as it is not available for all video endoscope systems, it cannot be used on all patients and is not necessary for completion of colonoscopy. It does support training and also supports regular practice. Many services use it to support patient comfort. It therefore is a highly desirable piece of equipment. JAG accreditation ensures high quality endoscopy services and measures against quality

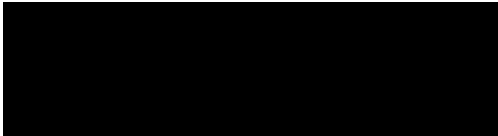
standards from many bodies included learned societies such as the BSG and national guidelines such as NICE. There is no standard that mandates magnetic imagers and therefore we cannot “defer” or “not award” on the basis of its availability in the unit. This reflects the issues outline above.

Additionally, even non-complicated surgery to the large bowel i.e. any surgical resection carries a significant mortality and can be calculated prior to surgery. We do not know how this was communicated to the patient or the coroner.

Reviewing both the reasons why we use Magnetic imaging and the complexities of this case, I feel that the influence of “not” having scope guide/MEI available was only one small part of the case. It would not change JAG approach, which is that, where we can, we do encourage the purchase of such equipment but it is not essential.”

I hope this response is both informative and helpful to your enquiries.

Yours sincerely,

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Dr 
Registrar, Royal College of Physicians