although the scan showed physical injury to his head in terms of bruising and swelling, and probably bleeding under the scalp on both sides, the scan did not show any evidence of any physical injury to the brain.

14. There is evidence of Mr Hamill having airway problems and experiencing of lack of oxygen whilst he was at CAH. The notes contained at page **38677** record "*O2 saturation* " and then "*75%*" which would show a severe lack of oxygen on arrival at CAH making him quite hypoxic. Oxygen levels should be 95 to 100% and anything below mid-80s is dangerous. If oxygen deprivation persists for more than 4 to 5 minutes then it is likely that there will be damage to organs, the most sensitive being the brain. Mr Hamill's oxygen levels would have improved dramatically once the airway tube was inserted. As I have stated, the tube was removed later on 27 April 1997 after he arrived at RVH. A tube was not re-inserted whilst he was in my care.

15. I can not say for certain what happened in Mr Hamill's case but there is evidence that he had airway problems on arrival at CAH and we know that he later had a CT scan at RVH which showed no brain injury. Lack of oxygen to the brain does not show on a CT scan, certainly not in the first few days. Sometimes it is difficult to detect at all but it obviously has devastating effects on the way that the brain functions.

16. Although I did not write a diagnosis at the time I suspected that Mr Hamill had a hypoxic brain injury secondary to an airway problem prior to his arrival at CAH. I arrived at this diagnosis by a process of exclusion. There are no tests for hypoxic brain injury; it is a diagnosis of exclusion. Even if a high blood alcohol level was making Mr Hamill unconscious on the first day, it should not have been doing so two days later. There was nothing visible on the CT scan to explain why he was unconscious. He was not on sufficient sedative drugs to achieve that result. Further, when his level of consciousness improved, he showed evidence of irritability and