

CONFIDENTIAL ATTORNEY WORK PRODUCT

Trial Transcript Summary, Volume 1
of witness

Dr. Richard Bailey
Jones v. Good Samaritan Hospital
Taken November 23, 2003

<u>PAGE:LINE</u>	<u>SUBJECT/TOPIC</u>	<u>SUMMARY</u>
		EXAMINATION BY MR. FORD
2:6 5:16	Dr. Keith's failure to suggest appendicitis	Dr. Bailey said that Dr. Keith had not indicated appendicitis to Dr. Bailey. Had Dr. Keith included appendicitis in his differential diagnosis, Dr. Bailey would have looked at the case differently. Having called in a specialist, Dr. Bailey would not have ignored his advice. If appendicitis had been suggested as a possible diagnosis, Dr. Bailey would obviously have considered appendicitis.
5:18 5:39	The importance of a diagnosis on the 18th	Dr. Bailey had not thought it critical to determine, on the 18th of April, why his 22-year-old patient was in hospital for the third time. Dr. Bailey was asked whether, if it wasn't critical, it was certainly important. Dr. Bailey said that at the time it hadn't seemed important enough. Now, of course, things looked different. Dr. Bailey denied that his failure to apprise himself of the test results on the 18th was a departure from the standard of care. He conceded that it might have been a departure from the standard of care if he had requested the barium enema in order to look for appendicitis, but at the time that wasn't the case.
5:41 8:11	The barium enema could have disclosed appendicitis	Dr. Bailey agreed that a barium enema could disclose appendicitis. If he had examined the barium enema results immediately he would probably have diagnosed appendicitis on the 18th. But the barium enema had been done for a completely different reason - appendicitis didn't enter the thinking at the time.

8:13 10:31 **Dr. Keith's differential diagnosis**

If Dr. Keith had included appendicitis in his differential diagnosis during Dr. Bailey's phone call to him on the 17th, Dr. Bailey would also have included appendicitis among his own possible diagnoses on the 17th. Similarly, if Dr. Keith had included appendicitis in his differential diagnosis while the two doctors were still in contact on the 18th, Dr. Bailey would also have included appendicitis in his own possible diagnoses on the 18th.

10:35 14:30 **Dr. Bailey's response to Dr. Keith's diagnosis**

Dr. Bailey said there was a great difference between considering another doctor's diagnosis and accepting it. If Dr. Keith had made a diagnosis of appendicitis, Dr. Bailey would have considered that diagnosis. Dr. Bailey said that he would not necessarily have adopted the diagnosis, given his own assessment of the patient, Ernest, on the 18th. However, Dr. Williams had already suggested intermittent appendicitis, so if Dr. Keith had also diagnosed appendicitis, the diagnosis would be strengthened and Dr. Bailey would have given serious consideration to appendicitis.

14:31 18:10 **Appendicitis was not a reason for ordering the barium enema**

Dr. Bailey reconfirmed that he would have given serious consideration to appendicitis if it had been included in Dr. Keith's differential diagnosis. Dr. Bailey further confirmed that if he had ordered the barium enema in connection with suspected appendicitis, he would have made more of an effort to find out the results. He could have made a direct enquiry from the radiologist.

18:12 18:20

Q. So, had Dr. Keith told you he was considering appendicitis, that would have had the effect on you later in the day of picking up the phone and getting the results of the barium enema, right?

A. Yes, I think that's fair to say.

18:22 24:9 **Dr. Williams would have operated earlier**

Dr. Bailey accepted Dr. Williams' testimony to the effect that had Dr. Williams known the results of the barium enema on the 18th he would have operated on the 18th. Dr. Bailey agreed that if he had seen the results on the 18th, he would have passed the results immediately to Dr. Williams. The operation could easily have been done on the 18th.

24:11 26:12 **Dr. Keith caused
the delay in operating**

It was put to Dr. Bailey that if Dr. Keith had included appendicitis in his differential diagnosis, Dr. Bailey would have chased up the barium enema results promptly. Dr. Bailey would then have confirmed the appendicitis and got straight on to Dr. Williams, who would have operated promptly on the 18th. Therefore, the failure of Dr. Keith to include appendicitis in his differential diagnosis had contributed to the two-day delay in operating. Dr. Bailey accepted the analysis that was put to him.

Continued...