

<p>1 Tuesday, 6 June 2017 2 (10.00 am) 3 THE CORONER: Yes. 4 Housekeeping 5 MR WASTELL: Sir, today you are going to hear evidence from 6 a number of civilian and paramedic witnesses who 7 attended to the collapsed male in the road. 8 One of the witnesses scheduled for today, 9 Ms Iris Da Silva, unfortunately she is currently in 10 hospital with serious health problems and she is indeed 11 due to undergo surgery this week. I understand from 12 speaking to the other interested persons this morning 13 that her evidence is unlikely to be disputed and 14 therefore I ask that you admit the evidence of 15 Iris Da Silva under Rule 23.1(d) of the Coroners' 16 Inquest Rules 2013. 17 You will find it behind tab 5(a) of the hearing 18 bundle, and you will see it is dated 10 November 2012. 19 THE CORONER: Yes. 20 MR WASTELL: Sir, at the same time, behind tab B there is 21 a transcript of a 999 call made to the ambulance service 22 where it is uncontroversial that the female making the 23 call was also Iris Da Silva and as you will hear later 24 today, males 1 and 2 were Neil St Clair-Ford and 25 Liam Walsh respectively.</p> <p style="text-align: center;">Page 1</p>	<p>1 A. Yes. 2 Q. Dated 10 November 2012? 3 A. Correct. 4 Q. Is that statement true to the best of your knowledge and 5 belief? 6 A. Yes. 7 Q. Mr St Clair-Ford, it is a big court so remember to keep 8 your voice up. You have microphones in front of you and 9 the transcribers are trying to take a note of what you 10 say. 11 A. Okay. 12 THE CORONER: I suspect those microphones -- I am not sure, 13 I think they probably only go on to the recording 14 system, I am not sure whether they amplify. As 15 Mr Wastell has said, it is a very big room, if you can 16 do your best to keep your voice up. 17 A. Okay. 18 MR WASTELL: At the time you made your statement, 19 November 2012, you were working at a private property in 20 Granville Road, St George's Hill estate, is that right? 21 A. Correct. 22 Q. What was the job that you did? 23 A. Chauffeur/security. 24 Q. You describe in your statement an incident at about 5.00 25 in the afternoon on 10 November, the same day you made</p> <p style="text-align: center;">Page 3</p>
<p>1 In respect of that evidence, again, I understand it 2 is undisputed evidence and therefore I ask that you 3 admit it again under 23.1(d). 4 Sir, if you are agreeable with that, then my 5 proposal is to read out the statement of Iris Da Silva 6 after we have heard from the first live witness to keep 7 the chronology, but not to read out in full the 8 transcript of the court, simply you admit it and then 9 I can deal with it with the live witnesses. 10 THE CORONER: Certainly, well thank you very much. 11 I think I still have to say for the purposes of the 12 Rule, so this is the statement of Iris Da Silva, and 13 there is a 999 call as well, this is evidence about the 14 finding of the deceased and I think I am obliged to say 15 that any interested person can have a copy and can 16 object to its admission if they want but nobody objects 17 and everybody has a copy, so we will proceed as you say. 18 MR NEIL ST CLAIR-FORD (sworn) 19 Questions from MR WASTELL 20 MR WASTELL: Could you state your name for the court, 21 please. 22 A. Neil St Clair-Ford. 23 Q. Mr St Clair-Ford, in front of you is a bundle. If you 24 turn to tab 3, do you see a statement there given by 25 you?</p> <p style="text-align: center;">Page 2</p>	<p>1 your statement. In which you saw something in the road. 2 First of all, which road was it? 3 A. I was travelling south along Granville Road past one of 4 the -- the property where I work and got to the brow of 5 the hill, went over it, saw something white on the 6 left-hand side laying in the road, wondered what it 7 was -- it was a bit drizzly, it was getting towards dusk 8 so the light wasn't that great. Slowed down -- because 9 normally things are not left around in that sort of 10 area -- and saw it was a person. 11 Q. What was the lighting like? 12 A. As I said, you know, dusk was starting to come in. 13 So -- 14 Q. Did you have the headlights -- 15 A. Probably 70 per cent. 70 per cent sort of light. 16 Q. Did you have the headlights on in your car? 17 A. Yes. 18 Q. Let's look at a map if we may. 19 In the bundle in front of you, behind tab 27B, it is 20 page 342. Hopefully you will find a colour map. 21 A. Got it. 22 Q. I suggest you actually pull it out of the bundle. 23 Right, now again I think it is uncontroversial, that 24 is a map of St George's Hill estate, is it? 25 A. That's correct.</p> <p style="text-align: center;">Page 4</p>

<p>1 Q. The road you mention is Granville Road. Do we see that 2 at the top left of the map? 3 A. Yes. 4 Q. You say you were travelling down Granville Road. Just 5 to be clear, you see on the left you have a compass, 6 north/south, which direction were you travelling? 7 A. South. 8 Q. Again, just so the coroner can be orientated, do you see 9 the house at the top left of that map with a sort of red 10 shading? 11 A. Yes. 12 Q. Do you see that says "The Coach House"? 13 A. Yes. 14 Q. Five properties below that, do you see a property marked 15 Hillcrest Cottage? 16 A. Yes. 17 Q. The property that you were working at, that is somewhere 18 in between the two? 19 A. That's correct. 20 Q. We won't go further in terms of identifying it. 21 Where on that map did you see the person in the 22 road? 23 A. As you -- looking at the map, as you come down, you will 24 see there is an area without any houses on. It is past 25 that and it is virtually the house after the gap, as you</p> <p style="text-align: center;">Page 5</p>	<p>1 A. Yes -- so once you're travelling south from the top, you 2 get to Hillcrest -- 3 Q. Yes. 4 A. -- it is probably why they called it that, that is quite 5 a shallow hill going up and then once you get to 6 Hillcrest, still travelling south, down towards the 7 junction you have a very, very steep hill. 8 Q. Right. 9 The man that you saw was just beyond the brow of the 10 hill as you travel south? 11 A. Yes. 12 Q. You have seen the man in the road, you stopped your car 13 presumably? 14 A. Hmm. 15 Q. What did you do? 16 A. Stopped the car, wondered what it was, looked around. 17 We have to be a little bit careful -- we are sort of 18 trained not to stop the car for anything, just in case 19 somebody wants to kidnap your principal. But I was in 20 the car on my own, windows are blacked out so people 21 don't know whether I've got somebody in there or not, so 22 you have to be a little bit cautious. 23 But I stopped the car. 24 Q. Can I just stop you there, that description of the 25 principal being security conscious, is that a common</p> <p style="text-align: center;">Page 7</p>
<p>1 are going south on the right-hand side. 2 Q. Just so I am clear, we have identified The Coach House 3 with the red shading -- 4 A. Yes. 5 Q. -- there is a house two houses below that -- 6 A. Hmm. 7 Q. -- then a gap -- 8 A. Yes. 9 Q. -- and then one house there -- 10 A. Yes. 11 Q. -- and the house below it is Hillcrest Cottage? 12 A. Yes. It may even well have been around the Hillcrest 13 Cottage one. 14 Q. Right. 15 A. So it was just over the brow of the hill. 16 Q. Okay, just help us with the hill. The hill, does that 17 run outside your property? 18 A. Yes. Hillcrest Cottage, where it is marked, is pretty 19 much where the brow of the hill is, so travelling south 20 from the top there, from the direction that I was 21 travelling, you go up the hill to Hillcrest, which is 22 quite a shallow hill, you get to the top and then you 23 have got a very, very steep hill going down. 24 Q. I see. The brow of the hill, the shallow hill as you 25 travel south, is around Hillcrest Cottage?</p> <p style="text-align: center;">Page 6</p>	<p>1 feature in your experience of those who live on 2 St George's Hill estate? 3 A. Not for every individual, but certainly there are some 4 high profile individuals. Many of them tend not to have 5 bodyguards but they have chauffeur/security guards, 6 people trusted close to them. I have been with my 7 principal for many years and he won't have anybody else 8 drive him. 9 Q. Is it fair to say that there is quite a lot of security 10 on the estate? 11 A. St George's Hill? There is a number of gates that you 12 can access St George's Hill, there are two manned gates, 13 so unless you have a pass you can't get through the 14 electric gates. Each of the gates have vehicle 15 recognition -- registration recognition cameras and they 16 also have security cameras. 17 There is mobile security in vans driving round the 18 estate as well, and the manned gates are manned 24 hours 19 a day, seven days a week. 20 Q. Thank you. 21 Now I cut you off, you were describing how you are 22 trained not to stop the car, if I can put it that way, 23 but on this occasion you did stop the car? 24 A. Yes. 25 Q. You got out and you went to look at the man?</p> <p style="text-align: center;">Page 8</p>

1 **A. Yes.**
 2 Q. Just describe what you saw. How was he lying in the
 3 road?
 4 **A. He was facing up the hill, so he'd come -- so the way**
 5 **his body was laying, it suggested that he had run up the**
 6 **steep part of the hill from the junction at the bottom,**
 7 **that is marked with the green bit of grass there, run up**
 8 **the hill, got towards the brow of the hill and fallen**
 9 **forward and was laying almost in the recovery position,**
 10 **face down.**
 11 Q. So he was face down?
 12 **A. Face down.**
 13 Q. When you say "the recovery position", how is that
 14 different from simply --
 15 **A. His body was kind of on one side.**
 16 Q. Yes.
 17 **A. Yes.**
 18 Q. Did you see any obvious injuries at that point?
 19 **A. Just noticed his knees were grazed.**
 20 Q. Could you see his face?
 21 **A. Just one side of it, as I said, he was kind of -- if**
 22 **that is the ground, he was in that position.**
 23 **(Indicated)**
 24 Q. Did you see the colour of his face?
 25 **A. Pale, he was always pale.**

Page 9

1 Q. He was always pale?
 2 **A. Hmm.**
 3 Q. You had seen this man before?
 4 **A. I had seen him many times running up the hill.**
 5 Q. Right. You had seen the same man running up the hill?
 6 **A. Hmm.**
 7 Q. Do you have anything to tell the coroner about how he
 8 looked to you on those occasions?
 9 **A. Well, it is a very steep hill. When our principals want**
 10 **to go out and go for walks up and down it and go for**
 11 **runs and stuff, I sent Liam because he was younger. It**
 12 **is very steep.**
 13 Q. Yes.
 14 **A. He would run up that hill, you could see he was really,**
 15 **really struggling by the time he got to the top, he was**
 16 **often suffering from heavy perspiration when he got**
 17 **there.**
 18 Q. Just for the transcript, you had your bed bowed?
 19 **A. Yes, he had his head bowed, you know, holding his knees**
 20 **and gasping for breath.**
 21 Q. Would he stop?
 22 **A. Yes.**
 23 Q. At the top of the hill?
 24 **A. Yes, sometimes he didn't get to the top.**
 25 Q. You would see him stopped on the hill?

Page 10

1 **A. Yes.**
 2 Q. Did you know him?
 3 **A. No. No, I didn't know who he was. People in**
 4 **St George's Hill tend to keep themselves to themselves,**
 5 **unless they are members of the tennis or golf club.**
 6 Q. How many times do you think you had seen him out
 7 running?
 8 **A. Probably a dozen times, approximately.**
 9 Q. You have told me that he was pale but he was always
 10 pale?
 11 **A. Yes.**
 12 Q. Did you touch him?
 13 **A. When I stopped the car and got out of the car to check**
 14 **on him, I did.**
 15 **I spoke to him, sort of said, you know, "Are you**
 16 **okay? Are you okay? Speak to me."**
 17 **I put my hand on him, shook him. He was very cold**
 18 **and wet from the damp rain or perspiration, I couldn't**
 19 **tell which, very cold.**
 20 Q. Was he moving at all?
 21 **A. He wasn't moving as such, no. I was trying to find out**
 22 **whether he was breathing or, you know, and --**
 23 Q. Was he breathing?
 24 **A. It is five years ago. I struggled to find anything**
 25 **other than a trembling.**

Page 11

1 Q. Okay, we will come to the 999 call, which may help you,
 2 but just on the trembling, is that something you can
 3 recollect now?
 4 **A. Yes -- I am not too sure whether it was a nerves thing**
 5 **or anything, I am not a doctor. My first thought was to**
 6 **get him some help. I know one of my colleagues,**
 7 **Liam Walsh, served in special forces in the navy, so**
 8 **I know he has got some medical training because we**
 9 **always like to have somebody with medical training in**
 10 **the house. So I tried to call him first of all but**
 11 **I couldn't get a mobile phone signal. It is**
 12 **intermittent at St George's Hill, or at least it was**
 13 **then.**
 14 Q. What did you do?
 15 **A. I sort of said, "Look, I will be back in a second",**
 16 **didn't know whether he could hear me or not, but just to**
 17 **let him know I was not running off and leaving him and**
 18 **banged on the door of the house pretty much opposite,**
 19 **because that house has not got electric gates, they have**
 20 **got two big dogs instead.**
 21 Q. Do you remember which house that was?
 22 **A. I can't remember the name of it but it is the lady that**
 23 **is not very well at the moment, she is the one that came**
 24 **to the door.**
 25 Q. She says, it is Hillcrest, you wouldn't disagree with

Page 12

1 that?

2 **A. That's Hillcrest then, yes.**

3 Q. You went to her door?

4 **A. Yes. I said, "Somebody has collapsed outside, we need**

5 **an ambulance straight away", or something to that**

6 **effect.**

7 Q. You asked her to call an ambulance?

8 **A. I asked her to call.**

9 Q. Then you went back to the man, didn't you?

10 **A. Yes.**

11 Q. You say in your statement you tried to keep him awake?

12 **A. Yes.**

13 Q. What did you mean by that, he wasn't awake?

14 **A. Well, when somebody is unconscious, you don't know how**

15 **aware they are, so just in case he was aware, I carried**

16 **on talking to him, you know, "Stay with us", that kind**

17 **of thing. I grabbed some towels out of the car, put**

18 **those under his head, carried on trying to get hold of**

19 **the property where I work to get hold of Liam, managed**

20 **to get hold of Liam, said, "Look, get out here now,**

21 **somebody has collapsed in the road, quick as you can",**

22 **you know, just confirm with him, you know, he could cope**

23 **with that, "You are trained medical, aren't you?**

24 **"Yes.**

25 **"Right, out here."**

Page 13

1 **Which he did.**

2 Q. Then we know that you describe rolling the man on to his

3 back, Liam starting CPR --

4 **A. Yes.**

5 Q. -- and you were on the phone to the ambulance service at

6 that time?

7 **A. Yes.**

8 **Liam sort of asked me to help him get him into**

9 **position, raise his legs. In the meantime the lady from**

10 **the -- from Hillcrest brought out blankets and things**

11 **and I think she brought out torches at some point as**

12 **well because it was starting to get darker, it might**

13 **have been a little bit later on but Liam started to give**

14 **mouth to mouth and CPR, to try and get him going,**

15 **I think at that point Liam couldn't find a heartbeat,**

16 **pulse ...**

17 Q. Let's look at the 999 transcript, it may help you with

18 your recollection.

19 It is in the bundle, tab 5(b).

20 **A. Okay.**

21 Q. We see on page 1 a call from a female to the ambulance

22 service. Do you see four lines down, "Help required"?

23 **A. Yes.**

24 Q. She says the help is required inside St George's Hill,

25 the address, Hillcrest Cottage, Granville Road, turning

Page 14

1 over the page, the ambulance service ask:

2 "Okay, is the patient breathing?"

3 The female says:

4 "I don't know, the man asked me here, he knocked on

5 my door, it is in the road."

6 Do you see that?

7 **A. Yes.**

8 Q. "Sorry, I can't understand what you are saying."

9 The ambulance service says, and the female replies:

10 "He collapsed on the road. He was (Inaudible).

11 "He was running?"

12 Says the ambulance service.

13 The female says:

14 "And the man asked me to call 999 because he was on

15 the road and see the man on the floor, so it is in front

16 of my house."

17 Ambulance service asks:

18 "Is he conscious and breathing?"

19 Female:

20 "I have to go outside and have a look."

21 You see that?

22 **A. Hmm.**

23 Q. Then the female says:

24 "Okay, just a moment."

25 And the transcriber has put:

Page 15

1 "Talking to someone else."

2 And then:

3 "Can you talk with them?"

4 Then a male 1 comes on the line at the top of

5 page 3; do you see that?

6 **A. Hmm.**

7 Q. Just turning over the page, page 4, four lines down,

8 male 1 says:

9 "Okay, hold on, yeah, he is breathing, he just made

10 a noise. I haven't turned him over. I've got

11 a military guy coming up the road now, he is a trained

12 medic."

13 That is you we can therefore tell, isn't it, male 1?

14 **A. Yes.**

15 Q. Let's go back to page 3. Okay the ambulance service

16 asked you what has happened and five lines down you

17 describe:

18 "There is a runner, he has just ran up a hill and it

19 looks like he has collapsed."

20 You are asked: is he breathing?

21 You say:

22 "He is not conscious."

23 You confirm he is unconscious.

24 **A. Hmm.**

25 Q. That accords with your recollection?

Page 16

<p>1 A. Yes.</p> <p>2 Q. You are then asked:</p> <p>3 "Is he breathing?"</p> <p>4 And you say, "Yes."</p> <p>5 You see that?</p> <p>6 A. Hmm.</p> <p>7 Q. So at the time you appeared to have thought he was</p> <p>8 breathing, when you checked him?</p> <p>9 A. Yes.</p> <p>10 Q. He is very cold. You are asked:</p> <p>11 "Is his chest going up and down?"</p> <p>12 You say:</p> <p>13 "He is laying on his chest in the recovery</p> <p>14 position."</p> <p>15 A. Hmm.</p> <p>16 Q. Can you remember now whether his chest was going up and</p> <p>17 down?</p> <p>18 A. It was so faint, you know, when he made a noise it was</p> <p>19 more of an "ah", more of a choke, and his life signs</p> <p>20 were very, very, very faint, if ...</p> <p>21 Q. Look at the next line:</p> <p>22 "Okay, Roll him on to his back so we can check if he</p> <p>23 is breathing."</p> <p>24 The ambulance service tells you and you say:</p> <p>25 "Yes, he is breathing, he just made a noise,</p> <p style="text-align: center;">Page 17</p>	<p>1 A. Yes.</p> <p>2 Q. "Can you tell me any time he takes a breath.</p> <p>3 "Hang on the guy, the guy is going to be with you in</p> <p>4 a second. He is trembling, he is trembling, he is</p> <p>5 trembling, have you got a blanket or something?"</p> <p>6 Then below that:</p> <p>7 "Yeah he is breathing, he is trembling, we're just</p> <p>8 getting a blanket for him ..."</p> <p>9 The ambulance service asks you:</p> <p>10 "What do you mean trembling? Is he having a fit or</p> <p>11 ..."</p> <p>12 You say:</p> <p>13 "I couldn't tell, I think it feels more like</p> <p>14 shivering."</p> <p>15 Again, does that accord with your recollection?</p> <p>16 A. Yes, that reminds me, yes.</p> <p>17 Q. You say you have no idea who he is.</p> <p>18 A. No, we didn't, we just knew that he lived on the estate</p> <p>19 somewhere and had seen him out running, you know.</p> <p>20 Q. You mean by that "I don't know his name", do you?</p> <p>21 A. No.</p> <p>22 Q. Then we see you pass over to the ex-military guy, "You</p> <p>23 want a quick word with him?"</p> <p>24 That is Liam Walsh?</p> <p>25 A. Yes.</p> <p style="text-align: center;">Page 19</p>
<p>1 I haven't turned him over, I've got a military guy</p> <p>2 coming up the road now, he is a trained medic. I am</p> <p>3 going to pass you over as soon as he gets here."</p> <p>4 At the time it appeared to you that he was</p> <p>5 breathing?</p> <p>6 A. Yes, looking at the transcript, yes.</p> <p>7 Q. Alive?</p> <p>8 A. Alive. Unconscious.</p> <p>9 Q. And he made a noise?</p> <p>10 A. Well, it was more of a choking sound.</p> <p>11 Q. Was it loud, soft?</p> <p>12 A. Soft.</p> <p>13 Q. Do you recall how long it went on for?</p> <p>14 A. A second, maybe two.</p> <p>15 Q. Did he make any other noises after that, do you recall?</p> <p>16 A. He didn't try to speak.</p> <p>17 THE CORONER: He didn't?</p> <p>18 MR WASTELL: He didn't try to speak?</p> <p>19 A. He didn't try to speak.</p> <p>20 Q. Did he make any other choking noises?</p> <p>21 A. No, just that one.</p> <p>22 Q. Okay, you were asked about his breathing:</p> <p>23 "It is regular, is it?</p> <p>24 "I wouldn't say it is regular."</p> <p>25 That accords with your recollection?</p> <p style="text-align: center;">Page 18</p>	<p>1 Q. Then just scanning down the rest of the transcript, you</p> <p>2 see it is male 2 talking to the ambulance service over</p> <p>3 the page, page 6. We will hear from Mr Walsh in</p> <p>4 a moment but he is asked:</p> <p>5 "Is he breathing?</p> <p>6 "He is, but it is very faint."</p> <p>7 He says:</p> <p>8 "It is very slow, I can't really tell, because of</p> <p>9 the light, but his face looks very dark."</p> <p>10 Ambulance service asks:</p> <p>11 "What blue."</p> <p>12 Male 2:</p> <p>13 "Yes, but then I can't tell because of how dark it</p> <p>14 is here."</p> <p>15 Do you remember getting your car and using the</p> <p>16 headlights to help illuminate the scene?</p> <p>17 A. I do now you have reminded me.</p> <p>18 Q. Do you recall the colour of his face after shining the</p> <p>19 headlights?</p> <p>20 A. I don't, I don't.</p> <p>21 Q. Okay, just going further on in the transcript, male 2:</p> <p>22 "Hello matey, are you responsive, can you hear me?"</p> <p>23 Right, can you let them know that he has hit his head on</p> <p>24 the way down. I'm just checking your airways, mate.</p> <p>25 Right, I can't see any breathing."</p> <p style="text-align: center;">Page 20</p>

5 (Pages 17 to 20)

<p>1 Do you recall --</p> <p>2 A. Liam saying those things?</p> <p>3 Q. Well, do you recall Liam saying those things?</p> <p>4 A. Yes, I do.</p> <p>5 Q. Do you recall that he had hit his head on the way down?</p> <p>6 A. I didn't notice this --</p> <p>7 Q. Appeared to have --</p> <p>8 A. -- because he was face down, until we moved it and Liam</p> <p>9 pointed it out. So it is very much a case of, yes, Liam</p> <p>10 spotted that.</p> <p>11 Q. What did he spot?</p> <p>12 A. A scratch on his head, he had banged his head, a small</p> <p>13 cut rather than a scratch.</p> <p>14 Q. How big?</p> <p>15 A. Difficult to recollect exactly, I would say probably</p> <p>16 an inch and a half, maybe an inch and a quarter. It</p> <p>17 wasn't big.</p> <p>18 Q. Was it bleeding?</p> <p>19 A. It was more of a graze. I would say his grazes and</p> <p>20 things were -- Liam might remember better but I would</p> <p>21 say it was grazing. There wasn't a great deal of blood.</p> <p>22 Q. When you say grazes, as well as the head --</p> <p>23 A. The grazes to the knees.</p> <p>24 Q. Were there any other grazes, do you recall?</p> <p>25 A. Not that I recollect now.</p> <p style="text-align: center;">Page 21</p>	<p>1 to be relaying instructions on CPR to Mr Walsh, do you</p> <p>2 recall that?</p> <p>3 A. Not now, no.</p> <p>4 Q. Let's just read it, top of page 8.</p> <p>5 "He doesn't want any instructions. You don't need</p> <p>6 any instructions Liam, no?"</p> <p>7 Male 2:</p> <p>8 "Just go through it."</p> <p>9 Male 1:</p> <p>10 "Just talk us through it.</p> <p>11 "Okay, he needs to lay him on his back and kneel by</p> <p>12 his side."</p> <p>13 You say:</p> <p>14 "On his back, yeah."</p> <p>15 So you rolled him over on to his back, correct?</p> <p>16 A. Hmm.</p> <p>17 Q. Then you are on the phone to the ambulance, over the</p> <p>18 page, page 9, they are giving you instructions there, do</p> <p>19 you see that:</p> <p>20 "Make sure his hands are in the centre of his</p> <p>21 chest."</p> <p>22 You say:</p> <p>23 "Yeah, they are."</p> <p>24 They tell you about the rate and you say:</p> <p>25 "One and two and three."</p> <p style="text-align: center;">Page 23</p>
<p>1 Q. Okay, back to the transcript. Page 7 we are on,</p> <p>2 internal page 7, the ambulance service asks.</p> <p>3 "Is he breathing?"</p> <p>4 Female:</p> <p>5 "No, no, he is not breathing."</p> <p>6 Ambulance service:</p> <p>7 "He is not breathing?"</p> <p>8 Then you, male 1:</p> <p>9 "He is not breathing?"</p> <p>10 A. Hmm.</p> <p>11 Q. "Okay, all right, does he know how to give CPR or does</p> <p>12 he need some instructions?"</p> <p>13 Then male 1, you:</p> <p>14 "Do you know how to do CPR?"</p> <p>15 You are talking to Liam there?</p> <p>16 A. Yes.</p> <p>17 Q. Male 2:</p> <p>18 "Right, I can't see any blockages, but he is not</p> <p>19 breathing."</p> <p>20 Male 1:</p> <p>21 "Can't see any blockages, he is not breathing."</p> <p>22 Again, do you recall that, that he had stopped</p> <p>23 breathing, whilst you were with him?</p> <p>24 A. Yes. Yes.</p> <p>25 Q. Okay, and then turning over the page, you appear there</p> <p style="text-align: center;">Page 22</p>	<p>1 Do you recall that now?</p> <p>2 A. Yes.</p> <p>3 Q. Then, just to finish off the transcript, four lines from</p> <p>4 the bottom, ambulance service say:</p> <p>5 "Okay, you are all doing a fantastic job, we are</p> <p>6 going to be with you very shortly."</p> <p>7 You say "Yeah".</p> <p>8 Ambulance service:</p> <p>9 "Okay, is he on his back there?"</p> <p>10 You say:</p> <p>11 "Yeah, he is on his back."</p> <p>12 Over the page:</p> <p>13 "Come on, buddy, come back, come on, come on."</p> <p>14 Did you think, Mr St Clair-Ford, that he had died</p> <p>15 whilst you were there attempting to give CPR?</p> <p>16 A. Yes.</p> <p>17 Q. Then, again, some encouragement from the ambulance</p> <p>18 service:</p> <p>19 "You are all doing brilliantly."</p> <p>20 Then the call ends.</p> <p>21 Again, I appreciate it is a long time ago, but</p> <p>22 during this time you were with the man collapsed on the</p> <p>23 road, do you remember seeing any vomit?</p> <p>24 A. Yes, when Liam was giving him mouth to mouth he released</p> <p>25 some vomit into Liam's mouth. I had to get some water</p> <p style="text-align: center;">Page 24</p>

6 (Pages 21 to 24)

<p>1 from the car to, so Liam could wash his mouth out.</p> <p>2 Q. You say that is when Liam was giving mouth to mouth. Do</p> <p>3 you recall whether there was vomit there before he</p> <p>4 started to give mouth to mouth?</p> <p>5 A. When he was laying in the road, there was certainly some</p> <p>6 drool there.</p> <p>7 THE CORONER: Drool?</p> <p>8 MR MOXON BROWNE: Drool. Thank you.</p> <p>9 A. With the light being what it was, you know, I couldn't</p> <p>10 see whether there was any particles in that, you know</p> <p>11 food stuffs or anything.</p> <p>12 MR WASTELL: Sorry, where was the drool?</p> <p>13 A. It was running down the side of his face.</p> <p>14 Q. How much, do you remember?</p> <p>15 A. Maybe two tablespoon fulls.</p> <p>16 Q. I appreciate it is a long time ago, can you remember</p> <p>17 anything about the colour?</p> <p>18 A. It was bubbly. Just off transparent, so ... it looked</p> <p>19 very similar to saliva.</p> <p>20 Q. To saliva?</p> <p>21 A. But a bit thicker.</p> <p>22 Q. A bit?</p> <p>23 A. Thicker.</p> <p>24 Q. Thicker.</p> <p>25 The vomit that you describe after Mr Walsh was</p> <p style="text-align: center;">Page 25</p>	<p>1 A. I can't remember, we weren't looking at watches. It</p> <p>2 seemed like forever.</p> <p>3 Q. You found some property I think on the man?</p> <p>4 A. Yes. He was wearing earphones and he had a mobile</p> <p>5 phone. When the paramedics arrived they asked who he</p> <p>6 was, they had taken over CPR and things and we were just</p> <p>7 holding bags, things for them, for drips. They asked if</p> <p>8 we knew who he was, we didn't. Liam said he would check</p> <p>9 his phone, checked his phone, it wasn't locked and found</p> <p>10 some texts with the name "Alexander". We didn't have</p> <p>11 a last name I don't think but we knew it was Alexander.</p> <p>12 Q. You mentioned that he was wearing earphones.</p> <p>13 A. Yes.</p> <p>14 Q. That was the case when you found him collapsed?</p> <p>15 A. Yes. Rather than the big ones they are wearing these</p> <p>16 days, just the little iPhone ones.</p> <p>17 Q. You are clear about that in your recollection are you,</p> <p>18 you remember that they were still in?</p> <p>19 A. I am 70 per cent, 75 per cent sure. It is five years</p> <p>20 ago.</p> <p>21 Q. Of course.</p> <p>22 That is very fair.</p> <p>23 In your statement, you mentioned Liam checking the</p> <p>24 phone. Was it just one phone, we have heard reference</p> <p>25 to two?</p> <p style="text-align: center;">Page 27</p>
<p>1 giving CPR, mouth to mouth, can you help the coroner</p> <p>2 about the vomit. Do you remember the colour?</p> <p>3 A. No, but Liam might remember.</p> <p>4 Q. We will ask him in a moment.</p> <p>5 Do you remember how much there was?</p> <p>6 A. I wouldn't say it was a lot. You know, we are not</p> <p>7 talking projectile vomiting, we are talking, you know,</p> <p>8 a small amount.</p> <p>9 Q. Did you at any point look inside the man's mouth?</p> <p>10 A. No.</p> <p>11 Q. Do you recall any -- I'm sorry to ask this -- do you</p> <p>12 recall any particular odours or smells coming from him?</p> <p>13 A. No. No.</p> <p>14 Q. Sorry, I should have asked you this earlier, you have</p> <p>15 described the housekeeper?</p> <p>16 A. Hmm.</p> <p>17 Q. Mr Walsh and obviously you were there, was there anyone</p> <p>18 else present when you found the man and started to give</p> <p>19 him CPR?</p> <p>20 A. No, as I said, when I stopped the car I had a look</p> <p>21 around to check to see whether it was a set up</p> <p>22 situation. I didn't see anybody.</p> <p>23 Q. The paramedics arrived in due course, do you recall how</p> <p>24 long that was after you started giving CPR -- I say you,</p> <p>25 Mr Walsh?</p> <p style="text-align: center;">Page 26</p>	<p>1 A. I was only aware of one. If he had another one in his</p> <p>2 pocket or something, I don't know.</p> <p>3 Q. Liam, I think you say in your statement, told you that</p> <p>4 he had given the police the phone?</p> <p>5 A. That's right, yes.</p> <p>6 Q. After the paramedics arrived, you stayed there watching</p> <p>7 what unfolded, correct?</p> <p>8 A. Yes. Yes. Well it was dark, they needed all the help</p> <p>9 they could get, so one ambulance turned up, then</p> <p>10 a second ambulance turned up with some additional</p> <p>11 equipment.</p> <p>12 Q. Did you have any further involvement with the body after</p> <p>13 that?</p> <p>14 A. No.</p> <p>15 MR WASTELL: Thank you, Mr St Clair-Ford.</p> <p>16 Sir, that may be a convenient moment. I know there</p> <p>17 may be a minute's silence at 11.00.</p> <p>18 THE CORONER: Yes. All right.</p> <p>19 We will break off there, so that there is</p> <p>20 an opportunity. As you know, there is a minute's</p> <p>21 silence today for anybody who wants to observe it in</p> <p>22 respect of the London Bridge events. We will break off</p> <p>23 now and then resume after that.</p> <p>24 (10.46 am)</p> <p>25 (A short adjournment)</p> <p style="text-align: center;">Page 28</p>

<p>1 (11.10 am)</p> <p>2 MR WASTELL: Mr St Clair-Ford, if you wait there, there</p> <p>3 maybe some further questions for you from other</p> <p>4 interested persons.</p> <p>5 A. Okay.</p> <p>6 Questions from MR FEAR-SEGAL</p> <p>7 MR FEAR-SEGAL: Mr St Clair-Ford, you spoke about finding</p> <p>8 Mr Perepilichny in a state that he was trembling and</p> <p>9 you thinking he was cold.</p> <p>10 A. Yes, he was trembling, what the cause of that was ...</p> <p>11 Q. Ms Da Silva also thought he was cold, didn't she, if you</p> <p>12 look at page 22?</p> <p>13 A. She did.</p> <p>14 Q. That is why she went to her house to get the blankets</p> <p>15 that you mentioned?</p> <p>16 A. Yes.</p> <p>17 Q. You told us about the phone, or phones, that</p> <p>18 Mr Perepilichny was carrying. And you said that one of</p> <p>19 them had headphones attached to it?</p> <p>20 A. What I said was I was only aware that he had one phone.</p> <p>21 If he had another on him I was not aware of that.</p> <p>22 Q. Forgive me, yes. The phone you were aware of had what</p> <p>23 you described as iPhone headphones a moment ago?</p> <p>24 A. Yes.</p> <p>25 Q. I understand those to be the sort of white, "earbuds"</p> <p style="text-align: center;">Page 29</p>	<p>1 looking into the phone and finding an email address, and</p> <p>2 also finding the surname?</p> <p>3 A. It was Liam that was looking into the phone.</p> <p>4 Q. Yes.</p> <p>5 A. He was the one that checked it.</p> <p>6 Q. Do you remember him saying anything though about having</p> <p>7 found a Russian surname as well as a first name?</p> <p>8 A. I don't recollect that, but he may well have.</p> <p>9 Q. Because it was him doing that checking not you, is that</p> <p>10 right?</p> <p>11 A. Exactly.</p> <p>12 MS HILL: Thank you.</p> <p>13 THE CORONER: Nothing else, Mr Wastell, no?</p> <p>14 MR WASTELL: Nothing else, sir.</p> <p>15 THE CORONER: Thank you very much indeed. Thank you.</p> <p>16 MR WASTELL: Sir, I now propose to read the statement from</p> <p>17 Iris Da Silva. It is a statement in which she gives her</p> <p>18 occupation as housekeeper, dated 10 November 2012. She</p> <p>19 says this.</p> <p>20 Statement of MS IRIS DA SILVA (read)</p> <p>21 MR WASTELL: "The following statement is in relation to</p> <p>22 an incident whereby a man died outside the house where</p> <p>23 I work. On Saturday, 10 November 2012 just after</p> <p>24 5.00 pm, I was in the dining area in a property called</p> <p>25 Hillcrest Cottage on Granville Road, Weybridge. I heard</p> <p style="text-align: center;">Page 31</p>
<p>1 you might call them, and usually there is a microphone</p> <p>2 on one of the earbuds, did you notice that?</p> <p>3 A. Yes.</p> <p>4 Q. Did you look at the screen of the phone?</p> <p>5 A. No.</p> <p>6 Q. Can you tell us what sort of phone it was?</p> <p>7 A. It was a white one.</p> <p>8 Q. Can you tell us the brand, was it an iPhone, did you</p> <p>9 notice that?</p> <p>10 A. It was a white one, that is as much as I can tell you.</p> <p>11 Q. A white one?</p> <p>12 A. Yes. Yes.</p> <p>13 Q. Was there music playing from the headphones?</p> <p>14 A. Not that I was aware of.</p> <p>15 Q. Was it white because it was in a case or could you see</p> <p>16 it was white, the white plastic?</p> <p>17 A. It is five years ago, but --</p> <p>18 Q. I appreciate that.</p> <p>19 A. -- I believe it was white plastic, from what</p> <p>20 I recollect.</p> <p>21 MR FEAR-SEGAL: Thank you.</p> <p>22 Questions from MS HILL</p> <p>23 MS HILL: Just one question for you, please. You have</p> <p>24 described finding the first name of the person whose</p> <p>25 body you found, do you have a recollection of Liam</p> <p style="text-align: center;">Page 30</p>	<p>1 a knock on the kitchen window and looked at the window</p> <p>2 and saw a man who shouted at me 'Call 999, there is</p> <p>3 a man unconscious'. So immediately I called 999 for</p> <p>4 an ambulance and I answered questions asked to me on the</p> <p>5 phone. I went outside and I saw the chef on the ground</p> <p>6 doing chest compressions on a male lying on the ground</p> <p>7 who was not moving. I saw the chef blowing into his</p> <p>8 mouth and then doing chest massaging again. At that</p> <p>9 time there was only me, Liam the chef, the chauffeur</p> <p>10 from the property and the male unconscious on the ground</p> <p>11 in the road. The ambulance arrived very quickly.</p> <p>12 I touched the unconscious male's arm and he felt</p> <p>13 extremely cold. I was told on the phone to tell the</p> <p>14 chauffeur and Liam to move the male on to his back as</p> <p>15 when I first saw the male he was laying on his front</p> <p>16 with one arm out to the side and his other arm</p> <p>17 underneath his chest. His head was tucked in and on the</p> <p>18 ground. His face looked very black. The paramedics</p> <p>19 arrived and took over from Liam and began working on the</p> <p>20 male. I think they worked on the male for more than</p> <p>21 half an hour. At all times I stayed on the road until</p> <p>22 police arrived and I gave my details to PC Wilson."</p> <p>23 Sir, the next live witness is Liam Walsh.</p> <p>24</p> <p>25</p> <p style="text-align: center;">Page 32</p>

1 MR LIAM WALSH (affirmed)
 2 Questions from MR WASTELL
 3 MR WASTELL: Can you state your name for the court, please.
 4 **A. Liam Walsh.**
 5 Q. In front of you there is a bundle. If you could turn to
 6 tab 4, please.
 7 **A. Thank you.**
 8 Q. You will see a statement there, "The statement of
 9 Liam Walsh", that is your statement?
 10 **A. Yes.**
 11 Q. Dated 10 November 2012?
 12 **A. Yes.**
 13 Q. Are the contents of that statement true to the best of
 14 your knowledge and belief?
 15 **A. They are, yes.**
 16 Q. On the afternoon of Saturday, 10 November 2012, you were
 17 working at a private property in Granville Road,
 18 Weybridge, correct?
 19 **A. Yes, that's correct.**
 20 Q. That is on St George's Hill estate we know?
 21 **A. Yes.**
 22 Q. What was your job?
 23 **A. I was the private chef.**
 24 Q. It was the same property that Mr St Clair-Ford worked as
 25 a chauffeur/security guard for?

Page 33

1 **A. Yes. Yes.**
 2 Q. Just to be clear, did you wear a chef's outfit?
 3 **A. Yes, I had the traditional white chef's jacket.**
 4 Q. You were wearing that on that day?
 5 **A. Yes.**
 6 Q. You describe receiving a phone call from
 7 Mr St Clair-Ford asking for your assistance. Can you
 8 help us with the time of that call?
 9 **A. The time would be unclear, it was too long ago to**
 10 **remember. I was preparing the evening meal for the**
 11 **principals that were -- they had just arrived back.**
 12 Q. In your statement you say "About 5.00 in the afternoon
 13 ... it may have been just before 5.00".
 14 **A. Yes, that is the sort of time they would come back,**
 15 **normally.**
 16 Q. Tell the coroner, what did Mr St Clair-Ford say to you
 17 on the phone?
 18 **A. It was to the words of, "Get down here quick, there is**
 19 **someone in the middle of the road, like collapsed", and**
 20 **because I was first aid trained, I wasn't like medically**
 21 **trained more than level 3 first aider, but because of**
 22 **the military experience, that is why he said for me to**
 23 **come down.**
 24 Q. Yes. You were not medically trained but you were first
 25 aid trained in the navy, is that right?

Page 34

1 **A. Yes, so I was on submarines in the navy so we assisted**
 2 **the paramedics on board so we were a higher level of**
 3 **first aid, but it is still first aid rather than**
 4 **a medical sort of profession.**
 5 Q. Yes. Above civilian, below paramedic perhaps?
 6 **A. Yes.**
 7 Q. You went to meet Mr St Clair-Ford. Where was he in
 8 relation to the property that you worked in?
 9 **A. So out of the main gates of the property, just turning**
 10 **to my left, I could see them down the road.**
 11 Q. How far away, roughly?
 12 **A. 200 yards?**
 13 Q. There should be a map that Mr St Clair-Ford has kindly
 14 ripped out of the bundle. If you look at that. He has
 15 identified that as a map of St George's Hill estate, can
 16 you see that?
 17 **A. Yes.**
 18 Q. Not referring to the name of your property but he
 19 described that as opposite the gap, or around the gap,
 20 between two properties on the left at the top left of
 21 the map, do you see that?
 22 **A. Yes.**
 23 Q. Now, where did you meet Mr St Clair-Ford?
 24 **A. Sorry, I am in the wrong place.**
 25 **It was kind of directly opposite a -- one of the**

Page 35

1 **gates to the house, the Hill Crescent house, I believe.**
 2 Q. Hillcrest, I think, I am told.
 3 **A. Hillcrest, yes.**
 4 Q. Again, just to help the coroner, since you were working
 5 on the estate at that time --
 6 **A. Yes.**
 7 Q. -- can you describe the hill and where the man was in
 8 relation to the hill?
 9 **A. Right, okay, so the hill was quite a long, steep hill,**
 10 **if you are coming up from Granville House, so at the**
 11 **bottom of the steep hill.**
 12 Q. Looking at the map, do you see a compass top left, north
 13 to south?
 14 **A. Yes.**
 15 Q. You are heading north along Granville Road?
 16 **A. So where the green triangle is, below Granville Road.**
 17 Q. Yes, and next to that we see Granville House, yes.
 18 **A. That is the start of the hill and it comes right up**
 19 **round that bend and peaks kind of around by that -- the**
 20 **cottage one.**
 21 Q. By Hillcrest Cottage as you described?
 22 **A. Yes.**
 23 Q. Is it flat thereafter past the property where you
 24 worked, as you head north or is it a gradient?
 25 **A. It is slightly -- there is a slight gradient going down.**

Page 36

<p>1 In terms -- I used to run it quite a lot and it is quite strenuous getting to the top of that hill. And then it is quite relaxing but it is not -- I wouldn't class it as a downhill for running.</p> <p>2</p> <p>3</p> <p>4</p> <p>5 Q. To be clear, when you say it is quite strenuous, you are describing going northwards along --</p> <p>6</p> <p>7 A. Going northwards, yes.</p> <p>8 Q. The man in the road that you describe, where was he in relation to the top of the hill?</p> <p>9</p> <p>10 A. So he was over the tough bit of the hill, so over the crest.</p> <p>11</p> <p>12 Q. As you head in which direction?</p> <p>13 A. Going north, up the hill.</p> <p>14 Q. Going north, he was beyond the top of that hill in your recollection?</p> <p>15</p> <p>16 A. He was beyond the hardest point, yes.</p> <p>17 Q. He had made it up the steep part; is that fair?</p> <p>18 A. Yes.</p> <p>19 Q. Whereabouts was he in the road?</p> <p>20 A. He was fairly central. Slightly over to the right-hand side, but it was very much in the middle of the road.</p> <p>21</p> <p>22 Q. Sorry to be precise, slightly to the right-hand side as you look south or north?</p> <p>23</p> <p>24 A. Looking north.</p> <p>25 Q. Looking north?</p> <p style="text-align: center;">Page 37</p>	<p>1 And just leant there, his left-hand side of the face was, like he was laying on the left-hand side of his face.</p> <p>2</p> <p>3</p> <p>4 Q. His head was turned on the ground?</p> <p>5 A. Yes.</p> <p>6 Q. Did it look to you like he had been placed in that position or like he had fallen in that way?</p> <p>7</p> <p>8 A. When I got there I assumed that he had been placed in the recovery position.</p> <p>9</p> <p>10 Q. What clothing was he wearing, do you remember?</p> <p>11 A. I can only remember just a white plain T-shirt, to be honest.</p> <p>12</p> <p>13 Q. You checked him, presumably?</p> <p>14 A. Not initially.</p> <p>15 Like I said, when I got there, I assumed that someone else had done an assessment on him, I thought they had put him in the recovery position and then I too could hear at the time what I thought was breathing but it was more of a gargle and it was a noise not like breathing in and out, it was a constant more gargle out, if that makes sense.</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22 Q. Yes. How long did that noise last for or was it continual?</p> <p>23</p> <p>24 A. I mean it was quite faint so it was more -- I got close to him to hear it and then moved away, so I wouldn't</p> <p>25</p> <p style="text-align: center;">Page 39</p>
<p>1 A. Yes.</p> <p>2 Q. You met Mr St Clair-Ford there, there was someone else there, wasn't there?</p> <p>3</p> <p>4 A. There was.</p> <p>5 Q. Who was that?</p> <p>6 A. It was the lady, didn't speak to her at all in the whole event. I didn't know who, what she was called until today.</p> <p>7</p> <p>8</p> <p>9 Q. You were aware, were you, that she had come from the cottage next to the road?</p> <p>10</p> <p>11 A. Yes.</p> <p>12 Q. Was there anyone else there at that stage?</p> <p>13 A. At that stage, no.</p> <p>14 Q. Turning to the man in the road, again, what was the lighting like, can you recall?</p> <p>15</p> <p>16 A. It was starting to get dark at the time, you could still see but it was ten minutes of light left of the day.</p> <p>17</p> <p>18 Q. Were there streetlights?</p> <p>19 A. No, not on that stretch of road.</p> <p>20 Q. What was his position in the road? I mean how was he lying in the road.</p> <p>21</p> <p>22 A. So he was leant forward, somewhat like a recovery position, his right arm was in front of him and it was -- his left arm, it was under the body but behind, so it was one up, one kind of down.</p> <p>23</p> <p>24</p> <p>25</p> <p style="text-align: center;">Page 38</p>	<p>1 have heard it if I was stood away but checking to see if he was breathing, that is when I would hear it.</p> <p>2</p> <p>3 Q. Did you think at that stage that he was breathing?</p> <p>4 A. Initially, yes.</p> <p>5 Q. We will come to the transcript in a moment.</p> <p>6 A. Yes.</p> <p>7 Q. Did you check his pulse?</p> <p>8 A. At that point, I didn't. Like I said, because I thought that someone else had already done all the procedures --</p> <p>9</p> <p>10 Q. Yes.</p> <p>11 A. -- I was just trying to wait for the paramedics.</p> <p>12 Q. Right.</p> <p>13 A. It was only when I spoke to them and like got clarification that no one else had done any checks, is when I checked.</p> <p>14</p> <p>15</p> <p>16 Q. Okay, let's look at the transcript, if we can.</p> <p>17 A. Yes.</p> <p>18 Q. It is in the same bundle, tab 5(b). We have identified you as "male 2". If you turn to page 2, internal page 5, at the top right it is page 31. It should say at the top, male 1:</p> <p>19</p> <p>20</p> <p>21 "I couldn't tell, I think it feels more like shivering."</p> <p>22</p> <p>23 Do you have that?</p> <p>24</p> <p>25 A. Yes.</p> <p style="text-align: center;">Page 40</p>

<p>1 Q. If you see five lines down it male 1 says: 2 "Yeah, there is an ex-military guy with me now, do 3 you want a quick word with him?" 4 Ambulance service: 5 "Sure." 6 Male 2: 7 "Hello. 8 "Hello, it is the ambulance service." 9 Male 2, you: 10 "Yeah, hi there. 11 "Hi, what has happened? 12 "I have only just come to the scene." 13 That accords with your recollection, doesn't it, you 14 were handed the phone before you had made any checks? 15 A. Yes. The only check was literally coming close to the 16 body, when I heard the sound of like the gargle, other 17 than that, there was no check. 18 Q. Just before we move to the detail of the call, had you 19 seen any movements at that stage from him? 20 A. No. 21 Q. Had you formed a view as to whether he was alive? 22 A. Again it was coming from assumptions that someone else 23 had already done first aid checks on him. I assumed 24 that he was alive at the time, plus hearing the gargle 25 which sounded like faint breathing.</p> <p style="text-align: center;">Page 41</p>	<p>1 is here." 2 A. Yes. 3 Q. Can you recall that? 4 A. Yes. 5 Q. Can you describe to the coroner in your own words the 6 colour of his face as you recall it? 7 A. I mean it wasn't natural. It wasn't red, like it would 8 be running up the hill. It was like more when you are 9 cold and go blue than anything else. 10 Q. Yes. 11 Then you say: 12 "Hello mate, are you responsive, can you hear me?" 13 Over the page, page 7, internal page 7: 14 "Right, can you let them know that he has hit his 15 head on the way down. I am just checking your airways 16 mate. Right, I can't see breathing." 17 A. Yes. 18 Q. This is the point at which you are checking him for the 19 first time, presumably. Is that right? 20 A. Yes. 21 Q. Why did you think he had hit his head on the way down? 22 A. Because there was a graze type mark on his head, just on 23 his forehead, up here. 24 Q. Again, what size? 25 A. Slightly bigger than a 50p piece.</p> <p style="text-align: center;">Page 43</p>
<p>1 Q. Okay. 2 Let's carry on with the transcript, "I have only 3 just come to the scene" you say. 4 Ambulance, "Yeah". 5 Over the page: 6 "The guy has been running, he is on the floor, he is 7 not responsive at the moment." 8 Ambulance service: 9 "Is he breathing?" 10 "He is but it is very faint." 11 That is as you recall it? 12 A. Yes, that is that gargle sound. So it wasn't getting 13 down and properly checking that he was breathing. 14 Q. No. So the evidence, if I can put it this way to you, 15 that he was breathing, was the sound? 16 A. Well, yes, it was the sound, yes. 17 Q. They asked you how old he is roughly: 18 "Between 40 and 50." 19 They ask you again: 20 "Okay, is he breathing regularly?" 21 "It is very slow, I can't really tell because of the 22 light because his face looks very dark." 23 Asked: 24 "What blue. 25 "Yeah, but then I can't tell because of how dark it</p> <p style="text-align: center;">Page 42</p>	<p>1 Q. Was it bleeding? 2 A. No. 3 Q. "I'm just checking your airways, mate." 4 Did you look in his mouth? 5 A. Yes. 6 Q. Did you see anything in his mouth, any substances in his 7 mouth, sorry? 8 A. No. 9 Q. Mr St Clair-Ford described drool a bit thicker than 10 saliva, did you see that? 11 A. No, because his whole body was wet anyway, so there 12 wasn't anything that stood out, and obviously I did 13 check his airways, checked in his mouth before giving 14 him CPR and there wasn't anything as such to put me off. 15 Q. Just two points, and we will come to the CPR. 16 A. Yes. 17 Q. Did you see any other substances at that stage? 18 A. No. 19 Q. You said that he was wet, why would he be wet? 20 A. It was -- it seemed like a cold sweat, basically. 21 Q. Was it raining at the time? 22 A. I wouldn't be able to recall. 23 Q. Did it strike you as unusual that he was wet? 24 A. It struck as though if he had been going out for a run 25 it was sweat that was now cold.</p> <p style="text-align: center;">Page 44</p>

<p>1 Q. Consistent with sweating, would you agree?</p> <p>2 A. Yes. I mean his top was wet, rather than -- it wasn't</p> <p>3 a little sweat but then it is a big hill and if he has</p> <p>4 been running ...</p> <p>5 Q. Yes, going back to the transcript, the ambulance</p> <p>6 service, top of page 7, asks:</p> <p>7 "Is he breathing?"</p> <p>8 We have heard this, the female says:</p> <p>9 "No he is not breathing.</p> <p>10 "He is not breathing."</p> <p>11 Male 1:</p> <p>12 "He is not breathing.</p> <p>13 "Okay, all right, does he know how to give CPR or</p> <p>14 does he need some instructions?"</p> <p>15 Male 1, Mr St Clair-Ford asks:</p> <p>16 "Do you know how to do CPR?"</p> <p>17 You say.</p> <p>18 "Right I can't see any blockages but he is not</p> <p>19 breathing.</p> <p>20 "Okay, does he need instructions on how to give</p> <p>21 CPR?"</p> <p>22 Then over the page, it is mainly male 1 talking to</p> <p>23 the paramedics, he was relaying instructions to you,</p> <p>24 wasn't he?</p> <p>25 A. Yes.</p> <p style="text-align: center;">Page 45</p>	<p>1 A. Yes.</p> <p>2 Q. Was it going into your mouth?</p> <p>3 A. It was going into my mouth, yeah.</p> <p>4 Q. I'm sorry to have to ask you this, but was there any</p> <p>5 distinctive taste or odour to it?</p> <p>6 A. It was the similar sort of taste as like licking</p> <p>7 a battery.</p> <p>8 Q. A sort of metallic.</p> <p>9 A. As you do as a kid, yeah.</p> <p>10 Q. You have licked batteries before, have you?</p> <p>11 A. About 20 years ago maybe.</p> <p>12 No, it was a strange taste, it was, there was no</p> <p>13 solid in it at all, it was just liquid, similar to the</p> <p>14 gold colour in the chairs but not quite gold.</p> <p>15 Q. Similar to a gold colour, not quite gold?</p> <p>16 A. It was like a greeny yellow.</p> <p>17 Q. Would you describe it as vomit at all?</p> <p>18 A. Not as like -- if someone is being sick --</p> <p>19 Q. There was no solid in it I think you describe --</p> <p>20 A. There was no solid.</p> <p>21 Q. -- it was a liquid?</p> <p>22 A. It was a liquid, yes.</p> <p>23 Q. How much bile was there, you may not be able to tell me</p> <p>24 but, if you can recall?</p> <p>25 A. Well, every time I gave him a breath, I would -- I could</p> <p style="text-align: center;">Page 47</p>
<p>1 Q. One of them was to roll the man on to his back?</p> <p>2 A. Yes.</p> <p>3 Q. You described in the call there you couldn't see him</p> <p>4 breathing?</p> <p>5 A. Yes.</p> <p>6 Q. Was there ever a point after you started to give CPR</p> <p>7 that he appeared to be breathing to you?</p> <p>8 A. No.</p> <p>9 Q. Was there ever a point where he appeared to show any</p> <p>10 signs of life?</p> <p>11 A. No. I mean the face colour changed slightly but not --</p> <p>12 there was no signs of him being responsive or breathing.</p> <p>13 Q. Had you checked his pulse?</p> <p>14 A. Yes.</p> <p>15 Q. Any pulse?</p> <p>16 A. No.</p> <p>17 Q. Any movements?</p> <p>18 A. No.</p> <p>19 Q. You were giving him mouth to mouth as well as chest</p> <p>20 compressions I think?</p> <p>21 A. Yes.</p> <p>22 Q. At that stage you described some vomit?</p> <p>23 A. It was like a bile and it was as I was blowing down it</p> <p>24 was coming up.</p> <p>25 Q. Yes.</p> <p style="text-align: center;">Page 46</p>	<p>1 like, it came up out of his chest, out of his throat and</p> <p>2 I got a small mouthful each time, I guess.</p> <p>3 Q. Was there ever a time when he seemed to be doing it</p> <p>4 aside from in response to your breaths?</p> <p>5 A. No.</p> <p>6 Q. Were there any further noises?</p> <p>7 A. There wasn't noises but again, it was quite foamy and</p> <p>8 like bubbly.</p> <p>9 Q. Mr St Clair-Ford described the bubbly saliva-like</p> <p>10 substance --</p> <p>11 A. Yes.</p> <p>12 Q. -- a bit thicker. Is that how you recollect it?</p> <p>13 A. I mean it was thin --</p> <p>14 THE CORONER: Are you talking about, as it were, the greeny</p> <p>15 yellow substance?</p> <p>16 A. Yes.</p> <p>17 THE CORONER: Yes.</p> <p>18 A. So where I say it was bubbly, as I was blowing down, as</p> <p>19 I would come away, it would be like bubbly in his mouth</p> <p>20 a little bit.</p> <p>21 MR WASTELL: Yes.</p> <p>22 You were concerned about the fact that you had had</p> <p>23 it in your mouth, weren't you?</p> <p>24 A. I was a little bit, yes.</p> <p>25 Q. You spoke to some paramedics about it, did you?</p> <p style="text-align: center;">Page 48</p>

1 **A. They briefly spoke to me after -- they didn't seem to**
 2 **have any cause for concern though.**
 3 Q. No.
 4 Did you suffer any problems with your mouth after
 5 this, any blistering?
 6 **A. No.**
 7 Q. Skin coming off at all?
 8 **A. No.**
 9 Q. Any illness?
 10 **A. No.**
 11 Q. How long do you think you were giving him CPR for before
 12 the paramedics attended?
 13 **A. It did feel like a long time, probably about five**
 14 **minutes realistically.**
 15 Q. During that time, you described an injury to his head?
 16 **A. Yes.**
 17 Q. Did you see any other injuries?
 18 **A. So he had a graze on his head and his two knees, both of**
 19 **these grazes you could see, like, the red inside the**
 20 **graze but you couldn't see blood pouring or anything**
 21 **like that.**
 22 THE CORONER: You could see red but not blood flowing?
 23 **A. Yes.**
 24 **I mean a small amount but -- I mean they wasn't big**
 25 **grazes.**

Page 49

1 MR WASTELL: Did you form an impression at the time as to
 2 what was likely to have happened to him?
 3 **A. Initial like feelings was that it was just someone out**
 4 **having a run, there were a few things that were a bit**
 5 **strange but not that would cause me to believe that he**
 6 **was just out for a run to start with and --**
 7 Q. What sort of strange things?
 8 **A. Well just where he was on the road, the fact -- because**
 9 **I run this road or used to run the road quite regularly,**
 10 **with the lighting and stuff like that, listening to**
 11 **music, you would kind of be on the right-hand side**
 12 **because there is a blind spot on the road, so you would**
 13 **be to the side of the road rather than more central.**
 14 **That is kind of the thing.**
 15 **The other thing is, like, just the position he was**
 16 **and it seemed like he would have had to have just fallen**
 17 **dead straight and not moved. There wasn't any sort of**
 18 **more scuffs or -- if he had been running and then fell**
 19 **over, you probably would have stumbled or that is what**
 20 **my impression would have been, as it was very much like**
 21 **the body had just hit the ground.**
 22 Q. Right, so two things you identified as strange.
 23 First, where he was positioned on the road --
 24 **A. Yes.**
 25 Q. -- because it seemed to you that if he was keeping out

Page 50

1 of the way of traffic, he wouldn't have been where you
 2 found him, is that right? Do I have that right?
 3 **A. Yes, pretty much.**
 4 Q. The second feature was simply how he appeared to have
 5 collapsed in the road without staggering; is that right?
 6 **A. Yes.**
 7 THE CORONER: I suppose, I mean if he had staggered a pace
 8 or two, that might account for his position on the road,
 9 mightn't it?
 10 **A. It could well be.**
 11 THE CORONER: Without having seen actually what happened, it
 12 is quite difficult to say?
 13 **A. Yes.**
 14 MR WASTELL: Just finally, Mr Walsh, you found some property
 15 on him?
 16 **A. Yes.**
 17 Q. What did you find?
 18 **A. So there were two mobile phones. One he had connected**
 19 **to the headphones, which when I got there were like**
 20 **under the body and, yes, so there were just two phones**
 21 **there.**
 22 Q. Just to be clear, were the earphones in his ears when
 23 you got there?
 24 **A. I don't believe they were, but I can't recall.**
 25 Q. Can you recall hearing any music from them?

Page 51

1 **A. No.**
 2 Q. You looked at the phones or one of the phones, did you?
 3 **A. Yes.**
 4 Q. And you found a name?
 5 **A. Yes, so there was a lot of, obviously Russian but the**
 6 **odd few English messages on there that were calling him**
 7 **by his name.**
 8 Q. His full name?
 9 **A. I could only work out the first name, I believe.**
 10 Q. If I look at your statement, page 25, last paragraph,
 11 again the statement made on the day, 10 November, two
 12 mobile phones on him --
 13 **A. Sorry, what page is that?**
 14 THE CORONER: Do you have 25 in the top right.
 15 MR WASTELL: Top right, we have made it as confusing as
 16 possible.
 17 THE CORONER: If you are in divider 4 still?
 18 **A. Thank you.**
 19 THE CORONER: Do you have that?
 20 MR WASTELL: Top right, page 25, your statement, last
 21 paragraph:
 22 "He had two mobile phones on him ..."
 23 Do you see that, four lines from the bottom?
 24 **A. Yes.**
 25 Q. "... I looked into one of them. Found a name in his

Page 52

<p>1 email address, it was a Russian name Alexander and 2 a Russian surname I cannot recall." 3 A. Yes. 4 Q. You had both of his names at that stage? 5 A. Yes. 6 Q. You remained with the ambulance crew and police for 7 a while and then returned to your house. 8 Mr Walsh, just one final question. Do you recall 9 any strange odours or smells coming from him? 10 A. No. 11 MR WASTELL: I have no further questions. If you wait there 12 there may be some further questions. 13 Questions from MR FEAR-SEGAL 14 MR FEAR-SEGAL: Mr Walsh, you had custody of the two mobile 15 phones for a short period of time, you told us a moment 16 ago. Can you describe those phones to us? 17 A. To be honest it is a bit of a blur what they were. 18 Obviously one was there for his music -- 19 Q. Sorry? 20 A. One was there for use of his music. 21 Q. You say that -- 22 A. Well, that was connected to the headphones. 23 Q. Just pausing there, you say it was there for use of his 24 music. 25 A. Yes.</p> <p style="text-align: center;">Page 53</p>	<p>1 headphones? 2 A. No. 3 Q. Mr St Clair-Ford described the headphones as being 4 iPhone or iPod earphones with a microphone on one of the 5 earbuds, do you remember that? 6 A. I can recall that they were white and that is about it. 7 Q. Do you recall the colour of the phones? 8 A. No. 9 Q. Do you recall the brand or make of the phones? 10 A. I think they were iPhones, I am not 100 per cent sure 11 now though. 12 Q. Did you look at the phone which had the earphones 13 connected to it? 14 A. I can't remember, sorry. 15 MR FEAR-SEGAL: Thank you. 16 MS HILL: No questions, sir. 17 THE CORONER: Nothing, no? 18 MR WASTELL: Nothing further. 19 THE CORONER: Thank you very much indeed for coming, thank 20 you. 21 A. Okay. 22 MR WASTELL: Sir, the next piece of evidence is written 23 evidence from Philip Nash. 24 Sir, again there is no objections to you reading it 25 out. He is unable to attend, so therefore I ask that we</p> <p style="text-align: center;">Page 55</p>
<p>1 Q. I think you told Mr Wastell a moment ago you couldn't 2 hear any music coming from it? 3 A. Where -- because one was under his body, connected to 4 the cable of the ... for the headphones. 5 THE CORONER: Do you mean one phone was under his body? 6 A. Yes, and the other one was what we was going through to 7 try and find like some evidence of who he was. 8 THE CORONER: Can you remember where that came from? 9 There is one phone that is under his body -- 10 A. Yes. 11 THE CORONER: -- and that is the one that is connected to 12 the headphones. Did you say you couldn't remember if 13 those were in his ears? 14 A. I couldn't remember. I don't think they were when I got 15 there, they were just under the body. 16 THE CORONER: What, the headphones were too? 17 A. Yes, so the headphones were like trailed under his torso 18 and then the phone was down like his waist sort of side. 19 THE CORONER: Right. Where was the other phone? 20 A. When we found that, that was just like to the side of 21 him -- by this time -- 22 THE CORONER: They were both on the ground in one place or 23 another, the phones? 24 A. Yes. 25 MR FEAR-SEGAL: Could you hear any music coming from the</p> <p style="text-align: center;">Page 54</p>	<p>1 read it out under Rule 23. 2 THE CORONER: Which divider are we? 3 MR WASTELL: It is behind tab 6(a) and then questions and 4 answers behind (b) and (c). 5 THE CORONER: Yes. Just a moment. So that is 6 Mr Philip James Nash, working for the ambulance service 7 and, again, usual qualifications about everybody having 8 a copy and the opportunity to object? 9 MR WASTELL: Thank you, sir. 10 The statement of Mr Nash, he gives his occupation as 11 emergency care support worker, it is dated 12 December 12 of 2012 and he says this. 13 Evidence of MR PHILIP JAMES NASH (read) 14 MR WASTELL: "I am employed in the capacity of emergency 15 care support worker by South-east Coast Ambulance 16 Service foundation trust and I am based at Chertsey 17 ambulance station, Guildford Road, Ottershaw, Surrey. 18 I have been in my role for the past three years and 19 I act as back up for the qualified paramedics and as 20 first person on scene responder. I have foundation 21 trust qualifications and I am qualified to drive 22 ambulances on emergency calls. My role is a stepping 23 stone to becoming a paramedic. 24 "On Saturday, 10 November 2012 I was working 25 a 7.00 am until 7.00 pm shift from Chertsey ambulance</p> <p style="text-align: center;">Page 56</p>

<p>1 station. I was crewed together with Daniel Weller, 2 a qualified paramedic and we were operating from 3 ambulance callsign 164. I had used a printout of the 4 CAD system to refresh my memory of a call we attended on 5 that date. 6 "At 4.46 pm and 12 seconds we received an emergency 7 response call which was patched through to our MDT 8 computer display in our vehicle. The address of the 9 call and the time are displayed on the screen, and they 10 were Hillcrest Cottage Granville Road, Weybridge. 11 I didn't realise at the time that the address was part 12 of the St George's Hill private estate. I think that 13 the small amount of detail that we were passed was that 14 a male of approximate age was having difficulty 15 breathing. The category of call is then displayed. The 16 categories determine the time that the call must be 17 responded to. In the case of this particular call it 18 was graded initially as a category A Red Two, which 19 means that the patient's condition could result in 20 cardiac arrest. 21 "When we took the call, we were just leaving 22 St Peter's Hospital, Chertsey and I was driving the 23 vehicle. I followed the directions given by the 24 vehicle's satnav, but that directed us via a private 25 residence gate on to St George's Hill. We were told by</p> <p style="text-align: center;">Page 57</p>	<p>1 wearing a white chefs top, a white hat and black checked 2 trousers. 3 "There was a second man standing very close to the 4 patient. He was speaking to the chef at the time. 5 I would describe the man as being late 50s, he had 6 whitish grey hair ..." 7 THE CORONER: We know who he is, so we don't need the 8 description. 9 MR WASTELL: "I think this man was the driver of the vehicle 10 that was parked near to the patient, because later on he 11 got into the vehicle to move it. The vehicle was a dark 12 purple coloured pearlescent Mercedes and there was a 13 woman passenger standing outside the vehicle. She was 14 in her early fifties, about five feet three to five feet 15 four inches tall, she had straight blonde shoulder 16 length hair. She was wearing a golden coloured dress, 17 she didn't approach the patient or myself. She spoke to 18 the man I thought was the driver. 19 "On approaching the patient I found it was a white 20 male in his early 50s, he had grey cropped short hair 21 and his skin was olive coloured, I'd estimate he was 22 five foot ten inches tall of medium build but not 23 athletic physique. He was wearing a white running 24 t-shirt and a pair of black shorts, he also had black 25 training shoes and white socks.</p> <p style="text-align: center;">Page 59</p>
<p>1 some residents there that the gate was not in operation 2 so we diverted via the main entrance gate to the estate. 3 I would estimate this added 30 seconds to a minute on to 4 our journey time. At that time the MDT was updated to 5 show the patient was in cardiac arrest. From the CAD 6 printout I would say this update, 16.52.29 hours. 7 "Once we arrived at the main security gate we were 8 allowed through but security asked where the call was 9 too. We were travelling on blue lights on sirens and 10 once into the estate located the patient. I turned left 11 once in the estate and as we climbed a small hill and 12 went over the crest I could see a car parked on the 13 right side of the road facing towards us. Approximately 14 4 to 5 metres in front of the car I could see the 15 patient laying in the road. I drew the ambulance to 16 a stop a short distance from the patient and manoeuvred 17 it at an angle to protect the scene, blocking the road 18 to present [I think it should be 'prevent'] any other 19 vehicles from passing. 20 "Dan and I both alighted from the ambulance and 21 collected equipment as we did so. On approaching the 22 patient, I noticed there was a man in a chef's uniform 23 doing chest compressions. I would say he was in his 24 late 20s to early 30s, slim build. He was white and had 25 brown hair. He was approximately 6 feet tall and was</p> <p style="text-align: center;">Page 58</p>	<p>1 "As we approached the chef continued with chest 2 compressions. The patient was lying on his back with 3 his feet towards the edge of the road. I went to the 4 patient's head to check his airway to ensure that there 5 were no obstructions, there was a small amount of vomit 6 to the side of his mouth and a small amount of pleura 7 inside his mouth but nothing to obstruct the airway ..." 8 THE CORONER: We are going to see, aren't we later, that 9 although it says "pleura" there, he says later what he 10 meant was "phlegm". 11 MR WASTELL: He'll correct that to phlegm, we will come to 12 that, sir, yes: 13 "Prior to checking the airway Dan and I also checked 14 for critical haemorrhage signs and response level. We 15 found the patient had a Glasgow Coma Scale of 3 out of 16 15, which means that he was completely non-responsive. 17 To check the Glasgow Coma Scale we checked the patient's 18 eyes for response. There was no response to speech or 19 pain. We also checked his motor response which was 20 negative and his speech. There was no verbal response. 21 "Dan took over the cardiopulmonary resuscitation 22 (CPR) whilst I checked the patient's airway. I applied 23 an OP or Guedel airway to protect the patient's airways 24 from blockages and to assist the flow of oxygen. I then 25 applied a bag valve mask to assist ventilation which was</p> <p style="text-align: center;">Page 60</p>

<p>1 connected to an oxygen cylinder, providing 15 litres of 2 oxygen per minute. 3 "Dan is qualified to apply a cannula to the patient 4 thus speeding the supply of fluids and/or drugs into the 5 system, so I took over CPR whilst he cannulated the 6 patient. I took control of CPR and ventilation at 7 a rate of 30 chest compressions to two ventilations, 8 this was in time to a metronome set at 100 beats per 9 minute. 10 "When we checked the patient's initial response 11 levels I cut the patient's shirt open down the middle 12 front to allow me to apply defibrillator pads. The 13 initial rhythm presented with asystole, which is 14 a non-shockable cardiac rhythm. 15 "As the patient was cannulated the second ambulance 16 containing Adam Heywood and Craig Mintram arrived on the 17 scene. They brought with them a lifepac 15. It's 18 a multifunctional monitor that is carried by critical 19 care paramedics. The lifepac 15 was connected to the 20 existing defibrillator pads by Craig. Adam asked if the 21 airway patent and I said it was clear and usable. 22 I said that there was a good chest rise and fall. Adam 23 then intubated the patient and aspirated to ensure the 24 airway was clear and secure. 25 "Dan hooked up sodium chloride 0.9 per cent fluid to</p> <p style="text-align: center;">Page 61</p>	<p>1 and blood sugar. 2 "30 to 35 minutes into the resuscitation attempt 3 Adam said to cease the resuscitation, once we had all 4 discussed the fact that the patient was not responding 5 to treatment. Craig contacted control to advise that 6 the patient was deceased and police were already on 7 scene. I then assisted to move our equipment that was 8 not attached to the patient, fluids were removed, but 9 the endotracheal tube, cannulas and defibrillator pads 10 remained in place. 11 "We then spoke to the officers who were on scene and 12 they took details. Craig Mintram completed a patient 13 record form and Adam would have countersigned that form 14 as lead clinician. We remained on scene until about 15 7.45 pm when the police advised that we were no longer 16 required. 17 "I never discovered the identity of the patient. We 18 did try to find a wallet or some form of ID but all he 19 had on him was two iPhones. One of which had headphones 20 plugged into it." 21 Then over the page, we have some questions and 22 answers. Question 1: 23 You say in your statement that you noticed a small 24 amount of vomit to the side of Mr Perepilichny's mouth. 25 Please can you answer the following questions: 1, can</p> <p style="text-align: center;">Page 63</p>
<p>1 the cannula in the patient's left arm, whilst Craig 2 cannulated the patient's right arm. Sodium chloride is 3 administered to provide more volume to the patient's 4 cardiovascular system. The patient was then 5 administered the first round of adrenaline, which is 6 1 milligram of adrenaline in 10 millilitres of fluid. 7 "I then swapped with Dan and he took over the chest 8 compressions. We rotate the CPR because it is 9 physically tiring. 10 "I went to the rear of our vehicle and removed the 11 trolley bed and a scoop, ready to move the patient if he 12 stabilised or attains return of spontaneous circulation. 13 By the time I returned to the patient Adam informed me 14 that the patient had gone into a state of PEA, pulseless 15 electronic activity. I set the trolley so that I could 16 raise the patient's legs up on to it to encourage the 17 flow of fluids back towards the core. There is also 18 a fluid stand on the trolley which hooked the fluids on 19 to. I then took over CPR once more. We rotated CPR 20 about two more times when Adam said to use the Lucas 21 chest compressor. This is a mechanical chest compressor 22 to deliver 100 per cent effective compressions to the 23 patient. We also cycled adrenaline every few minutes, 24 and had given the patient at least 1.5 litres of fluids. 25 Either myself or Dan checked the patient's temperature</p> <p style="text-align: center;">Page 62</p>	<p>1 you recall what colour it was? 2 Answer: colour of vomit -- unable to remember. 3 What odour it had if any? 4 Answer: unable to remember odour. 5 Question: how did you clear the vomit from 6 Mr Perepilichny's mouth area? 7 Answer: the critical care paramedic used a Laerdal 8 aspirator unit with a Yankauer sucker to clear the 9 patient's airway. 10 Question 2 is the reference to you say in your 11 statement you noticed a small amount of pleura inside 12 Mr Perepilichny's mouth. We understand that the pleura 13 are the two membranes that cover the lungs and line the 14 chest cavity, please answer the following questions. 1, 15 is it definitely what you saw in Mr Perepilichny's 16 mouth? 17 Answer: I have previously discussed with 18 an investigating officer that there was a spelling 19 mistake when my initial statement was taken, which was a 20 follows. The officer wrote "pleura" instead of 21 "phlegm", the statement was supposed to have the word 22 "phlegm" not "pleura", I saw phlegm in 23 Mr Perepilichny's mouth. 24 Question 2: what did the material you referred to as 25 pleura look like?</p> <p style="text-align: center;">Page 64</p>

<p>1 Answer: the material looked like a mixture of saliva 2 and wet nasal mucous. 3 Question 3: what did its presence in 4 Mr Perepilichny's mouth suggest to you? 5 Answer: I felt the presence of phlegm would be 6 normal due to the patient being in cardiac arrest and 7 not being able to control their oral and nasal 8 secretions. 9 Finally, sir, we have further questions and answers 10 dated 20 May 2017, so very recent. It is in the form of 11 a witness statement of Philip Nash with his signature 12 and date, but it is questions and answers: 13 These questions he says were sent by the solicitor 14 to the Inquest dated 9 May and he sets out the questions 15 and answers. 16 2. What equipment did you and Mr Weller take with 17 you from the ambulance to assist with the treatment of 18 Mr Perepilichny? 19 Answer: myself and Mr Weller took a primary bag 20 which contains a CD side oxygen cylinder, an Ambubag 21 (bag valve mask) basic airway adjuncts - oropharynx 22 airways and nasopharynx airways, oxygen masks and basic 23 observation equipment - sats probe, blood pressure cuff, 24 blood sugar machine and thermometer. We also took a 25 lifepac 12 - a monitor to enable us to defibrillate</p> <p style="text-align: center;">Page 65</p>	<p>1 Answer: I only witnessed the chef performing chest 2 compressions for approximately 30 seconds. The chest 3 compressions provided by the chef were of good quality, 4 they were at a depth of a third of chest and at a speed 5 of approximately 100 chest compressions a minute. I did 6 not see the chef give rescue breaths but I am aware that 7 he had prior to our arrival which caused him to approach 8 us after the resuscitation attempt concerned about vomit 9 from the patient being in his mouth. 10 Question: when you arrived was anyone else other 11 than the chef assisting Mr Perepilichny? If so, what 12 were they doing? 13 Answer: I can only remember the chef assisting the 14 patient, there was another man standing next to the 15 patient but he did not perform chest compressions or 16 assist the patient. 17 Question: if possible please describe (a) the 18 position Mr Perepilichny was in when you arrived at the 19 scene? 20 Answer: the patient was lying supine flat on his 21 back. 22 (b) whether you can recall if Mr Perepilichny had 23 any visible injuries or marks on him? 24 Answer: there were no visible injuries or marks 25 suggestive of trauma.</p> <p style="text-align: center;">Page 67</p>
<p>1 patients, an advanced life support bag which holds 2 intubation equipment, supraglottic devices and 3 cannulation equipment and the drugs bag which contains 4 all the paramedic drugs including adrenaline and saline 5 fluids. 6 Question: can you describe who else was present at 7 the scene when you arrived? Insofar as you are able, 8 please describe any people present and any vehicles? 9 Answer: I am unable remember, refer to my original 10 statement. 11 Question: please set out any description of 12 Mr Perepilichny's condition and circumstances of his 13 collapse that any of those present gave to you when you 14 arrived? In particular, did anyone describe if 15 Mr Perepilichny was breathing when he was found or his 16 behaviour before he collapsed? 17 Answer: all that I can remember is that the patient 18 was supposedly running, became short of breath and 19 collapsed prior to our arrival. I can't remember who 20 gave the information to us, possibly the "chef", but 21 I cannot remember clearly. 22 Question: please describe the chest compressions 23 that the person you have described as the chef was 24 giving to Mr Perepilichny, for example please describe 25 the ratio of chest compressions to rescue breaths?</p> <p style="text-align: center;">Page 66</p>	<p>1 (c) Mr Perepilichny's complexion and the colour of 2 his skin. 3 Answer: the patient was pale. 4 (d) whether Mr Perepilichny was breathing, if so 5 please describe that breathing, for example was it fast, 6 shallow, agonal cetera. 7 Answer: the patient was apnoeic on our arrival and 8 did not show any signs of life. 9 (e) the vomit which you described to the side of 10 Mr Perepilichny's mouth, for example please describe 11 the volume of vomit, its colour, its complexion and 12 smell and whether there was any on Mr Perepilichny's 13 clothes or inside his mouth? 14 Answer: in the statement taken by police it says 15 there was a small amount of pleura inside his mouth. 16 This was supposed to say phlegm not pleura and it looked 17 like a mixture of saliva and wet nasal mucous. 18 I considered that the presence of phlegm would be normal 19 due to the patient being in cardiac arrest and not being 20 able to control his oral and nasal secretions. 21 Question: please describe as far as you are able the 22 actions you took to treat Mr Perepilichny and the order 23 in which you did them, in particular please describe: 24 (a) how you checked Mr Perepilichny's airway? 25 Answer: I visually checked the patient's mouth by</p> <p style="text-align: center;">Page 68</p>

<p>1 opening his mouth and looking into his oropharynx. 2 (b) how you removed, if you did, any obstructions to 3 the airway? 4 Answer: I do not remember seeing any obstructions or 5 foreign body airway obstructions in the patient's 6 airway. The critical care paramedic used a Laerdal 7 aspirator unit with a Yankauer sucker to clear the 8 patient's airway. I believe Adam Heywood (CCP) used 9 a Laerdal suction unit to clear secretions from the 10 airway whilst intubating the patient. I cannot remember 11 if he said that there was vomit in the airway. 12 (c) your insertion of the OP/Guedel airway? 13 Answer: I inserted a size 3 (orange) O/P airway, by 14 inverting the airway, by pointing the bevel towards the 15 patient's nose, then inserting the smaller end of the 16 airway into the patient's mouth. Then I rotated the OP 17 airway to manoeuvre the tongue forwards. Then pushed 18 the OP airway further into the oropharynx so that the 19 bevel is in line with the lips. 20 (d) how you checked for any signs of haemorrhage? 21 Answer: we checked for signs of external 22 haemorrhaging, there was no blood on or around the 23 patient and no obvious signs of fractures or deformity 24 to the patient's body. 25 (e) how you checked Mr Perepilichny's</p> <p style="text-align: center;">Page 69</p>	<p>1 (a) Mr Perepilichny's carbon dioxide levels? 2 Answer: yes, once Adam Heywood had intubated the 3 patient to confirm that the endotracheal tube was in 4 place we used End tidal wave form capnography. 5 (b) whether he had suffered a pulmonary embolism? 6 Answer: it was considered when thinking about 7 reversible causes of cardiac arrest. 8 Question: to the extent you checked for carbon 9 dioxide or a pulmonary embolism please explain how you 10 performed these checks and whether you passed this 11 information on to anyone present at the scene? 12 Answer: I cannot remember the numbers that were 13 shown, but I believe they were in normal ranges. We 14 were unable to ascertain whether the patient was 15 suffering from a PE due to the lack of history that we 16 had leading up to the patient's collapse. I can't 17 remember whether it was part of our working diagnosis as 18 to why he had gone into cardiac arrest. 19 Question: as far as you are able, please describe 20 how long it took to insert the airway and bag and mask 21 after your arrival and whether you experienced any 22 difficulties in doing this procedure? 23 Answer: it took approximately 60 seconds after 24 arrival, assembling the equipment and approaching the 25 patient to insert the OP airway. It took another 30</p> <p style="text-align: center;">Page 71</p>
<p>1 responsiveness against the Glasgow Coma Scale? 2 Answer: the patient was deemed as unconscious, with 3 a Glasgow Coma Scale (GCS) of 3 out of 15. This was 4 determined by the patient not opening his eyes despite 5 verbal or painful stimulus, which gave a score of 1 out 6 of 4 for eyes. The patient gave no verbal response 7 despite being given verbal or painful stimulus, which 8 generated a verbal score of 1 out of 5. The patient's 9 body was completely flaccid with no reflexes present and 10 no motor tone to his muscles despite being given verbal 11 or painful stimulus, therefore generating a motor score 12 of 1 out of 6. Thus adding the eyes, verbal and motor 13 scores together creating a GCS of 3 out of 15. 14 Question: how you established that 15 Mr Perepilichny's heart rhythm was asystole? 16 Answer: we applied defibrillator pads to the 17 patient's chest. One to the right mid-clavicular area 18 of his chest and the other to his left mid-axilla area 19 of his chest. The defibrillator pads were attached to 20 the monitor (lifepac 12) which was turned and had been 21 user tested. The monitor showed a "flat line" where 22 there was no electrical activity from the heart, which 23 led us to believe that the patient's heart rhythm was 24 asystole. 25 Question: at any stage did you check the following:</p> <p style="text-align: center;">Page 70</p>	<p>1 seconds to prepare the bag valve mask and attach it to 2 oxygen to give the ventilation to the patient. The bag 3 valve mask comes in a bag in separated pieces which are 4 all wrapped in plastic for infection control purposes. 5 Question: how long did you administer CPR and 6 ventilation before the arrival of the second ambulance? 7 Answer: I cannot remember the amount of time it took 8 for the second ambulance to arrive on scene, so I cannot 9 remember how many cycles of chest compressions and 10 ventilations that were provided in that time. 11 Question: please describe what you did after you 12 finished the first round of CPR? 13 Answer: after Dan Weller finished the first round of 14 CPR after 2 minutes of a ratio of 30 chest compressions 15 to two ventilation breaths, we checked the rhythm on the 16 screen to see if there had been any changes after first 17 establishing asystole. The patient was still in 18 asystole at this point. Myself and Dan swapped doing 19 CPR and Dan applied a cannula into the patient's arm 20 whilst I was performing the CPR and ventilation. 21 Question: please indicate when you took over the CPR 22 for a second time? How many times did you do manual CPR 23 in total? 24 Answer: I cannot remember how many times I took over 25 CPR in total.</p> <p style="text-align: center;">Page 72</p>

<p>1 Question: who administered the Lucas chest 2 compression? Was there any response to this? 3 Answer: Adam Heywood applied the Lucas chest 4 compressor device, there was no response to this. 5 Question: as far as you can recall, what was 6 Mr Perepilichny's temperature and blood sugar level? 7 Answer: I have been provided with a copy of the 8 ambulance notes that were taken on 10 November 2012. 9 I exhibit a copy of these notes to this statement as 10 PN1. The patient had mild hypothermia at 35.6 degrees 11 centigrade, due to being in a cold environment. The 12 patient's blood sugar was 5.5 mmols which is within 13 a normal range. 14 Question: during the time that you assisted with 15 treatment, did Mr Perepilichny show any response or 16 signs of life to any of the treatment he was given? 17 Answer: there was no response to treatment or signs 18 of life at any time. 19 Question: who made the decision to stop treatment 20 and after how long? 21 Answer: it was a team decision to stop CPR and 22 treatment but the final decision came down [I think that 23 should be 'to'] Adam Heywood, who was the highest 24 clinical grade on scene. 25 Question: did you speak to anyone at the scene until</p> <p style="text-align: center;">Page 73</p>	<p>1 Q. Just keep your voice up in the court, please, Mr Weller. 2 Also in the bundle in front of you, behind tab 9(b) 3 do you see a document there headed "South-east Coast 4 Ambulance Service"? 5 A. I do, yes. 6 Q. What is that document? 7 A. This is the patient report form, so this is a document 8 we complete with every patient we would go to. 9 Q. It goes over the page, does it? 10 A. It does, yes. 11 Q. Did you complete that form? 12 A. I did, yes. 13 Q. When would you have completed it? 14 A. This would have been done five/ten minutes after we had 15 finished with the cardiac arrest. 16 Q. In terms of observations recorded in it, which we will 17 come to in a moment, do you record those as you are 18 making the observations? 19 A. On a critical job like a cardiac arrest it would be very 20 much, you know, some of the observations would be done 21 at slightly different times but whereas if you were sat 22 with a patient in their own house, you know, you would 23 note the time and you would be noting the observations 24 at that precise time. 25 Q. Yes.</p> <p style="text-align: center;">Page 75</p>
<p>1 you left at 7.45 pm? If so, can you recall to whom you 2 spoke and what you told them? 3 Answer: I cannot remember if I talked to anyone, 4 I may have discussed the case with police officers on 5 scene but I cannot remember." 6 Sir, that is the written evidence of Philip Nash. 7 We now have a live witness, Mr Weller. 8 MR DANIEL WELLER (sworn) 9 Questions from MR WASTELL 10 MR WASTELL: Yes, can you state your name for the court, 11 please. 12 A. Daniel Joseph Weller. 13 Q. In front of you there is a bundle. If you could turn to 14 tab 7, you should see there a statement headed 15 "Daniel Weller", dated 18 August 2016. Do you see that? 16 A. I do, yes. 17 Q. That is your statement? 18 A. Yes. 19 Q. Is it true to the best of your knowledge and belief? 20 A. Yes, it is, yes. 21 Q. In November 2012, you say you were working full time as 22 a paramedic for SECAmb, correct? 23 A. Yes, that's correct. 24 Q. SECAmb, just explain to the coroner who that is? 25 A. That is South-east Coast Ambulance Service.</p> <p style="text-align: center;">Page 74</p>	<p>1 We have seen the first two pages, the third page, it 2 is headed at the top right, page 62, is that a separate 3 form or is that part of the patient report form? 4 A. No, this is a separate form. 5 Q. It is a recognition of life extinct form, or ROLE form, 6 is that right? 7 A. That's correct, yes. 8 Q. Did you complete that, it doesn't have your signature on 9 it, does it? 10 A. No this was not completed by me, no. 11 Q. Fine, I will take that up with others. 12 Going back to your recollection. On that date, you 13 were in a two-person crew with Mr Nash, who we have just 14 read out the lengthy statement of? 15 A. Yes, that's right, yes. 16 Q. You describe how on 10 November you received a report of 17 an incident in a large gated development, which you duly 18 attended at 16.53. I want you to look at the patient 19 report form, so it is page 60 on the top right. Do you 20 have that? 21 A. I do, yes. 22 Q. Down the left-hand side, we see "incident date: 23 10 November", and then below it a location of incident, 24 do you see that? 25 A. I do, yes.</p> <p style="text-align: center;">Page 76</p>

<p>1 Q. That is your writing, is it?</p> <p>2 A. This is my writing, yes.</p> <p>3 Q. Yes.</p> <p>4 Outside, is that O/S, Imbrey, Granville Road,</p> <p>5 Weybridge?</p> <p>6 A. Yes, that's right.</p> <p>7 Q. Just below that, call time, 1645?</p> <p>8 A. Yes.</p> <p>9 Q. That is the time you received the 999 call?</p> <p>10 A. Yes, that's right.</p> <p>11 Q. At scene, 16.53, and at patient 16.53?</p> <p>12 A. Yes, that's right.</p> <p>13 Q. When you got there, just turning over the page, in fact,</p> <p>14 you see the box of text, one is cardiac/respiratory</p> <p>15 arrest?</p> <p>16 A. Yes.</p> <p>17 Q. Is that the information given to you before you attend?</p> <p>18 A. It would be something very similar to that, yes.</p> <p>19 Q. Then below that, slightly cut off but is that</p> <p>20 "Presenting complaint (PC)"?</p> <p>21 A. Yes.</p> <p>22 Q. "Patient collapsed"?</p> <p>23 A. Yes.</p> <p>24 Q. "Query time", so you are saying unknown time of</p> <p>25 collapse, is that right?</p> <p style="text-align: center;">Page 77</p>	<p>1 doing mouth-to-mouth resuscitation as well, which I was</p> <p>2 keen to stop, really, in terms of the mouth-to-mouth</p> <p>3 part.</p> <p>4 Q. Is it right it is not part of the current CPR</p> <p>5 guidelines, is it to give mouth to mouth?</p> <p>6 A. No, no, it has been taken out now from the guidelines.</p> <p>7 Q. It is just chest compressions or cardiac massage, have</p> <p>8 I got that right?</p> <p>9 A. Yes the impetus now is very much on good chest</p> <p>10 compressions.</p> <p>11 Q. Yes. Again looking at the form, under "On examination"</p> <p>12 third line. The information given to you you have</p> <p>13 recorded there, "Approx ten minutes of CPR undertaken",</p> <p>14 so presumably you were told, "We have been doing this</p> <p>15 about 10 minutes".</p> <p>16 A. Yes, within the first minute of arriving we would have</p> <p>17 got, you know, very, very basic information from people.</p> <p>18 Q. The man was on the road, do you recollect the hill that</p> <p>19 has been described to us?</p> <p>20 A. No, I don't.</p> <p>21 Q. Okay. His clothing?</p> <p>22 A. He was in running clothing, but inasmuch as colours,</p> <p>23 I don't recall.</p> <p>24 Q. What was the lighting like at that stage?</p> <p>25 A. It was -- I remember it was winter, it was poor</p> <p style="text-align: center;">Page 79</p>
<p>1 A. That's right, yes.</p> <p>2 Q. "Found by bystander at time of call."</p> <p>3 A. Yes, that's correct.</p> <p>4 Q. That's presumably information given to you at the scene?</p> <p>5 A. Yes, this is just very basic information we would have</p> <p>6 gathered on scene.</p> <p>7 Q. Yes. And then below that, again it is cut off, but</p> <p>8 should that be "OE", on examination?</p> <p>9 A. On examination, yes.</p> <p>10 Q. Okay, and again this is your record of what you found</p> <p>11 attending him?</p> <p>12 A. This is, yes. This is the main record of what we did</p> <p>13 that day.</p> <p>14 Q. Where was the patient when you attended?</p> <p>15 A. To my memory, the patient was -- I think they were just</p> <p>16 on the side of the road.</p> <p>17 Q. We see from the text that bystander CPR and mouth to</p> <p>18 mouth being undertaken effectively, so when you got</p> <p>19 there, CPR was being given by a bystander and mouth to</p> <p>20 mouth?</p> <p>21 A. That's right, yes.</p> <p>22 Q. Your view was it seemed to be good quality CPR being</p> <p>23 given?</p> <p>24 A. It was, yes. I remember there was a chef. I remember</p> <p>25 was giving CPR. It was good CPR. I think he was also</p> <p style="text-align: center;">Page 78</p>	<p>1 lighting, and I remember we purposefully parked the</p> <p>2 ambulance so we could use the lighting from the</p> <p>3 ambulance to help us.</p> <p>4 Q. You describe your colleague starting cardiac massage but</p> <p>5 presumably first of all you assessed the patient?</p> <p>6 A. Yes. I mean it would have been a very brief assessment,</p> <p>7 just at that stage to recognise cardiac arrest.</p> <p>8 Q. Can I take you back to the patient report form, first</p> <p>9 page.</p> <p>10 A. Yes.</p> <p>11 Q. Page 60, top right, we see, as I say, attending at scene</p> <p>12 and at patient is 1653 and then about halfway down, in</p> <p>13 the middle of the page, do you see where it says "Serial</p> <p>14 obs 1"?</p> <p>15 A. Yes.</p> <p>16 Q. What time have you written there?</p> <p>17 A. This is 16.53.</p> <p>18 Q. These are your initial observations of the patient?</p> <p>19 A. Yes, the temperature and the blood glucose would have</p> <p>20 been done later, but where we record the form and the</p> <p>21 limited information we have got on recording those</p> <p>22 details, we would just put really if it is a cardiac</p> <p>23 arrest, and this one obviously was, we would record</p> <p>24 everything, generally speaking, unless there was</p> <p>25 anything significantly changed, we would record it in</p> <p style="text-align: center;">Page 80</p>

<p>1 the initial box.</p> <p>2 Q. Yes.</p> <p>3 If there were changes in the patient, you might</p> <p>4 complete "Serial observations 2", for example?</p> <p>5 A. Potentially, yes. If the patient was to, you know, if</p> <p>6 we were to get a pulse rate back and a respiratory rate</p> <p>7 back, then we would potentially complete a second</p> <p>8 observations box.</p> <p>9 Q. We see from this observation, "resps: no", so no</p> <p>10 respiration, is that right?</p> <p>11 A. Yes, no respiratory rate.</p> <p>12 Q. SP O2, percentage zero. What does that mean?</p> <p>13 A. This is an oxygen level, this probably would have been</p> <p>14 recorded closer in time with the temperature and the</p> <p>15 blood glucose.</p> <p>16 Q. Heart rate zero, so no pulse?</p> <p>17 A. Yes, no pulse, no respiratory effort.</p> <p>18 Q. No blood pressure, you have written BP systolic zero, BP</p> <p>19 diastolic zero?</p> <p>20 A. Yes, again, this would have been a few minutes into the</p> <p>21 cardiac arrest.</p> <p>22 Q. Okay, was there ever a stage where he showed signs of</p> <p>23 breathing?</p> <p>24 A. No.</p> <p>25 Q. Pulse?</p> <p style="text-align: center;">Page 81</p>	<p>1 A. This is the airway and the breathing section, so absent</p> <p>2 breathing.</p> <p>3 Q. Right, no breathing.</p> <p>4 Colour: pale?</p> <p>5 A. Pale, yes.</p> <p>6 Q. Then patient alertness, you presumably: unresponsive?</p> <p>7 A. That's right.</p> <p>8 Q. The other matter I just want to take up on that page is</p> <p>9 next to pupil reaction, FF, is that fixed forward?</p> <p>10 A. This is just fixed.</p> <p>11 Does it say "FF" sorry?</p> <p>12 Q. Sorry, so middle of the page, about two inches up, under</p> <p>13 "blood glucose", "pupil reaction: FF"?</p> <p>14 THE CORONER: Is that in each eye?</p> <p>15 A. Yes, both eyes fixed.</p> <p>16 MR WASTELL: And pupil size below that, 6.</p> <p>17 A. Is 6, which would indication dilation.</p> <p>18 Q. Is that the maximum, 6?</p> <p>19 A. I believe it is, yes.</p> <p>20 Q. When you attend the pupils are maximally dilated and</p> <p>21 fixed?</p> <p>22 A. Yes, I mean it is not an initial check to see if</p> <p>23 somebody is in cardiac arrest, because obviously our</p> <p>24 initial check will be 10, 20, 30 seconds maximum.</p> <p>25 Q. Now, your colleague starts cardiac massage and you</p> <p style="text-align: center;">Page 83</p>
<p>1 A. No.</p> <p>2 Q. Blood pressure?</p> <p>3 A. No.</p> <p>4 Q. On the left-hand side, we see severity of patient</p> <p>5 presentation, zero is DOA - no action, I presume that is</p> <p>6 dead on arrival. 1 is critical or resuscitation, and</p> <p>7 you have crossed that one?</p> <p>8 A. Yes.</p> <p>9 Q. If there are no signs of life, why is it you don't put</p> <p>10 dead on arrival, just explain that?</p> <p>11 A. The whole purpose really is to work out if it is</p> <p>12 a viable cardiac arrest or non-viable, so we have</p> <p>13 a protocol that we would follow in order to work out if</p> <p>14 we were going to carry out a resuscitation or if we</p> <p>15 wouldn't carry one out.</p> <p>16 Q. Is it right that if CPR is underway you take over,</p> <p>17 regardless of the state of patient?</p> <p>18 A. Potentially, I mean if it's -- obviously we would have</p> <p>19 got a brief history off the people at the scene. If</p> <p>20 they had done good bystander CPR, then we would more</p> <p>21 than likely we would continue with that.</p> <p>22 Q. On the left-hand side, just below, you have put a cross</p> <p>23 in "absent", is that airway or breathing?</p> <p>24 A. This is airway.</p> <p>25 Q. What does "airway absent" mean?</p> <p style="text-align: center;">Page 82</p>	<p>1 I think were, you inserted a cannula, right?</p> <p>2 A. Yes.</p> <p>3 Q. Was that for sodium chloride?</p> <p>4 A. No, the cannula would have been a couple of minutes in,</p> <p>5 it is not necessarily a primary objective, you know, to</p> <p>6 start a cardiac arrest. And that would have been for,</p> <p>7 you know, you always need an IV access, so an</p> <p>8 intravenous access, that is for the drug administration</p> <p>9 and a bonus of fluids, which we did give.</p> <p>10 Q. You describe the patient initially as asystole, how do</p> <p>11 you monitor that, using the ECG we have heard about?</p> <p>12 A. Yes, referring back to Phil's statement, this is the</p> <p>13 lifepac 12, so this is to monitor -- at the time there</p> <p>14 were two main protocols of resuscitation within</p> <p>15 South-east Coast Ambulance Service and the first rhythm</p> <p>16 check will determine what protocol you follow.</p> <p>17 Q. If it is "asystole", what does that mean?</p> <p>18 A. If it is asystole, we would do 30 to 2, a protocol of 30</p> <p>19 compressions to two breaths -- not breaths as such, 30</p> <p>20 compressions to two squeezes of the bag valve mask.</p> <p>21 Q. It means it is not a shockable rhythm?</p> <p>22 A. Asystole is a non-shockable rhythm.</p> <p>23 Q. You were rotating giving chest compressions to</p> <p>24 Mr Perepilichnyy with Mr Nash, were you?</p> <p>25 A. Yes, I believe we will have done, yes.</p> <p style="text-align: center;">Page 84</p>

1 Q. Then a second crew arrives, we see that from your PRF
 2 (patient report form), the second page of it?
 3 **A. Yes, that's right.**
 4 Q. If I can just get the timings from you, page 61, five
 5 lines down, do you see CCP vehicle arrived?
 6 **A. I do, yes.**
 7 Q. Is that critical care paramedic --
 8 **A. That's right, yes.**
 9 Q. -- vehicle?
 10 **A. Yes, that's right.**
 11 Q. And inserted ET tube at 17.02 and then ALS started at
 12 17.03, that is advanced life support?
 13 **A. That's right, yes.**
 14 Q. Then we see another reference to asystole, ALS followed,
 15 including advanced airway and six times adrenaline 1 to
 16 10,000 IV, is that correct?
 17 **A. Yes, that's correct.**
 18 Q. You have put the adrenaline timings at the top?
 19 **A. Yes, the timings of all the drugs would be in the box**
 20 **just above the text.**
 21 Q. You describe there, as we will hear in a moment from the
 22 second crew, the stages they go through.
 23 Were you taking part in the CPR at that stage?
 24 **A. Yes. I mean my initial job would have been to, you**
 25 **know, Phil, he was the emergency care support worker at**

Page 85

1 **this point, would have been very much to assist with**
 2 **my -- with what I wanted to do effectively. So I would**
 3 **have confirmed that it was a patent airway, it was**
 4 **clear, we were getting good chest rise. I would confirm**
 5 **that the patient is in fact in cardiac arrest.**
 6 **Then I believe we stopped, at this point we thanked**
 7 **the chef, I do remember, I believe we did stop him and**
 8 **thanked him. And then Phil and myself would have**
 9 **swapped over when we were getting tired on chest**
 10 **compressions.**
 11 **The impetus doing a 30 to 2 protocol, the impetus is**
 12 **very much if you have got a good airway and you have got**
 13 **good chest rise and you have got good perfusion, the**
 14 **impetus would have been on getting a good cannula and**
 15 **starting the drug therapy. Then we would have moved on**
 16 **to the airway and at this point I believe this is when**
 17 **Adam and Craig arrived. So it was very much a case of,**
 18 **you know, Phil was doing chest compressions and doing**
 19 **some bag valve masking, which is the sort of temporary**
 20 **airway that goes in place before an advanced airway.**
 21 **I would have been starting the drug therapy and then**
 22 **Adam and Craig started the airway.**
 23 Q. We will hear from them in a moment but you describe in
 24 your patient report form there being a breath episode of
 25 PEA, what is PEA?

Page 86

1 **A. Yes, it is pulseless electrical activity.**
 2 Q. What does that mean?
 3 **A. Effectively not very much, it is just when the heart**
 4 **sort of goes into a temporary -- a very temporary**
 5 **rhythm, it is not asystole flatline, but it is still not**
 6 **one of the rhythms we would look for which would**
 7 **indicate we could shock someone with a defibrillator.**
 8 Q. It may be I should take this question up with
 9 Mr Heywood, but is it a sign of life?
 10 **A. Not really. It is more of a sign that the adrenaline is**
 11 **starting to work. One of the reasons we use adrenaline**
 12 **in a cardiac arrest is to try and stimulate activity in**
 13 **the heart.**
 14 **At this stage of a cardiac arrest, if you were to**
 15 **be -- my experience is if you were to be in flatline,**
 16 **flip into pulseless electrical activity, you have still**
 17 **got -- you know, there is not a very good prognosis on**
 18 **a successful cardiac arrest.**
 19 Q. Just before we come back to what you observed about the
 20 patient, just to complete the chronology from your
 21 report. We see Lucas cardiac massage applied at 17.27.
 22 That is the Lucas chest compressor we heard Mr Nash
 23 describe, correct?
 24 **A. That's right, yes.**
 25 Q. Further 10 minutes, ALS, advanced life support, asystole

Page 87

1 throughout. Is that no more rhythm changes?
 2 **A. Let me look ... yes, that is right.**
 3 Q. Yes:
 4 "No more rhythm changes present, 30 minutes carried
 5 out of ALS, 2.5 litres of sodium chloride administered
 6 to no effect as fluid challenge."
 7 Is that right?
 8 **A. That's correct, yes.**
 9 Q. "After consultation, CPR stopped at 17.37, police on
 10 scene ..."
 11 What does that say, are you able to help me?
 12 **A. "... police on scene to remove body.**
 13 Q. No patient details gathered as patient unknown and no ID
 14 on person. ROLE completed, yes?
 15 **A. Correct, that is right.**
 16 Q. Just at the top we see time CPR ceased, about the middle
 17 of the page, about three lines down, 17.37, time ROLE
 18 applied, 17.39, do you see that?
 19 **A. Yes, I do, yes.**
 20 Q. Okay.
 21 You have been on scene before the CPR is stopped for
 22 about 44 minutes, correct?
 23 **A. That's correct.**
 24 Q. Did you during that time notice any movements from the
 25 patient?

Page 88

1 **A. No, no movements at all.**
 2 Q. Any noises?
 3 **A. No. It sounds -- the statements that the two witnesses**
 4 **gave before myself, sounds very much like agonal**
 5 **breathing which is breathing you would expect somebody**
 6 **to go into just before cardiac arrest, but there was no**
 7 **signs of life from start to finish.**
 8 Q. Sorry, agonal breathing, just before you go into cardiac
 9 arrest?
 10 **A. Yes, it is effectively the body's last sort of efforts**
 11 **at breathing, so it can be noisy, it can sound gurgly,**
 12 **it is very irregular, you know, it is not as fast as a**
 13 **normal rhythm, it is not effective respiration.**
 14 Q. When you say before cardiac arrest --
 15 THE CORONER: Do you mean actually at the point of death?
 16 **A. Yes.**
 17 MR WASTELL: The terminal event I was going to put it.
 18 THE CORONER: Yes.
 19 **A. Yes.**
 20 MR WASTELL: Did you see any injuries on him?
 21 **A. Not that I can recall, no.**
 22 Q. Did you notice any unusual odours or smells?
 23 **A. No.**
 24 Q. Any incontinence?
 25 **A. It is not something I remember, no.**

Page 89

1 Q. Anything unusual about his stomach?
 2 **A. I remember he was a bigger gentleman but nothing**
 3 **abnormal about the stomach, no.**
 4 Q. One witness we will hear from mentions the stomach being
 5 significantly bloated. Do you remember that?
 6 **A. I remember he had a big stomach but not knowing the**
 7 **deceased before, it is very difficult to sort of**
 8 **question really if it was bloated or if he was obese, he**
 9 **didn't look physically fit at all.**
 10 Q. In terms of secretions, did you see vomit?
 11 **A. I do remember that when we stopped the chef doing mouth**
 12 **to mouth, I do remember there was some vomit. I don't**
 13 **remember it being significant. It wouldn't have been --**
 14 **if it had been significant, it would have affected my**
 15 **actions during the cardiac arrest. It would have been**
 16 **very much on the forefront to make sure we had a good**
 17 **airway.**
 18 Q. Yes.
 19 **A. There was no indication of a heavily soiled airway at**
 20 **the start.**
 21 Q. You can tell that, can you, from the contemporaneous
 22 PRF?
 23 **A. I can tell that from what, sorry?**
 24 Q. The contemporaneous record you have made?
 25 **A. Yes, I can tell in my actions that if he had had a very**

Page 90

1 **soiled airway, with lots of vomiting or any potential**
 2 **blockages, you know, we will keep it very basic in**
 3 **a cardiac arrest, it will be airway, breathing,**
 4 **circulation.**
 5 **Obviously airway is the first thing and we would**
 6 **want to ensure we have a good airway before we would**
 7 **continue with any of the other steps.**
 8 Q. The vomit you describe, do you remember colour?
 9 **A. Non-specific but I don't remember anything -- anything**
 10 **out of the ordinary with it whatsoever.**
 11 Q. Any other secretions aside from vomit, do you recall?
 12 **A. No.**
 13 Q. You describe in your statement working through all
 14 reversible causes. Did you reach a working diagnosis as
 15 to what had happened with him?
 16 **A. We try, sometimes when you turn up to a cardiac arrest,**
 17 **if it has been witnessed, if there is family there, if**
 18 **there is somebody that knows the person in cardiac**
 19 **arrest very well, if there is an obvious cause then it**
 20 **makes it a lot easier to work out what has happened.**
 21 **But it is not something that we would get heavily bogged**
 22 **down with if we are running on very limited information.**
 23 Q. Yes. You say in your statement that from a paramedic
 24 perspective there was no evidence on the scene and
 25 during resuscitation of any suspicious circumstances?

Page 91

1 **A. That's correct, yes.**
 2 Q. In particular did you see any signs of third-party
 3 involvement?
 4 **A. No. There was nothing to arouse suspicion whatsoever on**
 5 **this particular cardiac arrest.**
 6 Q. From the perspective of paramedics, did the
 7 resuscitation attempts run smoothly?
 8 **A. It did. It is a cardiac arrest I always remember**
 9 **because, you know, you will obviously train for a number**
 10 **of years in cardiac arrest and that is the bread and**
 11 **butter really of what we do. They don't always run like**
 12 **training scenarios but my one overriding memory of this**
 13 **cardiac arrest is it was a very smooth cardiac arrest,**
 14 **all the skills were performed without any errors, you**
 15 **know, we didn't have to try anything twice. We had good**
 16 **airway, it was a very -- almost sort of a textbook**
 17 **cardiac arrest, really.**
 18 Q. You mentioned police on the scene. Did they arrive
 19 before or after you had finished CPR?
 20 **A. I think they probably arrived maybe three-quarters to**
 21 **the latter stage; we were definitely there before the**
 22 **police.**
 23 Q. Just before we get to the final question, just a point
 24 I missed, back on the patient report form, page 61, at
 25 the top, I think it is about eight columns in from the

Page 92

<p>1 left, an EtCO2 reading with a cross and then underneath</p> <p>2 it a number, 1.6, can you just tell us what those are?</p> <p>3 A. This is when Adam would have brought the lifepac 15 in,</p> <p>4 once he has got an advanced airway in, a more accurate</p> <p>5 way of knowing if you are getting effective ventilation</p> <p>6 is to get an end tidal CO2 reading. This would have</p> <p>7 been the reading we picked up collectively, inasmuch as</p> <p>8 the normal wave ranges it is not widely used by -- that</p> <p>9 figure itself, I think we had effective end tidal CO2</p> <p>10 but it is probably better, it is probably more accurate</p> <p>11 really to get that information off Adam, because it is</p> <p>12 his equipment as such.</p> <p>13 Q. We see from the police log you remained on scene for</p> <p>14 about a couple of hours; do you recall that?</p> <p>15 A. I do, yes.</p> <p>16 Q. Did you have any further involvement with the body?</p> <p>17 A. Not after we had ceased the resuscitation, no.</p> <p>18 Q. Thank you?</p> <p>19 MR WASTELL: Thank you. If you wait there, there may be</p> <p>20 some further questions for you.</p> <p>21 Questions from MR MOXON BROWNE</p> <p>22 MR MOXON BROWNE: Just one question if I may. Is it any</p> <p>23 part of paramedics' training or practice to take</p> <p>24 photographs at the scene of your attendance?</p> <p>25 A. No, no.</p> <p style="text-align: center;">Page 93</p>	<p>1 have, you know, stayed around afterwards to complete the</p> <p>2 paperwork.</p> <p>3 Q. Yes, I had that impression.</p> <p>4 While you were there, did you see any police</p> <p>5 officers take any photographs?</p> <p>6 A. No. Not that I recall.</p> <p>7 MR MOXON BROWNE: Thank you.</p> <p>8 Questions from MR STRAW</p> <p>9 MR STRAW: Were you told anything by the other people at the</p> <p>10 scene about Mr Perepilichny's breathing?</p> <p>11 A. We would have found out -- very early on we would have</p> <p>12 asked very basic questions, you know: does anybody know</p> <p>13 him? Was he breathing? Was anyone with him when it</p> <p>14 happened? You know, very, very basic questions.</p> <p>15 Q. Do you remember what you were told?</p> <p>16 A. No. In the bundle in front of you, could you have</p> <p>17 a look, please, at page 318.</p> <p>18 THE CORONER: Is that in divider --</p> <p>19 MR STRAW: I am afraid the version I have doesn't have</p> <p>20 dividers.</p> <p>21 THE CORONER: Don't worry.</p> <p>22 MR STRAW: 26(c). 318, this should be a witness statement</p> <p>23 by a police officer, Lawrence John Burden, do you have</p> <p>24 that.</p> <p>25 A. I do, yes.</p> <p style="text-align: center;">Page 95</p>
<p>1 Q. I think that the police were there in numbers, while you</p> <p>2 were still there they were arriving in numbers, is that</p> <p>3 right?</p> <p>4 A. I do remember -- you know, you have to take into account</p> <p>5 really, when we are dealing with a cardiac arrest, we</p> <p>6 are extremely focused on the patient and the patient</p> <p>7 alone.</p> <p>8 Q. Yes.</p> <p>9 A. If there is no sort of risk to ourselves and risk to</p> <p>10 other people. I do remember a significant amount of</p> <p>11 police being there. I remember a few police there</p> <p>12 obviously after --</p> <p>13 Q. Can you say anything about the time overlap, that is to</p> <p>14 say how long you were there when there were also police?</p> <p>15 A. I would say I believe my colleagues arrived before the</p> <p>16 police and then, so if I was to make an educated guess,</p> <p>17 bearing in mind again the length of time this was,</p> <p>18 I would probably say halfway through the time we were</p> <p>19 there, the police maybe arrived.</p> <p>20 Q. In minutes, that is?</p> <p>21 A. What, so how many minutes into the actual cardiac</p> <p>22 arrest?</p> <p>23 Q. No, how many minutes were you on site at the same time</p> <p>24 as some policemen?</p> <p>25 A. Maybe an hour, maybe more because myself and Phil would</p> <p style="text-align: center;">Page 94</p>	<p>1 Q. Just halfway down the page, so between two hole-punches,</p> <p>2 do you see a sentence starting:</p> <p>3 "Whilst speaking with Mr Weller and Mr Nash ..."</p> <p>4 A. Where is this, halfway down?</p> <p>5 THE CORONER: The first word on the line I think is</p> <p>6 "Chertsey", if that helps? Do you see that, just</p> <p>7 between the two hole-punches?</p> <p>8 A. I do, yes.</p> <p>9 THE CORONER: Yes.</p> <p>10 MR STRAW: And it goes on:</p> <p>11 "... they also stated [on the line below] that when</p> <p>12 they started to treat the man at the location, there was</p> <p>13 low levels of carbon dioxide in his blood and the male</p> <p>14 was described as being short of breath by witnesses.</p> <p>15 I do not remember if it was Mr Weller or Mr Nash who</p> <p>16 gave me this information."</p> <p>17 Does that jog your memory? Do you remember whether</p> <p>18 you received that information or passed it on to the</p> <p>19 officers?</p> <p>20 A. I remember quite often after instances like this police</p> <p>21 will want an initial indication of what happened. I do</p> <p>22 remember speaking to a policeman. I honestly believe</p> <p>23 that was my colleague, who at the time was very new to</p> <p>24 the ambulance services and was an emergency care support</p> <p>25 worker. Unless I am very sure of the cause of death,</p> <p style="text-align: center;">Page 96</p>

<p>1 I wouldn't have commented on that, I wouldn't have given 2 a cause as a pulmonary embolism. 3 THE CORONER: Thank you very much. 4 Questions from MS BARTON 5 MS BARTON: May I ask you about two issues, if I may. 6 I think you were in court when the chef, Mr Walsh, gave 7 evidence, is that right? 8 A. I was, yes. 9 Q. I think you heard him say that the colour of the patient 10 when he saw Mr Perepilichny, he described him as blue. 11 When we look at your form on page 60, if we may, I think 12 under the observations, the primary assessment of airway 13 and breathing, you have crossed the box which relates to 14 "pale" rather than "cyanosed", is that right? 15 A. Yes, that's correct, yes. 16 Q. Can I just ask you this, that if someone performs 17 effective CPR for some time, is it right that you can 18 restore some colour to a person? 19 A. You can, yes. Effectively. 20 Q. And I think we heard Mr Walsh say that the colour 21 changed during the CPR? 22 A. I did hear that, yes. 23 Q. Thank you. That would be consistent, would it, with his 24 efforts at CPR? 25 A. Yes. It was good CPR. It was effective CPR. He was</p> <p style="text-align: center;">Page 97</p>	<p>1 THE CORONER: Let's keep going until 1.00, we might as well. 2 MR WASTELL: In which case, Mr Mintram, please. 3 MR CRAIG MINTRAM (affirmed) 4 Questions from MR WASTELL 5 MR WASTELL: Yes, can you state your name for the court, 6 please. 7 A. Yes, it is Craig Mintram. 8 Q. In front of you, there is a bundle. If you turn to 9 tab 8, you should see a witness statement there, your 10 name, Craig Mintram, dated 14 December 2012. That is 11 statement you made, correct? 12 A. Correct, yes. 13 Q. Is that statement true to the best of your knowledge and 14 belief? 15 A. To the best of my knowledge, yes. 16 Q. We also see, behind the statement, it is four pages. 17 There is page numbers at the top right. Page 55, Sussex 18 Police, identification CM01 and then turning to page 57 19 there is a diagram. That is a diagram you made, 20 Mr Mintram, is it? 21 A. Yes, it is. Yes. 22 Q. Thank you. 23 In November 2012 you were working as a clinical team 24 leader for SECAMB, correct? 25 A. That's correct, yes.</p> <p style="text-align: center;">Page 99</p>
<p>1 also performing mouth to mouth which, as I mentioned, 2 due to the risk of infection control and, you know 3 bodily fluids being passed from one person to another, 4 I do believe that has been taken out now but I do 5 remember it was good CPR and that was very effective. 6 Q. Thank you. 7 The second issue I want to deal with is your 8 experience of attending cardiac arrest events. I think 9 you described it in your evidence as the bread and 10 butter of what you do? 11 A. It is, yes. It is what we train for. 12 Q. Yes. Regrettably, I imagine you have attended hundreds 13 of cardiac arrests? 14 A. A large amount, maybe. 15 Q. There was nothing about the condition of the patient 16 that you were treating on this day that was in any way 17 out of the ordinary with regard to a cardiac arrest 18 event? 19 A. There was no suspicion. There was nothing for me that, 20 you know, arose any suspicion whatsoever. 21 MS BARTON: Thank you very much. 22 MR WASTELL: Thank you, sir, no further questions. 23 THE CORONER: Thank you very much indeed. 24 MR WASTELL: Sir, I know the time is 12.50. I am in your 25 hands as to whether we start the next witness.</p> <p style="text-align: center;">Page 98</p>	<p>1 Q. A clinical team leader is still a trained paramedic, 2 isn't it? 3 A. Yes. 4 Q. What additional roles do you have as the team leader? 5 A. In terms of clinical skill there is no additional 6 training, it is what you would have across the board as 7 a paramedic. 8 Q. Yes. 9 A. In addition to the role itself, it attracts some first 10 role managerial duties, appraisals, sickness absence, 11 sort of similar to a sergeant within the police force so 12 to speak. 13 THE CORONER: The emphasis is on the team leader bit rather 14 than the clinical element? 15 A. Yes. 16 MR WASTELL: You were part of the second ambulance crew that 17 arrived at the scene of the collapse on 18 10 November 2012? 19 A. Correct. 20 Q. You were with Adam Heywood; is that right? 21 A. Correct. 22 Q. The call I think you say was received at 16.51 in your 23 statement? 24 A. Yes, 16.51, sorry, 16.51.44 seconds. 25 Q. You were told that there was an emergency and you went</p> <p style="text-align: center;">Page 100</p>

<p>1 straight to your ambulance where you were given some 2 more information? 3 A. Correct, yes. 4 Q. On a computer system, is that it? 5 A. Yes. 6 Q. What information were you given at that point? 7 A. Again, referring to my statement at the time -- yes, so 8 we received details of -- yes, an emergency came through 9 as outside Hillcrest Cottage, Granville Road, Weybridge 10 and that there was a male in cardiac respiratory arrest 11 in a free text box, so sort of an area where someone 12 within our headquarters can type what they wish. Again 13 referring to that it says: 14 "40s [so obviously referring to the male's 15 approximate age], collapsed in road." 16 Then that would have been -- 17 Q. It was male cardiac respiratory arrest was the 18 information? 19 A. Yes, again I am sure that would have been referring to 20 the case notes that -- yes, that would have been what it 21 was. 22 Q. Yes. You are a backup to the first crew and the reason 23 you give in your statement is it is common with 24 a suspected cardiac arrest, is that right, to send two 25 crews?</p> <p style="text-align: center;">Page 101</p>	<p>1 Q. Yes, it was dark at the time and it was a help with the 2 lighting? 3 A. Yes and, again, as it has been drawn again, it is 4 clearly not to any sort of scale. 5 Q. No, we won't hold you to that. 6 A. But I think the reason I am where I am is purely because 7 there wasn't space to fit the vehicles side by side. 8 Q. We see there, just the two colleagues attending to the 9 male on the floor, you have drawn it in the middle of 10 the road, is it that deliberate or -- 11 A. That would have been to the best of my knowledge at the 12 time. 13 Q. We see it is "next to an entrance to Hillcrest?" 14 A. Again that is the address I was led to believe. 15 Q. In terms of other vehicles, is that another vehicle you 16 have drawn to the left, again with its headlights on? 17 A. To the left of the page, yes, that is another vehicle 18 with its light shining. 19 Q. That is the private car that had stopped? 20 A. Yes. 21 Q. Or the large executive car, I am sorry, possibly 22 a Mercedes that you describe in your statement. 23 Next to it you have written "Bystander, chauffeur", 24 is that right? 25 A. Yes, so it says "bystander" and then just in front of</p> <p style="text-align: center;">Page 103</p>
<p>1 A. Yes, absolutely. 2 So cardiac arrest itself is obviously -- the 3 scenario itself, there is lots of things to do. So 4 given initially you will only have two people from 5 an ambulance, generally, it could only be one person 6 from a response car, so yes, it is always -- it is 7 standard practice to send two ambulances for, just to 8 make lighter work of the situation. 9 Q. You arrive on scene at 5.01, and the other ambulance 10 obviously already present, Mr Nash and Mr Weller that we 11 have heard from. Now, it was dark, you say, when you 12 arrived. 13 Can we just turn to your diagram? 14 A. Yes. 15 Q. Just help us with what you came upon at the scene. 16 A. Yes, so again, referring to the notes, myself and Adam 17 were assigned vehicle 627. 18 Q. Yes. 19 A. So as you can see from the diagram, if you were facing 20 the scene, we were in the vehicle to the right of the 21 road. And, as you can see, there would be -- again it 22 was intentional not to park behind the other ambulance, 23 firstly in case we need to get things out of the back 24 and, secondly, to try and shed some more light on to the 25 scene itself.</p> <p style="text-align: center;">Page 102</p>	<p>1 the chauffeur it is a question mark, so sort of believe 2 it to be a chauffeur from the vehicle that is stopped. 3 Q. I see, yes. You have drawn other bystanders to the side 4 of ambulance 164; is that right? 5 A. That's correct. 6 Q. The four pluses, is that deliberate, is that four 7 bystanders? 8 A. Again from what I recall, there was definitely the chap 9 in the chef's uniform. 10 Q. Yes. 11 A. Again whether or not one of those marks then relates to 12 the chauffeur that may have then came over, I think it 13 was more to indicate the area that the bystanders were 14 standing, as opposed to necessarily the number of 15 persons. 16 Q. Okay. Going back to what you did, back into your 17 statement, page 2 of your statement, page 52 of the 18 bundle, you obviously came across Mr Nash and Mr Weller 19 performing chest compressions, Mr Weller had given IV 20 access, as we have heard. You took over CPR, last 21 paragraph? 22 A. Yes, I took over CPR from Phil, obviously to allow him 23 to rest. Again, as it has been mentioned before, the 24 whole scenario itself is a physically demanding event. 25 Sometimes, not necessarily in this case, you know,</p> <p style="text-align: center;">Page 104</p>

1 **having traipsed up a staircase, carrying all your bags**
 2 **et cetera, sort of throwing that into the mix but it is**
 3 **a physically demanding episode, no doubt about it.**
 4 Q. One of your roles, take over CPR?
 5 **A. Yes.**
 6 Q. Then we have heard about the additional airway that your
 7 colleague applied, over the page.
 8 **A. Yes, so, yes, it goes on to say Adam secured the**
 9 **patient's airway by intubating him, so that is the**
 10 **endotracheal tube that has been referred to, just a way**
 11 **of securing the airway against any movement, any**
 12 **displacement. It is sort of, you know, what you would**
 13 **aim to achieve in that scenario.**
 14 Q. Yes.
 15 MS BARTON: Sir, could I just ask that the witness speaks up
 16 a bit, it is difficult to hear.
 17 THE CORONER: It is a big room and you have to end up
 18 speaking more loudly than you usually would.
 19 MR WASTELL: Sorry, you may have to break this down for me,
 20 your colleague intubated him but you inserted an
 21 endotracheal tube.
 22 **A. No, no, no. Sorry, it is the same thing.**
 23 Q. Your colleague was doing that?
 24 **A. Yes, so, so Adam -- again, as the notes say, so Adam**
 25 **intubated the gentleman that was laying on the floor but**

Page 105

1 **the endotracheal tube is the intubation, that is the**
 2 **process that occurred.**
 3 Q. Again it assists the ventilation to get oxygen into the
 4 patient?
 5 **A. It secures -- so again, so the tube itself is passed**
 6 **through the vocal chords into the trachea. It is then**
 7 **secured in place with a clamp essentially, to which we**
 8 **can attach the bag that you would commonly see used to**
 9 **ventilate a patient.**
 10 Q. Did you have any dealings with the airway at all?
 11 **A. As far as I can see on the notes, no, it doesn't appear**
 12 **so.**
 13 Q. "Advanced life support techniques were carried out."
 14 That means what? Giving adrenaline?
 15 **A. So again the airway is secured.**
 16 Q. Yes.
 17 **A. And technically that shouldn't go on to cause you any**
 18 **bother, except if it was to become displaced with any**
 19 **sort of movement, or if there was foreign objects to**
 20 **occlude the tube or anything from the stomach contents**
 21 **or obviously a misplaced tube, but that wasn't the case.**
 22 **And then, yes, it is the intravenous access that was**
 23 **obtained with the cannula and then, yes, drug**
 24 **intervention.**
 25 Q. Then just before we break --

Page 106

1 THE CORONER: Can I just say, I don't know how much longer
 2 we are going to be, it is just if we went on for another
 3 ten minutes and we were going to finish you -- were you
 4 going to come back this afternoon anyway?
 5 **A. Yes.**
 6 THE CORONER: But if it is only ten minutes I am minded to
 7 think we will just carry on and then you have got quite
 8 an important job you do.
 9 **A. Yes, no, I am not against the clock.**
 10 THE CORONER: We will do that and then we will just have the
 11 hour and just start later. Yes.
 12 MR WASTELL: You have told us about the drugs that are used
 13 in advanced life support. You're continuing, you and
 14 your colleagues, chest compressions throughout this,
 15 correct?
 16 **A. Yes, there would have been brief pauses in order to**
 17 **maybe check if there was a rhythm.**
 18 Q. Yes.
 19 **A. But, yes, short of the patient themselves sort of telling**
 20 **you to get off, we would have carried on.**
 21 Q. Just in terms of the rhythm question, the same question
 22 I put to Mr Weller, he has described there being
 23 an episode of PEA, pulseless electric activity?
 24 **A. Yes, yes, that is something that again I am not so sure**
 25 **if I state that personally within my statement. I am**

Page 107

1 **not sure if it is something that took place whilst I was**
 2 **on the scene; I am not sure if it happened prior to my**
 3 **arrival or if it is something that I was unaware of**
 4 **because I was fetching something. Yes, otherwise**
 5 **engaged.**
 6 Q. Fine.
 7 There was a time when the Lucas chest compression
 8 was used. That is a mechanical form of providing the
 9 cardiac massage, correct?
 10 **A. Yes, absolutely, so, you know, by the time that was**
 11 **used, you know, the chest compressions that would have**
 12 **been manually undertaken would probably have been in**
 13 **their thousands, between, you know, the collective**
 14 **group.**
 15 Q. Yes.
 16 **A. So yes, it is not -- admittedly it is not a piece of kit**
 17 **that I personally would be very familiar with, it is**
 18 **something that would be carried by the critical care**
 19 **team.**
 20 Q. Mr Heywood in this case?
 21 **A. Adam on this occasion, it was Adam, yes.**
 22 Q. And he used it in this case?
 23 **A. Yes, so that was implemented and, yes, didn't seem to**
 24 **cause any issue.**
 25 Q. We have seen that that was used, put on, from the PRF at

Page 108

<p>1 17.27 and CPR was stopped at 17.37. If you would like 2 to see the page, it is page 61. 3 A. Yes, again, yes, as the PRF states, it was applied at 4 17.27, that's correct. 5 Q. CPR stopped ten minutes later? 6 A. 17.37. 7 Q. Unfortunately, resuscitative attempts were unsuccessful? 8 A. Correct. 9 Q. During the whole time that you were there with the 10 patient, did you see any signs of life? 11 A. None at all. 12 Q. Any movements? 13 A. None at all. 14 Q. Any particular noises, as we have heard? 15 A. Nothing that I recall as being significant. 16 Q. Do you recall there being vomit? 17 A. No. Not myself, no. 18 Q. Particular secretions? 19 A. No. Again in that scenario, as previously explained, 20 you know, it is not uncommon to have -- you know, to 21 have excrement or, you know, incontinence or vomit or, 22 yes, again, phlegm, but yes certainly nothing untoward 23 that, you know, I particularly remember well enough to 24 put into the statement. 25 Q. You had provided resuscitative care on a number of</p> <p style="text-align: center;">Page 109</p>	<p>1 A. -- but obviously as a result of that, it opened the 2 doors for obviously someone else to take over in 3 a different capacity. 4 Q. You had no further involvement with the body after the 5 police arrived and the CPR stopped? 6 A. Again, nothing -- no, so we would have quite possibly 7 just had a general tidy up sort of in the vicinity of, 8 just removing any litter, obviously making sure there is 9 no clinical waste kicking about that obviously shouldn't 10 be but no, nothing that I recall. 11 Q. Just finally, sorry, going back to your statement, the 12 page you should have open. 13 A. Yes. 14 Q. The penultimate paragraph, you describe he was dressed 15 in a pair of shorts, well above the knee but not long 16 ones, a white T-shirt, training shoes and also two 17 mobile phones, you recall that? 18 A. Yes. 19 Q. You think they were both apple devices, iPhones or MP3 20 players you think and at one point when someone took 21 over CPR you checked one of the phone screens, do you 22 remember that? 23 A. I don't physically remember, no, but obviously going by 24 the statement that was -- 25 Q. There was nothing to suggest who the person was or that</p> <p style="text-align: center;">Page 111</p>
<p>1 indications presumably, hundreds? 2 A. Again, I couldn't put a figure on it but probably close 3 to, yes. 4 Q. Was there anything unusual that stood out to you about 5 this one? 6 A. No. 7 Q. Any signs of injuries? 8 A. Again I think within my statement -- 9 Q. Page 3, if it helps, third paragraph down. 10 A. Yes. 11 Q. The last line of the third paragraph down. 12 A. Sorry, I have lost the page, was it on tab 8? 13 Q. It is tab 8, top of the page, page 53. 14 A. Yes, so, yes, within my statement it says that there 15 were no signs of major trauma, aside from a slight 16 abrasion to one of the patient's knees. 17 Q. You say also that you asked the police to attend before 18 ceasing CPR? 19 A. What was that, sorry. 20 Q. You asked the police to attend before stopping, why did 21 you do that? 22 A. Yes. Again, we knew nothing of this gentleman. Yes, it 23 sort of opens up another avenue for someone to take 24 over. You know, seemingly our job was done -- 25 Q. Yes.</p> <p style="text-align: center;">Page 110</p>	<p>1 he suffered any underlying illness? 2 A. No, sometimes, again, I don't know if anyone is familiar 3 with the term, but the "ICE", sometimes motorcyclists 4 will have a sticker on the crash helmet, and it stands 5 for "in case of emergency", it might tell them that the 6 patient is diabetic, that the patient has underlying 7 medical conditions, but no, there was nothing to suggest 8 any particular avenue to concentrate on. 9 MR WASTELL: Yes. Thank you, Mr Mintram, I have no further 10 questions for you. 11 THE CORONER: No one? 12 Good, all right, there we are. That concludes your 13 evidence and you are free to go. 14 A. Thank you very much. 15 Thank you. 16 THE CORONER: Good. We will say 2.15. 17 (1.10 pm) 18 (The Luncheon Adjournment) 19 (2.15 pm) 20 THE CORONER: Yes. 21 MR WASTELL: Sir, we now have the final paramedic witness, 22 Adam Heywood. 23 MR ADAM HEYWOOD (affirmed) 24 25</p> <p style="text-align: center;">Page 112</p>

<p>1 Questions from MR WASTELL 2 MR WASTELL: Can you state your name for the court, please. 3 A. Yes, Adam Robert Heywood. 4 Q. There is a bundle in front of you. If you turn to 5 tab 9(a), you should see a statement headed "South-east 6 Coast Ambulance Service" dated 1 August 2016, and that 7 is signed by you, it is two pages? 8 A. That's correct, yes. 9 Q. Is that statement true to the best of your knowledge and 10 belief? 11 A. Yes, that's right. 12 Q. You were on duty with Craig Mintram on 10 November 2012; 13 is that correct? 14 A. Yes, that's correct. 15 Q. You attended, as we have heard, a second ambulance crew 16 to a person found in the road, subsequently identified 17 as Alexander Perepilichny. Correct? 18 A. Yes, that's correct. 19 Q. We see you arrived on the scene at 17.01. That was 20 Hillcrest Cottage, correct? 21 A. Yes, that's correct. 22 Q. You were the critical care paramedic, as we have heard. 23 A. Yes. 24 Q. Just help us, what is the difference between a vanilla, 25 a standard paramedic, and a critical care paramedic?</p> <p style="text-align: center;">Page 113</p>	<p>1 A. Yes, absolutely, yes. 2 Q. You say in your statement, made in August last year, you 3 have very limited recollection of these events. 4 A. Yes. 5 Q. We have obviously been through in detail the patient 6 report form. Do you have any recollection beyond that 7 contemporaneous record? 8 A. So the nature of my job means I attend a lot more 9 resuscitations than a standard paramedic, so I have 10 probably done since that job, maybe 400 to 500 11 resuscitations, so they do unfortunately all tend to 12 blur into one. So the only things -- I found that job 13 in a sense unremarkable. 14 Q. Yes. 15 A. The things I recall are the fact that it was on 16 St George's Hill, because we don't go there very often 17 and obviously listening to the evidence there is a few 18 things that I can kind of recall. For example the 19 gentleman being in the road, it being dark, misty 20 I would have described it actually, with poor vision by 21 the time that we turned up. 22 Q. Yes. 23 A. But essentially the -- from the treatment point of view, 24 it would be referring to the patient report form. 25 Q. Yes, I mean could you help us for example with you know</p> <p style="text-align: center;">Page 115</p>
<p>1 A. Okay, so I am a specialist paramedic who specialises in 2 critical care and resuscitation. So I have undergone 3 a further educational base at Masters level and a number 4 of other courses, and I am targeted specifically to 5 critical care cases, so that will include very injured 6 and ill people and resuscitation. 7 Q. Are there specific techniques or pieces of equipment 8 that you can use that others can't? 9 A. Absolutely, so you have heard the Lucas 2 device 10 referred to, that is a critical care paramedic only 11 piece of kit. 12 I now -- obviously this is sort of five years ago, 13 we were developing, as of today I actually provide about 14 17 additional drugs than a paramedic would and a number 15 of pieces of equipment, but back then I had access to 16 the Lucas device. 17 Q. You were the highest clinical grade on the scene; is 18 that right? 19 A. Yes, that's correct, from a clinical point of view. You 20 obviously had Craig as the clinical team leader with 21 a sort of management focus but from a clinical point of 22 view, yes I was the senior clinician. 23 Q. As the highest clinical grade on scene does that mean it 24 is your decision, albeit as part of a team, as to when 25 the resuscitative efforts should stop?</p> <p style="text-align: center;">Page 114</p>	<p>1 signs of injury? 2 A. Not that I could recall, no. Only from what I have 3 heard but I couldn't honestly say that I remembered him 4 having grazes on his knees or a graze to his head. It 5 was certainly unremarkable to me, there was no gushing 6 wound that I needed to act on immediately. 7 Q. Again, can you help us with vomit or secretions? 8 A. As per the report form and obviously listening to what 9 Phil Nash has said, it would appear that that I used 10 a suction device to clear the airway. However -- 11 Q. Is that the Laerdal aspirator? 12 A. Yes, so the Laerdal aspiration which is a. 13 Q. A Yankauer sucker? 14 A. A mechanical sucking device, I suppose a very primitive 15 Hoover type aspirator, you turn a dial and you have 16 a tube and this thing they call the Yankauer suction is 17 a rigid attachment that fits on the end and you use that 18 to remove debris from the mouth or the airway. It works 19 very well with liquid but it doesn't work quite so well 20 with solid items, so the fact I haven't commented or 21 that since then -- because since then I have done some 22 quite messy airways and this is unremarkable would 23 suggest to me that there was not -- you know, we were 24 not overflowing with vomit or debris within the airway. 25 But I couldn't tell you for sure about what I saw there.</p> <p style="text-align: center;">Page 116</p>

1 **To all intents and purposes to me it was**
 2 **unremarkable.**
 3 Q. Yes, and the aspirator unit and sucker, is that at the
 4 same time that you are intubating?
 5 A. Yes, so as part of -- intubation I would use
 6 an instrument called a laryngoscope, for those of you
 7 that don't know there is a handle, a metal handle about
 8 6 inches long and that has a curved blade and you get
 9 different sizes, so I would have used on this gentleman
 10 a mac 4 and all that describes is the sort of length of
 11 blade and the shape of the blade, there is a number of
 12 different blades that you use.
 13 Q. Yes.
 14 A. I used that to sweep the tongue out of the way and
 15 identify the vocal chords, and then I am passing a tube
 16 through the vocal chords directly into the trachea to
 17 enable me to ventilate the lungs. And, like I say, so
 18 if anything object obstructs your view then you would
 19 use potentially suction or other methods of clearing in
 20 order to obtain the best view you can to ensure the tube
 21 goes through the chords.
 22 Q. I think there were two other pieces of equipment we have
 23 heard about and put in our checklist to deal with you.
 24 A. Yes.
 25 Q. The first is the end tidal wave form capnography?

Page 117

1 A. Yes, so end tidal CO2 is the monitor that I was carrying
 2 at the time, that is now rolled out to everyone, but at
 3 the time, the lifepac 15 -- which is the upgraded model
 4 from the 12 that was used initially -- had the ability
 5 to monitor this end tidal CO2. And what happens is
 6 throughout the, you have what we call a circuit, so the
 7 endotracheal tube has gone directly into the lungs and
 8 you then attach a circuit to there which is a catheter
 9 mount then a little filter to stop any debris going
 10 through. And then you have a probe that attaches to the
 11 monitor and that samples a very small amount of gas from
 12 the returning circulation out of the body and that gives
 13 you a number. And I believe the number was recorded at
 14 1.7, is that correct?
 15 Q. Page 61, let's just get it accurate.
 16 A. Yes. Sorry, 1.6.
 17 Q. 1.6. What does that tell you?
 18 A. That tells me -- that is a low end tidal CO2 reading so
 19 a normal reading for you or I sat here would be between
 20 4.5 and 6, so I suggests to me that the patient has
 21 no -- there is no circulation there, so this is part of
 22 the decision making around stopping but also the
 23 identification of the deceased, essentially. Making the
 24 decision to stop the termination -- the resuscitation.
 25 Q. Yes. The last piece of equipment we have heard about is

Page 118

1 the Lucas chest compressor, if I have that right?
 2 A. Yes, so that is an automated CPR device, it consists of
 3 two parts, you have a carbon fibre backboard which goes
 4 underneath the patient and then there is a -- so in
 5 basic terms it looks like a plunger that you would use
 6 to empty a sink, which is attached to a control panel at
 7 the top and what that does is it basically sort of goes
 8 up and down, much the same as CPR but being a machine it
 9 doesn't tire, it gives exactly the same level of
 10 compressions right the way through the time it is
 11 running. So you could run it on a battery for 45
 12 minutes but you have the ability to plug it in and run
 13 it indefinitely.
 14 Q. We see from the notes it was not used until I think
 15 5.27?
 16 A. Correct.
 17 Q. And it was used for 10 minutes before the CPR ceased.
 18 Is there any reason why you don't use it at the
 19 beginning?
 20 A. Sure. So, again, five years ago, we were in our infancy
 21 within the critical care programme and it was a piece of
 22 kit that we were evaluating to see if it was making any
 23 difference to cardiac arrest and so I was allowed to use
 24 it in circumstances where I felt that the patient may
 25 benefit, where other resuscitation methods had failed so

Page 119

1 in the case that we had done CPR manually, I had crews
 2 that were potentially tiring, the quality of CPR would
 3 reduce, so I made the decision that standard CPR had
 4 failed, and so I was going to attempt, in view of the
 5 fact that, you know, that this was a young gentleman,
 6 and we were not 100 per cent sure of the circumstances,
 7 I would see if this made any difference.
 8 Which as per the notes, it made no difference, we
 9 remained in the asystole rhythm.
 10 Q. Yes, and is this the last thing you try, essentially?
 11 A. Yes.
 12 Q. One question I raised with Mr Weller was about the
 13 finding that he had episodes of PEA?
 14 A. Yes.
 15 Q. My question to him was, does that suggest that there
 16 were signs of life, is it a sign of life?
 17 A. So no, pulseless electrical activity (a PEA) is not
 18 a sign of life, it is a sign that there is some form of
 19 electrical activity in the heart but it doesn't mean
 20 that it is pumping. So what you want is mechanical, the
 21 heart to be mechanical and that is pumping the blood
 22 around the body and that is when you can feel a pulse,
 23 so it is the heart pumping. So this electrical activity
 24 is often drug induced particularly with large amounts of
 25 adrenaline. I note that we gave six adrenaline, my

Page 120

1 standard practice now is actually to probably give
 2 a little bit less than that, because you can induce
 3 artificial rhythms with the use of adrenaline.
 4 Q. Would you say that an episode of PEA is consistent with
 5 the amount of adrenaline you used on that occasion?
 6 A. I would say so yes, what you would hope is to develop
 7 that PEA then into a mechanical rhythm.
 8 Q. Yes.
 9 A. You have got more chance of getting someone back from
 10 a PEA than you have the asystole, so I think that was
 11 probably part of my decision making to continue beyond
 12 my -- what would normally be a standard resuscitation.
 13 Q. Is that 20 minutes?
 14 A. 20 minutes of asystole, we would generally stop there,
 15 and I think because we had this brief episode of PEA
 16 I made the decision to introduce the Lucas to enable us
 17 to do that little bit more.
 18 Q. Eventually, as we know, that was unsuccessful?
 19 A. Which was unsuccessful, yes.
 20 Q. Just to get your comments on it, page 62 of the bundle,
 21 you have signed there the recognition of life extinct
 22 form, correct?
 23 A. Yes, that's correct.
 24 Q. That is just an internal document you used to --
 25 A. Yes, so this is actually an old form, we no longer use

Page 121

1 this form but yes I recognise that as a previous
 2 recognition of life extinct form that we would complete
 3 for any patient that essentially died in our presence,
 4 or that we found -- you spoke previously about a DOA and
 5 the difference about a DOA and a resuscitation, so there
 6 are certain conditions that we will go to, I am thinking
 7 along the lines of a decapitation, where it is pretty
 8 occupy the patient is dead and there would not be
 9 a resuscitation attempt. So that would be a DOA and
 10 then any resuscitation attempt would lead then to
 11 a recognition of life extinct.
 12 Q. Yes, but when you attend someone who is already having
 13 CPR, whether it be civilian or paramedic, as a matter of
 14 protocol you continue through your 20 minutes?
 15 A. Unless there is a condition unequivocal with their
 16 death, so for example like I say, a decapitation, you
 17 know, there is a possibility that someone may still be
 18 doing CPR and then we would ask them to stop, but if for
 19 the case that we got, I mean obviously I was not the
 20 first on scene, from what I have heard, I would have
 21 continued the resuscitation on this gentleman when
 22 I arrived, if I was first on scene.
 23 Q. Yes, and after pronouncing him dead, did you have any
 24 involvement with the body after that?
 25 A. Not with the body, no. I obviously signed some

Page 122

1 paperwork and would have tidied up and myself and Craig
 2 had finished at this point, so I think that is why the
 3 other crew remained on scene to complete the paperwork
 4 and we went back to finish our shift.
 5 MR WASTELL: Yes, thank you, I have no further questions, if
 6 you wait there.
 7 THE CORONER: Nobody?
 8 Thank you very much indeed. Thank you.
 9 A. Thank you.
 10 MR WASTELL: Sir, the next witness is PC Pasley.
 11 PC DOUGLAS PASLEY (sworn)
 12 Questions from MR WASTELL
 13 MR WASTELL: Can you state your name for court, please.
 14 A. My name is Douglas Mark Pasley, I am a Police Constable
 15 attached to Surrey Police and my collar number is 4633.
 16 Q. In front of you there should be a bundle. Could you
 17 turn, please, to tab 10. Do you see there a statement
 18 made by you from 10 March 2013?
 19 A. That's right.
 20 Q. It is three pages?
 21 A. That's correct.
 22 Q. Then behind tab B, do we see there extracts from your
 23 police notebook?
 24 A. That's right.
 25 Q. You have the original notebook in court today?

Page 123

1 A. I do.
 2 Q. Are there any corrections you would like to make to the
 3 statement?
 4 A. Yes, I would like to point out that in my statement
 5 I made reference to seizing some mobile phones and that
 6 the chef gave them to me. The discrepancy is in my
 7 notebook, where I have mentioned that there is
 8 an ambulance man who has given me the mobile phones.
 9 Unfortunately, sir, I can't remember who gave what to
 10 me.
 11 They were involved because I couldn't unlock them
 12 and I had to have some help by one of them in order to
 13 unlock.
 14 MR FEAR-SEGAL: I couldn't quite hear that.
 15 THE CORONER: Could you keep your voice up. It is a very
 16 big room.
 17 Somebody gave you some phones but you are not quite
 18 sure who.
 19 A. I can't quite be sure whether it was -- I am almost sure
 20 it was the chef but the ambulance man had an impact in
 21 this because he helped me unlock the phone but there is
 22 a confusion but I can't 100 per cent tell the court who
 23 gave me --
 24 THE CORONER: In your notes, who do you have there as doing
 25 it?

Page 124

<p>1 A. In my notes, sir, I've got the ambulance stating that 2 they gave me the mobile phones, but in the statement -- 3 MR WASTELL: Just pause there, so page 67, internal page 16 4 of the notebook. 5 A. 67. 6 Q. Top right is, are you looking through the numbers? 7 Entry at 17.40, do you see that there? 8 A. That is the one. 9 Q. "Two mobile phones handed to me by ambulance staff." 10 A. That's right. 11 Q. Then, "Mobile with no earphones", does that say? 12 A. That's right. There was two, one without any earphones 13 and they were the ones that I have been referring to. 14 Q. You have given them exhibit number DMP1 and the other 15 mobile phone DMP2? 16 A. Yes. 17 Q. Then just towards the back of your report, page 69 -- 18 THE CORONER: Sorry, help me on this, it has 17.40 on it, is 19 that the time of the event or the time you make the note 20 or is it made actually at the time of the event? 21 A. That is the time that I have made the note. 22 MR WASTELL: Yes, because if we turn to page 69, again still 23 just dealing with the mobile phones, 23.25 you have made 24 an entry there, do you see internal page 18, page 69 of 25 the bundle.</p> <p style="text-align: center;">Page 125</p>	<p>1 A. 18 and 19, yes, sir. 2 THE CORONER: Yes, is that right? 3 A. That's right, yes. 4 THE CORONER: Yes. 5 It may not matter much but it looks as if you were 6 in two minds then. 7 A. Yes. 8 MR WASTELL: When you came to make your statement in March, 9 you decided it was the chef not the ambulance staff, so 10 you are highlighting the disparity. You cannot say 11 which it was today; is that right? 12 A. That's correct, sir. 13 Q. Aside from that, is the statement true to the best of 14 your knowledge and belief? 15 A. Absolutely. 16 Q. You were at the time a Police Constable for Surrey 17 Police, correct? 18 A. That's correct. 19 Q. You attended an incident in Granville Road where a male 20 was being attended to by an ambulance, correct? 21 A. That's correct. 22 Q. Do you know what information you were given about it? 23 A. The information that we have been given from the control 24 room was that there was a male in the street who was 25 having difficulty, ambulance were on scene and I think</p> <p style="text-align: center;">Page 127</p>
<p>1 A. Page 69. 2 Q. An entry at 23.25, the last entry on that second page? 3 A. 23.25, yes. 4 Q. "Report of male collapsed in Granville Road ..." 5 A. That's right. 6 Q. "... being worked on by ambulance." 7 A. That's correct. 8 Q. And then: 9 "On arrival, two ambulances in attending." 10 Then just in the middle of the page: 11 "Ambulance with ginger hair gave me two phones and 12 email address seen and text." 13 Is that what it says? 14 A. Yes. 15 Q. Thank you. 16 Going back to your statement -- 17 THE CORONER: With "chef" crossed out before "ambulance"? 18 A. Sorry? 19 THE CORONER: With "chef" crossed out before "ambulance"? 20 A. In my statement? 21 THE CORONER: No, looking at this note here. 22 A. In the notebook. Which page are we on, sorry? 23 THE CORONER: Page 70 at the top, but you are on its own 24 pages that looks like -- it could be 18 or 19 of the 25 notebook.</p> <p style="text-align: center;">Page 126</p>	<p>1 they mention that resuscitation was in progress. 2 Q. Why would the police attend a man collapsed in the 3 street being attended to by paramedics? 4 A. Essentially there may be issues where they need the 5 scene protecting in terms of while they work, in which 6 case we can facilitate that with a police car, but also 7 to see if there is any foul play involved, we would 8 obviously be the agency involved in that. 9 Q. Yes. Just to get the timings, behind tab 15, 15(c), in 10 fact, this is a document produced to us by Surrey 11 Police. We see a series of entries dated 12 10 November 2012, with times, do you see that? 13 A. Yes. 14 Q. The top of those, 10 November 2012, 17.21.29, status 15 dispatched, collar 4610 and 4633. Who are collars 4610 16 and 4633? 17 A. That is PC French is 4610 and myself, which is 4633. 18 Q. Taking that as a police dispatch log it looks like you 19 were sent to the scene at 17.21? 20 A. That's right. 21 Q. Then just at 17.34.42, do you see the entries there 22 "Arrived", again 4610 and 4633? 23 A. At 17.34? 24 Q. 17.34, correct. 25 A. Yes, that's correct, I think it may have been just</p> <p style="text-align: center;">Page 128</p>

<p>1 slightly earlier than that. One way that we signalled</p> <p>2 that we arrive is by pressing a 6 button on our radios,</p> <p>3 we don't always do it straight away, we get out of the</p> <p>4 car and have a quick look what is going on first and</p> <p>5 then press it, so maybe a little bit earlier.</p> <p>6 Q. When you reached there, obviously paramedics were in</p> <p>7 attendance --</p> <p>8 A. Yes, sir.</p> <p>9 Q. -- do you remember if they were still treating the male?</p> <p>10 A. Oh yes, they were still working furiously trying to save</p> <p>11 the male.</p> <p>12 Q. Did you get close to him, did you examine him?</p> <p>13 A. I didn't get too close to him, I had a quick cursory</p> <p>14 check over him, over the shoulders of the ambulance</p> <p>15 personnel while they were working on him. I couldn't</p> <p>16 get a clear look. It would be -- that is their domain,</p> <p>17 trying to save life.</p> <p>18 Q. Yes.</p> <p>19 A. But no, I didn't examine him at all.</p> <p>20 Q. You left them to it, as it were?</p> <p>21 A. Absolutely, yes.</p> <p>22 Q. You were with PC Wilson, now French I think?</p> <p>23 A. Yes.</p> <p>24 Q. You sent her to speak to some bystanders who were there,</p> <p>25 is that right?</p> <p style="text-align: center;">Page 129</p>	<p>1 A. Yes.</p> <p>2 Q. -- remember to keep your voice up. When you say you</p> <p>3 looked round the area, how far around the body did you</p> <p>4 look?</p> <p>5 A. About 10 metres in the square. It is in the middle of</p> <p>6 the road, there is a grass verge on either side and up</p> <p>7 and down so part of where the ambulances were covered</p> <p>8 I couldn't search, but it is a visual search. I can't</p> <p>9 go into fingertip searches or anything else like that,</p> <p>10 because I just can't do it.</p> <p>11 Q. No. You are looking presumably for evidence linked to</p> <p>12 the body, any weapons, things such as that?</p> <p>13 A. Absolutely anything. Anything, sir, that may cause me</p> <p>14 concern or prove what we may think has happened, in</p> <p>15 terms of clothing, maybe a bit further down the road</p> <p>16 would distinguish would distinguish a route that person</p> <p>17 has taken, or clothing somewhere else that may be</p> <p>18 similar to what he is wearing that he may have gone</p> <p>19 somewhere that we didn't expect.</p> <p>20 Q. Did you find anything?</p> <p>21 A. Nothing at all.</p> <p>22 Q. We have seen with the coroner in your notebook you being</p> <p>23 handed two phones. Regardless of who handed them to</p> <p>24 you, you mentioned you received some assistance</p> <p>25 unlocking it?</p> <p style="text-align: center;">Page 131</p>
<p>1 A. That's right, yes. It is easy to split things up in</p> <p>2 terms of resourcing, where PC French could talk to the</p> <p>3 people that were in this vicinity and I could manage</p> <p>4 other sides of the initial investigation.</p> <p>5 Q. So what did you do? What was your --</p> <p>6 A. Essentially I have to make a judgment call on and update</p> <p>7 the control room and my supervisors with regard to the</p> <p>8 circumstances --</p> <p>9 Q. Yes.</p> <p>10 A. -- and part of that is considering if there is any foul</p> <p>11 play involved.</p> <p>12 Q. Yes.</p> <p>13 A. One of -- the way I looked at it, it was first I needed</p> <p>14 to be able to view the body, that wasn't the case at the</p> <p>15 time, however I asked ambulance if there was anything of</p> <p>16 any suspicious nature, marks, that type of thing, which</p> <p>17 they said no.</p> <p>18 Q. Yes.</p> <p>19 A. I don't know the full circumstances of what has</p> <p>20 happened, so everything is on the table, so I looked at</p> <p>21 in and around the area, for any signs of anything</p> <p>22 suspicious or that would make any feel uncomfortable,</p> <p>23 that something untoward has gone on, I didn't see</p> <p>24 anything.</p> <p>25 Q. Just pausing there --</p> <p style="text-align: center;">Page 130</p>	<p>1 A. That's right.</p> <p>2 Q. Was there some sort of password on the phones?</p> <p>3 A. I can't remember. I think there was a finger swipe</p> <p>4 I think, where you had to go from left to right or right</p> <p>5 to left. I am not really a phone person I am afraid,</p> <p>6 sir.</p> <p>7 Q. We have heard reference to them potentially being</p> <p>8 iPhones, is an iPhone something you were familiar with</p> <p>9 at the time?</p> <p>10 A. No.</p> <p>11 Q. You have described in your notebook, as we have already</p> <p>12 seen, one of the phones had headphones attached, or</p> <p>13 "earphones" I think is the word you used -- do you</p> <p>14 recall any music playing?</p> <p>15 A. No, no music.</p> <p>16 Q. I think you said you looked at the phones yourself?</p> <p>17 A. Yes.</p> <p>18 Q. And you obtained a name?</p> <p>19 A. Yes, I looked at an email address and I came up with</p> <p>20 the -- with an email with Peter -- excuse me.</p> <p>21 Q. Don't worry, I am well versed in it, Perepilichnyy. We</p> <p>22 will look at the notebook and make sure we have it</p> <p>23 right. Page 67.</p> <p>24 A. 67.</p> <p>25 Q. Behind tab 10(b), do you have that?</p> <p style="text-align: center;">Page 132</p>

<p>1 A. Yes. 2 Q. We have looked at the entry at 17.40, you told the 3 coroner that is the time you make the note? 4 A. Yes. 5 Q. Just above that, there is an email address there 6 "AlexPerepilichnyy@gmail.com", is that the email you 7 obtained from the phone? 8 A. That's right, yes. 9 Q. What did you do with that information? 10 A. I passed that over to the control room. I didn't know 11 that was going to be the name of the deceased. I put it 12 forward as a possible, it meant that the control room 13 can do searches in relation to our computer records and 14 electoral roll and those sorts of things, in order to 15 identify the gentleman on the floor. 16 Q. Were you involved in any of those searches personally? 17 A. No. 18 Q. We know, sadly, Mr Perepilichnyy couldn't be 19 resuscitated, did you have a look and examine his body 20 after the paramedics had stopped working on him? 21 A. No, that is -- it is part of the scene. Any person 22 interfering with that, it would need to be managed by 23 a senior detective. 24 Q. Your sergeant duly arrived I think at the scene, what 25 was his name?</p> <p style="text-align: center;">Page 133</p>	<p>1 prior to the gentleman -- his unfortunate situation. 2 Q. You have a 4.15 to 5.15 timeframe there. 3 Moving on to an entry at the bottom of that page, is 4 that 19.05 at the bottom? 5 A. Yes. 6 Q. Again, without referring to the name, that individual 7 told you they had been shopping and arrived home at 8 approx 16.30 to 16.35 hours? 9 A. That's correct. 10 Q. Is that, "Nothing seen or heard"? 11 A. Yes. 12 Q. Again, narrowing down the timeframe a bit, correct? 13 A. That's correct, yes. 14 Q. Then last entry, over the page, at 19.39, so 7.39 pm, 15 and I am obviously skipping over a number of entries you 16 make in the intervening period, you speak to what 17 appears to be a boy there -- 18 A. That's right. 19 Q. -- judging by the date of birth, and another individual 20 with the same surname? 21 A. Yes. 22 Q. Do I have this right: 23 "Seen two males trying to help male on the floor, 24 male wearing a work suit 40 to 45, fair hair ..." 25 A. Yes.</p> <p style="text-align: center;">Page 135</p>
<p>1 A. Sergeant Nettlingham. 2 Q. You I think were dispatched to carry out house-to-house 3 calls, weren't you? 4 A. That's right. 5 Q. Can we just look in your notebook and see one or two 6 entries? 7 A. Yes, of course. 8 Q. Now, reading through these, I don't want you to read out 9 names or dates of birth, okay? 10 Page 67, you should have in front of you already, or 11 will use your original notebook, you have seen the entry 12 at 17.40 and then we see an entry at 18.29 with 13 an address and a no answer? 14 A. That's correct. 15 Q. Does that suggest to you it was around 18.29 you started 16 your house-to-house enquiries? 17 A. That's right, yes. 18 Q. Then at 18.33, the entry there, just help me if I have 19 this right, ignoring the name, they tell you or you 20 record, "Went for a haircut 16.50 to 16.30, returned at 21 17.15 and saw two ambulance and no police cars", yes? 22 A. That's correct. 23 Q. There you are looking at trying to get a timeframe; 24 aren't you? 25 A. Yes, it's anything that would lead to the circumstances</p> <p style="text-align: center;">Page 134</p>	<p>1 Q. "... male fair hair white funny shirt with buttons ..." 2 A. That's right. 3 Q. Yes, what is the next word? 4 A. "Jumper", or never had essentially with the way these 5 are recorded I am picking little bits out from the 6 child, so -- 7 Q. I see, so it is the child giving this? 8 A. This is the child, yes. 9 Q. Then: 10 "Male 1 had hand on chest, right hand, and cellphone 11 on left." 12 A. Yes. 13 Q. Yes? 14 "Asked if male was all right. Male: yes, fine 15 thanks." 16 A. Yes. 17 Q. Does that say, "Foetal position with hands near chest"? 18 A. That's right, he described the situation to me and 19 I wrote it, because it looked like he was in the foetal 20 position, bearing in mind this was a child. 21 Q. Did you follow up that at all? 22 A. Yes, that would have been put on the report for 23 investigators to follow up. 24 Q. Did you recognise the descriptions given? 25 A. Oh, yes, yes, it was clearly, we had already heard from</p> <p style="text-align: center;">Page 136</p>

<p>1 the chauffeur and the chef who wears the typical shirt 2 with the large buttons that the child picks out. 3 Q. It appeared to be a description of those attending to 4 give CPR, didn't it? 5 A. Sorry? 6 Q. It appears to be a description of the two men attending 7 to give CPR, didn't it? 8 A. That's correct. 9 THE CORONER: Sorry, asked if male -- is this the child 10 asking if the man is all right and someone telling him 11 he is all right? 12 A. From memory, I think so, sir. 13 THE CORONER: Somebody might tell a child that even if 14 somebody was not all right. 15 A. Yes, that's right, yes. 16 MR WASTELL: Then just before we finish, PC Pasley, 8.55, 17 exhibits handed to DMP1 and 2, DC Burden? 18 A. That's correct. 19 Q. You are handing over the phones to DC Burden? 20 A. That's right, yes. 21 Q. Then you have written your report at 11.25, correct? 22 A. Yes. 23 Q. Just so we have it: 24 "Report of male collapsed in Granville Road, being 25 worked on by ambulance on arrival, two ambulances in</p> <p style="text-align: center;">Page 137</p>	<p>1 A. My mind, because it is quite a while ago, all I remember 2 is a black face to the telephones, I couldn't give you 3 a colour as to what was on the back of them, I am sorry, 4 no. 5 Q. No. I don't know whether you told us but could you 6 remind me how long you have been in the force? 7 A. I have been an officer -- this is my 13th year. 8 Q. In that time, can you recall roughly how many incidents 9 you have had to attend where someone has passed away in 10 the street? 11 A. Yes, there has been a few, yes sir. 12 Q. A few. Do you have any policy about calling out scenes 13 of crime officers to such events -- either that you do 14 or you don't? 15 A. If it is a situation -- could you ask me the question 16 again, please? 17 Q. Yes. Are you aware of any policy about calling out SOCO 18 to such events, if someone passes away in the street, do 19 you automatically call SOCA or only call them in certain 20 circumstances or what? 21 A. I am not aware of any policy but certainly there is 22 a policy if it is deemed as being suspicious, if 23 a person had passed away in the street, and it could be 24 the moments before they are passing away is known, for 25 example, that they have just passed, they have dropped</p> <p style="text-align: center;">Page 139</p>
<p>1 attending ..." 2 Or is that "attendance"? 3 A. Yes. 4 Q. "... male chauffeur discovered male on floor ..." 5 Yes? 6 A. Yes, that's correct. 7 Q. "... and called a chef, he performed CPR until ambulance 8 arrived, a male deceased, [chef crossed out] ambulance 9 with ginger hair gave me two phones and email address, 10 seen and text, house to house." 11 Yes? 12 A. That's right. 13 Q. And then we don't need to read out the rest. 14 Did you have any other involvement with this case 15 after handing the phones to DC Burden and writing your 16 report that evening? 17 A. No, sir. 18 MR WASTELL: Thank you, I have no further questions. If you 19 wait there, there may be some further questions for you. 20 Questions from MR MOXON BROWNE 21 MR MOXON BROWNE: Officer, I think you have said you are not 22 a telephone person? 23 A. Yes, sir. 24 Q. Nor am I, so let's keep it very simple. Can you tell us 25 what colour the telephones were that you took?</p> <p style="text-align: center;">Page 138</p>	<p>1 to the floor, there is no external influence, then it is 2 unlikely that scenes of crime would be called. But in 3 the situation such as the one today, the scene was set 4 up for an adjudication by an investigating officer for 5 scenes of crime. 6 Q. Yes, when you say a scene that, is a crime scene -- 7 I should perhaps say a potential crime scene, yes. 8 I think unless it is clear that it is an explicable 9 and not suspicious death, for example a grandad out 10 walking with his daughter or some such and collapsing, 11 if it is not at all -- if it was explicable, then you 12 wouldn't call SOCO, but I think the position is that it 13 is deemed suspicious until the contrary is demonstrated? 14 A. That's right, that is why CID would attend and the 15 decision would be their call, not mine. 16 Q. Yes, and is there a policy or a practice or what is your 17 experience about the level of officer, the rank of 18 officer, who turns out on such occasions? Is there 19 a policy that it must be sergeant or above or inspector 20 or above or what? 21 A. I think if it is deemed as being -- I forget the term, 22 not sudden death but it is one slightly higher than 23 that, then it is a rank of a detective inspector I think 24 that comes out. 25 Q. In fact I think there were two inspectors at the scene</p> <p style="text-align: center;">Page 140</p>

<p>1 on this occasion?</p> <p>2 A. Certainly my duty inspector was there, who is uniformed.</p> <p>3 Q. Who was that?</p> <p>4 A. That was --</p> <p>5 Q. Temporary Detective Superintendent Collwood?</p> <p>6 A. No, no, this is a response inspector, Inspector</p> <p>7 Martin Jones.</p> <p>8 Q. Jones, yes, I thought that might be the case.</p> <p>9 Yes. You made a sort of ordinary search, not a SOCO</p> <p>10 type search in the immediate vicinity. Did it occur to</p> <p>11 you for example to look for a water bottle?</p> <p>12 A. It was anything. Anything associated with the person on</p> <p>13 the floor. A water bottle might be something. Anything</p> <p>14 really that is, that would allow us to see what would</p> <p>15 have happened before --</p> <p>16 Q. If the deceased had vomited in the road, perhaps 50 or</p> <p>17 100 yards away from where the body was found, is that</p> <p>18 something that your search would have revealed or --</p> <p>19 A. No, no, mine was more localised, 50 yards onwards, that</p> <p>20 was too far away for me.</p> <p>21 Q. It may be your experience as is it mine that nowadays</p> <p>22 people take photographs of everything the whole time</p> <p>23 with mobile phones, it is very easy to do and the</p> <p>24 pictures are quite good quality. Were people doing that</p> <p>25 at this scene, officers taking pictures of what they</p> <p style="text-align: center;">Page 141</p>	<p>1 A. From what I remember that scenes of crime were booked to</p> <p>2 attend, and that is all I know.</p> <p>3 Q. Yes, I was asking about photographs. As far as you are</p> <p>4 aware, no photographs were taken?</p> <p>5 A. I didn't see any, no.</p> <p>6 MR MOXON BROWNE: Thank you.</p> <p>7 Questions from MS HILL</p> <p>8 MS HILL: Just a couple of questions, officer.</p> <p>9 Can I ask you to be shown the hearing bundle, page</p> <p>10 116, please.</p> <p>11 Officer you will see this is a document, if you just</p> <p>12 want to keep a hand in 116 to orientate you, that begins</p> <p>13 at 109. It is a police incident log?</p> <p>14 A. Sorry, I am having trouble finding it. What was the</p> <p>15 page?</p> <p>16 MS HILL: It is on the internal pagination, on the top</p> <p>17 right-hand corner.</p> <p>18 A. Top right-hand corner, yes.</p> <p>19 Q. If you find page 109.</p> <p>20 THE CORONER: Behind divider 15(b).</p> <p>21 A. Here we are.</p> <p>22 MS HILL: Do you have it?</p> <p>23 A. Yes.</p> <p>24 Q. 109 is the beginning of a document called an incident</p> <p>25 log, document D5, and it runs over several pages. Just</p> <p style="text-align: center;">Page 143</p>
<p>1 saw?</p> <p>2 A. Were people?</p> <p>3 Q. Were there people taking photographs?</p> <p>4 A. I didn't see any people taking photographs, no, sir.</p> <p>5 Q. That is something of course that SOCO do?</p> <p>6 A. Are you asking if members of the public were taking</p> <p>7 photos or whether the police?</p> <p>8 Q. No, officers, not SOCO officers, because you told us</p> <p>9 there weren't any, but nevertheless I expect you all had</p> <p>10 mobile phones and it occurred to me that it is probable</p> <p>11 that people would have taken pictures check?</p> <p>12 A. Well the scene is on, that would be down for an</p> <p>13 investigation officer to decide whether that would be</p> <p>14 the case.</p> <p>15 Q. So that is not something which an officer would do</p> <p>16 simply because it seemed sensible on his own initiate?</p> <p>17 MS BARTON: Sir, actually there is no evidence at all that</p> <p>18 the officers had mobile phones that took pictures.</p> <p>19 MR MOXON BROWNE: No, there isn't, I am just trying to</p> <p>20 explore whether there is some evidence that might be</p> <p>21 given.</p> <p>22 A. At that time we didn't have mobile data terminals, so we</p> <p>23 wouldn't take a photograph.</p> <p>24 Q. The fact is that as far as you are aware no photographs</p> <p>25 whatever were taken at the scene?</p> <p style="text-align: center;">Page 142</p>	<p>1 picking up on some of the other questions you were</p> <p>2 asked, can you look, please, at the top of page 116. At</p> <p>3 the top of page 116 officer somebody has entered this on</p> <p>4 the log.</p> <p>5 A. Yes.</p> <p>6 Q. "This is an untimely death which should be treated as</p> <p>7 suspicious until shown otherwise. If there is the</p> <p>8 slightest doubt as to the circumstances of death, it</p> <p>9 should be treated as suspicious. A detective inspector</p> <p>10 will be responsible for the effective management of any</p> <p>11 suspicious death on the division."</p> <p>12 Does that reflect what you understood the approach</p> <p>13 to be?</p> <p>14 A. Yes.</p> <p>15 Q. Finally, officer, could I ask you to turn back, please</p> <p>16 to your own notebook, in particular beginning at</p> <p>17 page 67, if you have your notebook it is your internal</p> <p>18 numbering page 16.</p> <p>19 A. Yes.</p> <p>20 Q. Again, you don't need to read out the names of the</p> <p>21 houses at all, but is this right, that at 18.29, on the</p> <p>22 right-hand side towards the bottom, you went to</p> <p>23 a property where there was no answer. Is that right?</p> <p>24 A. That's right.</p> <p>25 Q. Then over the page, please, on to your next page, again</p> <p style="text-align: center;">Page 144</p>

<p>1 I don't know if this might be complicated by the 2 copying, but there appears to be an entry at the foot of 3 our left-hand side, on your page 17. 4 A. Yes. 5 Q. Do you have alongside that at the bottom of the page 6 next to it an entry that looks to be 18.04, can you find 7 an entry of 18.04? 8 A. 18.04? No. 9 Q. Perhaps if you look in our bundle, that might be easier, 10 officer, because that will help us orientate ourselves. 11 A. Could you give the location. 12 Q. Yes, top right hand numbering, page 67. 13 A. 67. 14 Q. Just to take you back officer, if you find page 67, the 15 entry you just looked at in your book was on page 67, 16 isn't it, that is 18.29. 17 A. 18.29, yes. 18 Q. That is one house where there was no answer? 19 A. Yes. 20 Q. Go on to page 68, please, and look at the entry at 21 18.04. 22 THE CORONER: Hang on, is that going to be 18.04 -- we have 23 just had 18.29 and -- 24 MS HILL: I think it is a reflection of the copying, I am 25 not sure if it is 18.44 possibly.</p> <p style="text-align: center;">Page 145</p>	<p>1 Q. There is a house name on the fourth line down, where you 2 have written the name of the house, the name of the 3 street "Lights on, but no answer". 4 A. That's right. 5 Q. Then there is another house written at 19.34, again the 6 name of the house, and "no answer", do you see that? 7 A. That's right. 8 Q. The name of the house is written next to the time you 9 went to that particular house; is that right? 10 A. That's right. 11 Q. Is this correct, does it flow from the evidence you gave 12 earlier that those houses that you visited where there 13 was no answer, you yourself were never asked to go back 14 to at any time? 15 A. No. 16 MS HILL: Thank you. 17 Questions from MR BEGGS 18 MR BEGGS: Officer, it is a matter of common sense, isn't 19 it, that the delivery of what is known as the death 20 message to the next of kin must always be handled by the 21 police as tactfully and sympathetically as possible? 22 A. I would have thought so, yes. 23 Q. It is common sense, isn't it? 24 A. Yes. 25 Q. For what it is worth, perhaps you will take it from me,</p> <p style="text-align: center;">Page 147</p>
<p>1 THE CORONER: Unless you have written them in a very odd 2 order. 3 MS HILL: I think we can tell elsewhere actually that that 4 is correct. 5 A. I think 18.44. 6 MS HILL: Forgive me, 18.44, there is an entry there and you 7 have written down the name of the house, the name of the 8 address, and you have written "no" after it. Just keep 9 a hand in that and turn up will you, please, page 149 in 10 the bundle. Which is a typed version I think of the 11 contents of this. 12 Do you see there about eight lines down the same 13 name of the house, and it is what is written there is 14 the name of the house and it says, "No answer". 15 A. Yes. 16 Q. It looks like that is the second house you went to where 17 there was no answer? 18 A. That's right. 19 Q. Then just to complete this, go back to your notebook at 20 page 69. At the top of page 69 on left-hand side, there 21 are two further houses where you have written "no 22 answer", is that right? 23 A. I am just coming to those. 24 Q. On page 69. 25 A. Page 69.</p> <p style="text-align: center;">Page 146</p>	<p>1 it is also Surrey Police policy in one of their numerous 2 policy documents. Would you accept that from me? 3 A. I will accept that from you, yes. 4 Q. In addition to tact and sympathy, the other imperative 5 is to advise the bereaved as quickly as reasonably 6 possible? 7 A. When you mean advise, what do you mean? 8 Q. Deliver the death message. 9 A. As soon as the investigation allows. 10 Q. Yes. Could you go back please, to the pages that 11 Ms Hill was dealing with and pick it up at page 70, 12 please. 13 A. Yes. 14 Q. That seems to be page 19 of the notebook you made on the 15 evening in question? 16 A. That's right. 17 Q. You were crewed up with a female officer called 18 PC Wilson? 19 A. That's right, now French. 20 Q. She is now French or was French, but it doesn't matter 21 which. 22 If you look at the left-hand side of page 70, could 23 you read aloud please the words four lines from the 24 bottom, read them slowly so that they are on the court 25 record, please.</p> <p style="text-align: center;">Page 148</p>

<p>1 A. "Whilst returning in the car, PC Wilson, 4120, upset and 2 very distressed at how next of kin [or NOK] was treated 3 ..." 4 Q. Pause there, so you learned that directly from your 5 officer colleague in the car? 6 A. Yes. 7 Q. Yes, carry on, please. 8 A. "... Wilson almost in tears due to the emotion of CID." 9 Q. Pause there, I appreciate it is four and a half years 10 ago and I am not criticising your handwriting, does it 11 say "emotions" or does it say "actions"? 12 A. Sorry, looks like "actions", yes, sorry. 13 Q. It is your handwriting -- 14 A. Yes, I think I was writing it quickly. 15 Q. "Almost in tears due to the ..." 16 A. "... the actions of CID or the emotions of CID (in death 17 message)." 18 Q. Is it "words used"? 19 A. "Words used ..." 20 I can't read my writing there, "Not focused or ..." 21 Q. Does it say this, we will come back to the words that 22 you cannot read, does it say "Not focused on victim"? 23 A. Yes. 24 Q. Would we understand the victim to be the surviving 25 spouse?</p> <p style="text-align: center;">Page 149</p>	<p>1 A. It is, but there is more to this. PC Wilson is 2 a younger in service police officer. I think she 3 struggled coming to terms with the fact that the next of 4 kin was not allowed to see the body in situ. 5 Q. Yes. 6 A. The scene integrity was on at that time and I think in 7 talking to her at the time, I mentioned to her that that 8 has to be the case until they are absolutely sure that 9 no evidence will be destroyed, because we still don't 10 know what would have happened to the deceased. 11 Q. Just going back a moment, you have told us that 12 PC Wilson was I think -- was she younger in service than 13 you? 14 A. That's right, yes. 15 Q. Yes. Her concern, amongst others, appears to be from 16 what you say that the widow could not see the body? 17 A. Yes, that's right. I think she was on the -- I think 18 from memory she arrived at the scene but was on the edge 19 of the cordon and my sergeant's decision was not for her 20 to come and identify the body at the scene. 21 Q. But you accept that part of the purpose for 22 a sympathetic and tactful approach to the bereaved is to 23 ensure that they retain trust in the police? 24 A. Absolutely. Absolutely. And it is a very difficult 25 situation, someone who is going through that emotion, it</p> <p style="text-align: center;">Page 151</p>
<p>1 A. Yes, ie next of kin. 2 Q. Exactly, so the answer to my question is the victim is 3 the surviving spouse? 4 A. Yes. 5 Q. "Not focused on victim, ie next of kin." 6 Then please read on? 7 A. "Not seen PC Wilson as upset as this before." 8 Q. PC Wilson upset as? 9 THE CORONER: I think it is: 10 "Not seen PC Wilson as upset as this before." 11 A. Yes. 12 MR BEGGS: Yes. We gather from that that your colleague, 13 who was dealing with different matters at the scene 14 I think from you. 15 A. That's correct. 16 Q. That she was not just upset about the way the next of 17 kin was dealt with but it was the most upset you had 18 ever seen her? 19 A. I have not seen her like that. 20 Q. Before? 21 A. Before. 22 Q. Again, trying to keep the temperature down and 23 uncontroversially, if the police get off to a bad start 24 with the bereaved person, that is plainly unfortunate, 25 isn't it?</p> <p style="text-align: center;">Page 150</p>	<p>1 is the unknown that hurts the most but also as the 2 police, we have to protect, if there is any loss of 3 evidence, we cannot have that, if there is any 4 wrongdoing. It is a real balancing act but I have to 5 say, at the time, while the body was in situ, 6 considering that the body had just been worked on by 7 ambulance, I think it was without doubt the right thing 8 to do. 9 Q. Yes. You would finally agree with this, that to the 10 extent the police can achieve it, the quicker they can 11 tell the surviving spouse of the fact of the death, the 12 better? 13 A. Oh yes, for the benefit of the family. 14 MR BEGGS: Yes, thank you. 15 MS BARTON: I have no questions, thank you, sir. 16 THE CORONER: Thank you very much indeed. 17 Thank you. 18 A. Thank you, sir. 19 THE CORONER: Yes. 20 MR WASTELL: Sir, we have made good progress today. That is 21 the end of the witnesses for the day. 22 THE CORONER: Yes. 23 MR WASTELL: I anticipate we can make even better progress, 24 sir, if we deal with a few matters, "housekeeping" is 25 probably putting it too lowly but some issues between</p> <p style="text-align: center;">Page 152</p>

1 the parties.
 2 THE CORONER: Yes.
 3 MR WASTELL: It may be prudent, sir, if you rise perhaps for
 4 half an hour, which will give us an opportunity to
 5 discuss some of the outstanding issues.
 6 THE CORONER: That may mean there are fewer issues, all the
 7 better.
 8 MR WASTELL: Precisely.
 9 THE CORONER: I will certainly do that, just let me know
 10 when you are ready.
 11 MR WASTELL: Thank you, sir.
 12 (3.08 pm)
 13 (A short adjournment)
 14 (3.50 pm)
 15 Housekeeping
 16 MR SKELTON: Sir, some housekeeping at the end of the day.
 17 THE CORONER: Yes.
 18 MR SKELTON: Francois Micheli, the Swiss lawyer, requests
 19 were made through the Swiss authorities to obtain his
 20 assistance in giving evidence in this Inquest. A letter
 21 has been received by Mr Suter today, written in French
 22 but it appears from a translation which we have between
 23 us managed to do that Mr Micheli is asserting client
 24 privilege, ie legal professional privilege, in respect
 25 of any evidence he might give about Mr Perepilichny,

Page 153

1 that the Swiss authorities agree that there is a law
 2 affording that privilege to him and on that basis he
 3 will not give evidence at this inquest.
 4 On that basis, subject to submissions, I will invite
 5 you to read him into the inquest evidence under Rule 23,
 6 but in the meantime, may I suggest that the IPs liaise
 7 via me and Mr Wastell to say which documents they
 8 consider should or should not be read into the record.
 9 THE CORONER: Yes. It will help you, I suspect, if it was
 10 possible just for there to be a composite proposal put
 11 to you, if it was possible to reach agreement about it,
 12 that would help, wouldn't it?
 13 MR SKELTON: Yes.
 14 THE CORONER: That is that.
 15 MR SKELTON: Secondly, the translator Dr Panfilova, sir, you
 16 will recall that the insurers raised a query.
 17 THE CORONER: Mr Moxon Browne's query.
 18 MR SKELTON: Yes, indeed. A query about the word "krysha",
 19 if I am pronouncing it correctly, and whether or not it
 20 has this particular meaning which may be sinister about
 21 having to pay protection money or something similar.
 22 In light of that request, it is proposed to call
 23 Dr Panfilova to deal specifically with that issue
 24 tomorrow, so she will give evidence briefly on that.
 25 And if you could make an order to that effect.

Page 154

1 THE CORONER: Yes, I will.
 2 MR SKELTON: Finally, the brothers in law, Mr Ismagilov and
 3 Mr Gursky. Sir, you have received submissions and I am
 4 just updating those in court really that they are being
 5 reviewed with a view to making a decision --
 6 THE CORONER: About whether they will or either of them will
 7 be read and if so what.
 8 MR SKELTON: Indeed, yes.
 9 THE CORONER: All right, that is in hand.
 10 MR SKELTON: Sir, those are my updates.
 11 THE CORONER: Yes. Good.
 12 All right, nothing else? No. Good. All right.
 13 Thank you very much, Mr Skelton.
 14 It is 10.00 tomorrow. Yes? Thank you.
 15 (3.54 pm)
 16 (The Inquest adjourned until 10.00 am the following day)

Page 155

1
 2
 3 I N D E X
 4
 5 Housekeeping1
 6 MR NEIL ST CLAIR-FORD (sworn)2
 7 Questions from MR WASTELL2
 8 Questions from MR FEAR-SEGAL29
 9 Questions from MS HILL30
 10 Statement of MS IRIS DA SILVA (read)31
 11 MR LIAM WALSH (affirmed)33
 12 Questions from MR WASTELL33
 13 Questions from MR FEAR-SEGAL53
 14 Evidence of MR PHILIP JAMES NASH56
 (read)
 15 MR DANIEL WELLER (sworn)74
 16 Questions from MR WASTELL74
 17 Questions from MR MOXON BROWNE93
 18 Questions from MR STRAW95
 19 Questions from MS BARTON97
 20 MR CRAIG MINTRAM (affirmed)99
 21 Questions from MR WASTELL99
 22 MR ADAM HEYWOOD (affirmed)112
 23 Questions from MR WASTELL113
 24 PC DOUGLAS PASLEY (sworn)123
 25

Page 156

1	Questions from MR MOXON BROWNE138
2	Questions from MS HILL143
3	Questions from MR BEGGS147
4	Housekeeping153
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	

Page 157

A			AlexPerepilichny...	amounts 120:24
ability 118:4	100:20 102:16	156:22	133:6	amplify 3:14
119:12	105:8,24,24	affording 154:2	alighted 58:20	and/or 61:4
able 44:22 47:23	108:21,21 112:22	afraid 95:19 132:5	alive 18:7,8 41:21	angle 58:17
65:7 66:7 68:20	112:23 113:3	afternoon 3:25	41:24	answer 63:25 64:2
68:21 71:19 88:11	156:22	33:16 34:12 107:4	allow 61:12 104:22	64:4,7,14,17 65:1
130:14	added 58:3	age 57:14 101:15	141:14	65:5,19 66:9,17
abnormal 90:3	adding 70:12	agency 128:8	allowed 58:8	67:1,13,20,24
abrasion 110:16	addition 100:9	ago 11:24 24:21	119:23 151:4	68:3,7,14,25 69:4
absence 100:10	148:4	25:16 27:20 29:23	allows 148:9	69:13,21 70:2,16
absent 82:23,25	additional 28:10	30:17 34:9 47:11	alongside 145:5	71:2,6,12,23 72:7
83:1	100:4,5 105:6	53:16 54:1 114:12	aloud 148:23	72:13,24 73:3,7
absolutely 102:1	114:14	119:20 139:1	ALS 85:11,14	73:17,21 74:3
108:10 114:9	address 14:25 31:1	149:10	87:25 88:5	134:13 144:23
115:1 127:15	53:1 57:8,11	agonal 68:6 89:4,8	Ambubag 65:20	145:18 146:14,17
129:21 131:13	103:14 126:12	agree 45:1 152:9	ambulance 1:21	146:22 147:3,6,13
151:8,24,24	132:19 133:5	154:1	13:5,7 14:5,21	150:2
accept 148:2,3	134:13 138:9	agreeable 2:4	15:1,9,12,17	answered 32:4
151:21	146:8	agreement 154:11	16:15 17:24 19:9	answers 56:4 63:22
access 8:12 84:7,8	adjourned 155:16	ah 17:19	20:2,10 22:2,6	65:9,12,15
104:20 106:22	adjournment 28:25	aid 34:20,25 35:3,3	23:17 24:4,8,17	anticipate 152:23
114:15	112:18 153:13	41:23	28:9,10 32:4,11	anybody 8:7 26:22
accord 19:15	adjudication 140:4	aiders 34:21	41:4,8 42:4,8 45:5	28:21 95:12
accords 16:25	adjuncts 65:21	aim 105:13	53:6 56:6,15,17	anyway 44:11
18:25 41:13	administer 72:5	airway 60:4,7,13	56:25 57:3 58:15	107:4
account 51:8 94:4	administered 62:3	60:22,23 61:21,24	58:20 61:15 65:17	apnoeic 68:7
accurate 93:4,10	62:5 73:1 88:5	64:9 65:21 68:24	72:6,8 73:8 74:25	appear 22:25
118:15	administration	69:3,5,6,8,10,11	75:4 80:2,3 84:15	106:11 116:9
achieve 105:13	84:8	69:12,13,14,16,17	96:24 100:16	appeared 17:7 18:4
152:10	admission 2:16	69:18 71:20,25	101:1 102:5,9,22	21:7 46:7,9 51:4
act 56:19 116:6	admit 1:14 2:3,8	82:23,24,25 83:1	104:4 113:6,15	137:3
152:4	admittedly 108:16	85:15 86:3,12,16	124:8,20 125:1,9	appears 135:17
action 82:5	adrenaline 62:5,6	86:20,20,22 90:17	126:6,11,17,19	137:6 145:2
actions 68:22 90:15	62:23 66:4 85:15	90:19 91:1,3,5,6	127:9,20,25	151:15 153:22
90:25 149:11,12	85:18 87:10,11	92:16 93:4 97:12	129:14 130:15	apple 111:19
149:16	106:14 120:25	105:6,9,11 106:10	134:21 137:25	applied 60:22,25
activity 62:15	121:3,5	106:15 116:10,18	138:7,8 152:7	70:16 72:19 73:3
70:22 87:1,12,16	adrenalines 120:25	116:24	ambulances 56:22	87:21 88:18 105:7
107:23 120:17,19	advanced 66:1	airways 20:24	102:7 126:9 131:7	109:3
120:23	85:12,15 86:20	43:15 44:3,13	137:25	apply 61:3,12
actual 94:21	87:25 93:4 106:13	60:23 65:22,22	amount 26:8 49:24	appraisals 100:10
Adam 61:16,20,22	107:13	116:22	57:13 60:5,6	appreciate 24:21
62:13,20 63:3,13	advise 63:5 148:5,7	albeit 114:24	63:24 64:11 68:15	25:16 30:18 149:9
69:8 71:2 73:3,23	advised 63:15	alertness 83:6	72:7 94:10 98:14	approach 59:17
86:17,22 93:3,11	affirmed 33:1 99:3	Alexander 27:10	118:11 121:5	67:7 144:12
	112:23 156:11,20	27:11 53:1 113:17		

151:22	85:5 86:17 92:20	associated 141:12	139:19	156:19
approached 60:1	94:15,19 100:17	assumed 39:8,15	auxilla 70:18	base 114:3
approaching 58:21	102:12 111:5	41:23	avenue 110:23	based 56:16
59:19 71:24	113:19 122:22	assumptions 41:22	112:8	basic 65:21,22 78:5
approx 79:13 135:8	128:22 133:24	asystole 61:13	awake 13:11,13	79:17 91:2 95:12
approximate 57:14	135:7 138:8	70:15,24 72:17,18	aware 13:15,15	95:14 119:5
101:15	151:18	84:10,17,18,22	28:1 29:20,21,22	basically 44:20
approximately	arrives 85:1	85:14 87:5,25	30:14 38:9 67:6	119:7
11:8 58:13,25	arriving 79:16 94:2	120:9 121:10,14	139:17,21 142:24	basis 154:2,4
67:2,5 71:23	artificial 121:3	athletic 59:23	143:4	batteries 47:10
area 4:10 5:24	ascertain 71:14	attach 72:1 106:8		battery 47:7 119:11
31:24 64:6 70:17	aside 48:4 91:11	118:8	B	bearing 94:17
70:18 101:11	110:15 127:13	attached 29:19	b 1:20 56:4 67:22	136:20
104:13 130:21	asked 13:7,8 14:8	63:8 70:19 119:6	69:2 71:5 123:22	beats 61:8
131:3	15:4,14 16:16,20	123:15 132:12	back 12:15 13:9	becoming 56:23
arm 32:12,16,16	17:2,10 18:22	attaches 118:10	14:3 16:15 17:22	bed 10:18 62:11
38:23,24 62:1,2	20:4 26:14 27:5,7	attachment 116:17	22:1 23:11,14,15	began 32:19
72:19	32:4 42:17,23	attains 62:12	24:9,11,13 32:14	BEGGS 147:17,18
arose 98:20	58:8 61:20 95:12	attempt 63:2 67:8	34:11,14 45:5	150:12 152:14
arouse 92:4	110:17,20 130:15	120:4 122:9,10	46:1 56:19 60:2	157:3
arrest 57:20 58:5	136:14 137:9	attempting 24:15	62:17 67:21 76:12	beginning 119:19
65:6 68:19 71:7	144:2 147:13	attempts 92:7	80:8 81:6,7 84:12	143:24 144:16
71:18 75:15,19	asking 34:7 137:10	109:7	87:19 92:24	begins 143:12
77:15 80:7,23	142:6 143:3	attend 55:25 77:17	102:23 104:16,16	behaviour 66:16
81:21 82:12 83:23	asks 15:17 19:9	83:20 110:17,20	107:4 111:11	belief 3:5 33:14
84:6 86:5 87:12	20:10 22:2 45:6	115:8 122:12	114:15 121:9	74:19 99:14
87:14,18 89:6,9	45:15	128:2 139:9	123:4 125:17	113:10 127:14
89:14 90:15 91:3	aspirated 61:23	140:14 143:2	126:16 139:3	believe 30:19 36:1
91:16,19 92:5,8	aspiration 116:12	attendance 93:24	144:15 145:14	50:5 51:24 52:9
92:10,13,13,17	aspirator 64:8 69:7	129:7 138:2	146:19 147:13	69:8 70:23 71:13
94:5,22 98:8,17	116:11,15 117:3	attended 1:7 49:12	148:10 149:21	83:19 84:25 86:6
101:10,17,24	assembling 71:24	57:4 76:18 78:14	151:11	86:7,16 94:15
102:2 119:23	asserting 153:23	98:12 113:15	backboard 119:3	96:22 98:4 103:14
arrests 98:13	assessed 80:5	127:19,20 128:3	backup 101:22	104:1 118:13
arrival 66:19 67:7	assessment 39:16	attending 78:11	bad 150:23	bend 36:19
68:7 71:21,24	80:6 97:12	80:11 98:8 103:8	bag 60:25 65:19,21	benefit 119:25
72:6 82:6,10	assigned 102:17	126:9 137:3,6	66:1,3 71:20 72:1	152:13
108:3 126:9	assist 60:24,25	138:1	72:2,3 84:20	bereaved 148:5
137:25	65:17 67:16 86:1	attracts 100:9	86:19 106:8	150:24 151:22
arrive 72:8 92:18	assistance 34:7	August 74:15 113:6	bags 27:7 105:1	best 3:4,16 33:13
102:9 129:2	131:24 153:20	115:2	balancing 152:4	74:19 99:13,15
arrived 26:23 27:5	assisted 35:1 63:7	authorities 153:19	banged 12:18 21:12	103:11 113:9
28:6 32:11,19,22	73:14	154:1	BARTON 97:4,5	117:20 127:13
34:11 58:7 61:16	assisting 67:11,13	automated 119:2	98:21 105:15	better 21:20 93:10
66:7,14 67:10,18	assists 106:3	automatically	142:17 152:15	152:12,23 153:7

bevel 69:14,19	43:9 58:9 97:10	22:19,21,23 39:18	butter 92:11 98:10	car 4:16 7:12,16,18
beyond 7:9 37:14	blur 53:17 115:12	39:20 40:2,3	button 129:2	7:20,23 8:22,23
37:16 115:6	board 35:2 100:6	41:25 42:9,13,15	buttons 136:1	11:13,13 13:17
121:11	bodily 98:3	42:20 43:16 45:7	137:2	20:15 25:1 26:20
big 3:7,15 12:20	body 9:5,15 28:12	45:9,10,12,19	bystander 78:2,17	58:12,14 102:6
21:14,17 27:15	30:25 38:24 41:16	46:4,7,12 57:15	78:19 82:20	103:19,21 128:6
45:3 49:24 90:6	44:11 50:21 51:20	66:15 68:4,5	103:23,25	129:4 149:1,5
105:17 124:16	54:3,5,9,15 69:5	81:23 82:23 83:1	bystanders 104:3,7	carbon 71:1,8
bigger 43:25 90:2	69:24 70:9 88:12	83:2,3 89:5,5,8,11	104:13 129:24	96:13 119:3
bile 46:23 47:23	93:16 111:4	91:3 95:10,13		cardiac 57:20 58:5
birth 134:9 135:19	118:12 120:22	97:13	C	61:14 65:6 68:19
bit 4:7 7:17,22 9:7	122:24,25 130:14	breaths 48:4 66:25	c 56:4 68:1 69:12	71:7,18 75:15,19
14:13 25:21,22	131:3,12 133:19	67:6 72:15 84:19	cable 54:4	79:7 80:4,7,22
37:10 44:9 48:12	141:17 151:4,16	84:19	CAD 57:4 58:5	81:21 82:12 83:23
48:20,24 50:4	151:20 152:5,6	Bridge 28:22	call 1:21,23 2:13	83:25 84:6 86:5
53:17 100:13	body's 89:10	brief 80:6 82:19	12:1,10 13:7,8	87:12,14,18,21
105:16 121:2,17	bodyguards 8:5	107:16 121:15	14:21 15:14 24:20	89:6,8,14 90:15
129:5 131:15	bogged 91:21	briefly 49:1 154:24	30:1 32:2 34:6,8	91:3,16,18 92:5,8
135:12	bonus 84:9	brilliantly 24:19	41:18 46:3 57:4,7	92:10,13,13,17
bits 136:5	book 145:15	brothers 155:2	57:9,15,16,17,21	94:5,21 98:8,13
black 32:18 59:1,24	booked 143:1	brought 14:10,11	58:8 77:7,9 78:2	98:17 101:10,17
59:24 139:2	bother 106:18	61:17 93:3	100:22 116:16	101:24 102:2
blacked 7:20	bottle 141:11,13	brow 4:4 6:15,19	118:6 130:6	108:9 119:23
blade 117:8,11,11	bottom 9:6 24:4	6:24 7:9 9:8	139:19,19 140:12	cardiac/respirato...
blades 117:12	36:11 52:23 135:3	brown 58:25	140:15 154:22	77:14
blanket 19:5,8	135:4 144:22	BROWNE 25:8	called 7:4 31:24	cardiopulmonary
blankets 14:10	145:5 148:24	93:21,22 95:7	32:3 38:7 117:6	60:21
29:14	bowed 10:18,19	138:20,21 142:19	138:7 140:2	cardiovascular
bleeding 21:18 44:1	box 77:14 81:1,8	143:6 156:17	143:24 148:17	62:4
blind 50:12	85:19 97:13	157:1	calling 52:6 139:12	care 56:11,15 61:19
blistering 49:5	101:11	Browne's 154:17	139:17	64:7 69:6 85:7,25
bloated 90:5,8	boy 135:17	bubbly 25:18 48:8	calls 56:22 134:3	96:24 108:18
blockages 22:18,21	BP 81:18,18	48:9,18,19	callsign 57:3	109:25 113:22,25
45:18 60:24 91:2	brand 30:8 55:9	buddy 24:13	cameras 8:15,16	114:2,5,10 119:21
blocking 58:17	bread 92:10 98:9	build 58:24 59:22	cannula 61:3 62:1	careful 7:17
blonde 59:15	break 28:19,22	bundle 1:18 2:23	72:19 84:1,4	carried 13:15,18
blood 21:21 49:20	105:19 106:25	4:19,22 14:19	86:14 106:23	61:18 88:4 106:13
49:22 63:1 65:23	breath 10:20 19:2	33:5 35:14 40:18	cannulas 63:9	107:20 108:18
65:24 69:22 73:6	47:25 66:18 86:24	74:13 75:2 95:16	cannulated 61:5,15	carry 42:2 82:14,15
73:12 80:19 81:15	96:14	99:8 104:18 113:4	62:2	107:7 134:2 149:7
81:18 82:2 83:13	breathing 11:22,23	121:20 123:16	cannulation 66:3	carrying 29:18
96:13 120:21	15:2,18 16:9,20	125:25 143:9	capacity 56:14	105:1 118:1
blowing 32:7 46:23	17:3,8,23,25 18:5	145:9 146:10	111:3	cars 134:21
48:18	18:22 19:7 20:5	Burden 95:23	capnography 71:4	case 7:18 13:15
blue 20:11 42:24	20:25 22:3,5,7,9	137:17,19 138:15	117:25	21:9 27:14 30:15

57:17 74:4 86:17 99:2 101:20 102:23 104:25 106:21 108:20,22 112:5 120:1 122:19 128:6 130:14 138:14 141:8 142:14 151:8 cases 114:5 categories 57:16 category 57:15,18 catheter 118:8 cause 29:10 49:2 50:5 91:19 96:25 97:2 106:17 108:24 131:13 caused 67:7 causes 71:7 91:14 cautious 7:22 cavity 64:14 CCP 69:8 85:5 CD 65:20 cease 63:3 ceased 88:16 93:17 119:17 ceasing 110:18 cellphone 136:10 cent 4:15,15 27:19 27:19 55:10 61:25 62:22 120:6 124:22 centigrade 73:11 central 37:20 50:13 centre 23:20 certain 122:6 139:19 certainly 2:10 8:3 25:5 109:22 116:5 139:21 141:2 153:9 cetera 68:6 105:2 chairs 47:14 challenge 88:6 chance 121:9	changed 46:11 80:25 97:21 changes 72:16 81:3 88:1,4 chap 104:8 chauffeur 32:9,14 103:23 104:1,2,12 137:1 138:4 chauffeur/security 3:23 8:5 33:25 check 11:13 17:22 26:21 27:8 40:7 41:15,17 44:13 60:4,17 70:25 83:22,24 84:16 107:17 129:14 142:11 checked 17:8 27:9 31:5 39:13 40:15 44:13 46:13 59:1 60:13,17,19,22 61:10 62:25 68:24 68:25 69:20,21,25 71:8 72:15 111:21 checking 20:24 27:23 31:9 40:1 42:13 43:15,18 44:3 60:13 checklist 117:23 checks 40:14 41:14 41:23 71:10 chef 32:5,7,9 33:23 59:4 60:1 66:20 66:23 67:1,3,6,11 67:13 78:24 86:7 90:11 97:6 124:6 124:20 126:17,19 127:9 137:1 138:7 chef' 138:8 chef's 34:2,3 58:22 104:9 chefs 59:1 Chertsey 56:16,25 57:22 96:6 chest 17:11,13,16	23:21 32:6,8,17 46:19 48:1 58:23 60:1 61:7,22 62:7 62:21,21 64:14 66:22,25 67:1,2,4 67:5,15 70:17,18 70:19 72:9,14 73:1,3 79:7,9 84:23 86:4,9,13 86:18 87:22 104:19 107:14 108:7,11 119:1 136:10,17 child 136:6,7,8,20 137:2,9,13 chloride 61:25 62:2 84:3 88:5 choke 17:19 choking 18:10,20 chords 106:6 117:15,16,21 chronology 2:7 87:20 CID 140:14 149:8 149:16,16 circuit 118:6,8 circulation 62:12 91:4 118:12,21 circumstances 66:12 91:25 119:24 120:6 130:8,19 134:25 139:20 144:8 civilian 1:6 35:5 122:13 Clair-Ford 1:24 2:18,22,23 3:7 24:14 28:15 29:2 29:7 33:24 34:7 34:16 35:7,13,23 38:2 44:9 45:15 48:9 55:3 156:6 clamp 106:7 clarification 40:14 class 37:3	clear 5:5 6:2 27:17 34:2 37:5 51:22 61:21,24 64:5,8 69:7,9 86:4 116:10 129:16 140:8 clearing 117:19 clearly 66:21 103:4 136:25 client 153:23 climbed 58:11 clinical 73:24 99:23 100:1,5,14 111:9 114:17,19,20,21 114:23 clinician 63:14 114:22 clock 107:9 close 8:6 39:24 41:15 59:3 110:2 129:12,13 closer 81:14 clothes 68:13 clothing 39:10 79:21,22 131:15 131:17 club 11:5 CM01 99:18 CO2 93:6,9 118:1,5 118:18 Coach 5:12 6:2 Coast 56:15 74:25 75:3 84:15 113:6 cold 11:17,19 17:10 29:9,11 32:13 43:9 44:20,25 73:11 collapse 66:13 71:16 77:25 100:17 collapsed 1:7 13:4 13:21 15:10 16:19 24:22 27:14 34:19 51:5 66:16,19 77:22 101:15	126:4 128:2 137:24 collapsing 140:10 collar 123:15 128:15 collars 128:15 colleague 80:4 83:25 96:23 105:7 105:20,23 149:5 150:12 colleagues 12:6 94:15 103:8 107:14 collected 58:21 collective 108:13 collectively 93:7 Collwood 141:5 colour 4:20 9:24 20:18 25:17 26:2 43:6 46:11 47:14 47:15 55:7 64:1,2 68:1,11 83:4 91:8 97:9,18,20 138:25 139:3 coloured 59:12,16 59:21 colours 79:22 columns 92:25 Coma 60:15,17 70:1,3 come 4:12 5:23 9:4 12:1 24:13,13,13 24:13 34:14,23 38:9 40:5 41:12 42:3 44:15 48:19 60:11 75:17 87:19 107:4 149:21 151:20 comes 16:4 36:18 72:3 140:24 coming 16:11 18:2 26:12 36:10 41:15 41:22 46:24 49:7 53:9 54:2,25 55:19 146:23
---	--	---	---	---

151:3 commented 97:1 116:20 comments 121:20 common 7:25 101:23 147:18,23 commonly 106:8 compass 5:5 36:12 complaint 77:20 complete 75:8,11 76:8 81:4,7 87:20 95:1 122:2 123:3 146:19 completed 63:12 75:13 76:10 88:14 completely 60:16 70:9 complexion 68:1,11 complicated 145:1 composite 154:10 compression 73:2 108:7 compressions 32:6 46:20 58:23 60:2 61:7 62:8,22 66:22,25 67:2,3,5 67:15 72:9,14 79:7,10 84:19,20 84:23 86:10,18 104:19 107:14 108:11 119:10 compressor 62:21 62:21 73:4 87:22 119:1 computer 57:8 101:4 133:13 concentrate 112:8 concern 49:2 131:14 151:15 concerned 48:22 67:8 concludes 112:12 condition 57:19 66:12 98:15 122:15	conditions 112:7 122:6 confirm 13:22 16:23 71:3 86:4 confirmed 86:3 confusing 52:15 confusion 124:22 connected 51:18 53:22 54:3,11 55:13 61:1,19 conscious 7:25 15:18 16:22 consider 154:8 considered 68:18 71:6 considering 130:10 152:6 consistent 45:1 97:23 121:4 consists 119:2 Constable 123:14 127:16 constant 39:20 consultation 88:9 contacted 63:5 containing 61:16 contains 65:20 66:3 contemporaneous 90:21,24 115:7 contents 33:13 106:20 146:11 continual 39:23 continue 82:21 91:7 121:11 122:14 continued 60:1 122:21 continuing 107:13 contrary 140:13 control 61:6 63:5 65:7 68:20 72:4 98:2 119:6 127:23 130:7 133:10,12 convenient 28:16 cope 13:22	copy 2:15,17 56:8 73:7,9 copying 145:2,24 cordon 151:19 core 62:17 corner 143:17,18 coroner 1:3,19 2:10 3:12 5:8 10:7 18:17 25:7 26:1 28:18 31:13,15 34:16 36:4 43:5 48:14,17 49:22 51:7,11 52:14,17 52:19 54:5,8,11 54:16,19,22 55:17 55:19 56:2,5 59:7 60:8 74:24 83:14 89:15,18 95:18,21 96:5,9 97:3 98:23 99:1 100:13 105:17 107:1,6,10 112:11,16,20 123:7 124:15,24 125:18 126:17,19 126:21,23 127:2,4 131:22 133:3 137:9,13 143:20 145:22 146:1 150:9 152:16,19 152:22 153:2,6,9 153:17 154:9,14 154:17 155:1,6,9 155:11 Coroners' 1:15 correct 3:3,21 4:25 5:19 23:15 28:7 33:18,19 60:11 74:22,23 76:7 78:3 85:16,17 87:23 88:8,15,22 88:23 92:1 97:15 99:11,12,24,25 100:19,21 101:3 104:5 107:15 108:9 109:4,8	113:8,13,14,17,18 113:20,21 114:19 118:14 119:16 121:22,23 123:21 126:7 127:12,17 127:18,20,21 128:24,25 134:14 134:22 135:9,12 135:13 137:8,18 137:21 138:6 146:4 147:11 150:15 corrections 124:2 correctly 154:19 cottage 5:15 6:11 6:13,18,25 14:25 31:25 36:20,21 38:10 57:10 101:9 113:20 countersigned 63:13 couple 84:4 93:14 143:8 course 26:23 27:21 134:7 142:5 courses 114:4 court 2:8,20 3:7 33:3 74:10 75:1 97:6 99:5 113:2 123:13,25 124:22 148:24 155:4 cover 64:13 covered 131:7 CPR 14:3,14 22:11 22:14 23:1 24:15 26:1,19,24 27:6 44:14,15 45:13,16 45:21 46:6 49:11 60:22 61:5,6 62:8 62:19,19 72:5,12 72:14,19,20,21,22 72:25 73:21 78:17 78:19,22,25,25 79:4,13 82:16,20 85:23 88:9,16,21	92:19 97:17,21,24 97:25,25 98:5 104:20,22 105:4 109:1,5 110:18 111:5,21 119:2,8 119:17 120:1,2,3 122:13,18 137:4,7 138:7 Craig 61:16,20 62:1 63:5,12 86:17,22 99:3,7 99:10 113:12 114:20 123:1 156:20 crash 112:4 creating 70:13 Crescent 36:1 crest 37:11 58:12 crew 53:6 76:13 85:1,22 100:16 101:22 113:15 123:3 crewed 57:1 148:17 crews 101:25 120:1 crime 139:13 140:2 140:5,6,7 143:1 critical 60:14 61:18 64:7 69:6 75:19 82:6 85:7 108:18 113:22,25 114:2,5 114:10 119:21 criticising 149:10 cropped 59:20 cross 82:22 93:1 crossed 82:7 97:13 126:17,19 138:8 cuff 65:23 current 79:4 currently 1:9 cursor 129:13 curved 117:8 custody 53:14 cut 8:21 21:13 61:11 77:19 78:7 cyanosed 97:14
---	---	--	---	---

cycled 62:23	dealings 106:10	34:6 36:7 37:8	devices 66:2 111:19	displaced 106:18
cycles 72:9	dealt 150:17	43:5 47:17,19	diabetic 112:6	displacement
cylinder 61:1 65:20	death 89:15 96:25	53:16 59:5 66:6,8	diagnosis 71:17	105:12
D	122:16 140:9,22	66:14,22,24 67:17	91:14	display 57:8
d 68:4 69:20 156:3	144:6,8,11 147:19	68:5,10,21,23	diagram 99:19,19	displayed 57:9,15
D5 143:25	148:8 149:16	71:19 72:11 76:16	102:13,19	disputed 1:13
Da 1:9,15,23 2:5,12	152:11	80:4 84:10 85:21	dial 116:15	distance 58:16
29:11 31:17,20	debris 116:18,24	86:23 87:23 91:8	diastolic 81:19	distinctive 47:5
156:10	118:9	91:13 103:22	died 24:14 31:22	distinguish 131:16
damp 11:18	decapitation 122:7	111:14	122:3	131:16
Dan 58:20 60:13,21	122:16	described 26:15	difference 113:24	distressed 149:2
61:3,25 62:7,25	deceased 2:14 63:6	29:23 30:24 35:19	119:23 120:7,8	diverted 58:2
72:13,18,19	90:7 118:23	36:21 44:9 46:3	122:5	divider 52:17 56:2
Daniel 57:1 74:8,12	133:11 138:8	46:22 48:9 49:15	different 9:14	95:18 143:20
74:15 156:15	141:16 151:10	55:3 66:23 68:9	75:21 111:3 117:9	dividers 95:20
dark 20:9,13 28:8	December 56:11	79:19 96:14 97:10	117:12 150:13	division 144:11
38:16 42:22,25	99:10	98:9 107:22	difficult 21:15	DMP1 125:14
59:11 102:11	decide 142:13	115:20 132:11	51:12 90:7 105:16	137:17
103:1 115:19	decided 127:9	136:18	151:24	DMP2 125:15
darker 14:12	decision 73:19,21	describes 117:10	difficulties 71:22	DOA 82:5 122:4,5
data 142:22	73:22 114:24	describing 8:21	difficulty 57:14	122:9
date 57:5 65:12	118:22,24 120:3	37:6	127:25	doctor 12:5
76:12,22 135:19	121:11,16 140:15	description 7:24	dilated 83:20	document 75:3,6,7
dated 1:18 3:2	151:19 155:5	59:8 66:11 137:3	dilation 83:17	121:24 128:10
31:18 33:11 56:11	deemed 70:2	137:6	dining 31:24	143:11,24,25
65:10,14 74:15	139:22 140:13,21	descriptions	dioxide 71:1,9	documents 148:2
99:10 113:6	defibrillate 65:25	136:24	96:13	154:7
128:11	defibrillator 61:12	despite 70:4,7,10	directed 57:24	dogs 12:20
dates 134:9	61:20 63:9 70:16	destroyed 151:9	direction 5:6 6:20	doing 24:5,19 31:9
daughter 140:10	70:19 87:7	detail 41:18 57:13	37:12	32:6,8 48:3 58:23
day 3:25 8:19 34:4	definitely 64:15	115:5	directions 57:23	67:12 71:22 72:18
38:17 52:11 78:13	92:21 104:8	details 32:22 63:12	directly 35:25	79:1,14 86:11,18
98:16 152:21	deformity 69:23	80:22 88:13 101:8	117:16 118:7	86:18 90:11
153:16 155:16	degrees 73:10	detective 133:23	149:4	105:23 122:18
days 8:19 27:16	deliberate 103:10	140:23 141:5	disagree 12:25	124:24 141:24
DC 137:17,19	104:6	144:9	discovered 63:17	domain 129:16
138:15	deliver 62:22 148:8	determine 57:16	138:4	door 12:18,24 13:3
dead 50:17 82:6,10	delivery 147:19	84:16	discrepancy 124:6	15:5
122:8,23	demanding 104:24	determined 70:4	discuss 153:5	doors 111:2
deal 2:9 21:21 98:7	105:3	develop 121:6	discussed 63:4	doubt 105:3 144:8
117:23 152:24	demonstrated	developing 114:13	64:17 74:4	152:7
154:23	140:13	development 76:17	disparity 127:10	Douglas 123:11,14
dealing 94:5 125:23	depth 67:4	device 73:4 114:9	dispatch 128:18	156:24
148:11 150:13	describe 3:24 9:2	114:16 116:10,14	dispatched 128:15	downhill 37:4
	14:2 16:17 25:25	119:2	134:2	dozen 11:8

Dr 154:15,23	effect 13:6 88:6 154:25	71:3 105:10,21 106:1 118:7	evening 34:10 138:16 148:15	explain 71:9 74:24 82:10
drawn 103:3,9,16 104:3	effective 62:22 89:13 93:5,9	ends 24:20	event 38:7 89:17 98:18 104:24	explained 109:19
dress 59:16	97:17,25 98:5 144:10	engaged 108:5	125:19,20	explicable 140:8,11
dressed 111:14	effectively 78:18 86:2 87:3 89:10	English 52:6	events 28:22 98:8 115:3 139:13,18	explore 142:20
drew 58:15	97:19	enquiries 134:16	Eventually 121:18	extent 71:8 152:10
drips 27:7	effort 81:17	ensure 60:4 61:23 91:6 117:20	everybody 2:17 56:7	external 69:21 140:1
drive 8:8 56:21	efforts 89:10 97:24 114:25	151:23	evidence 1:5,13,14 2:1,2,13 42:14	extinct 76:5 121:21 122:2,11
driver 59:9,18	eight 92:25 146:12	entered 144:3	54:7 55:22,23	extracts 123:22
driving 8:17 57:22	either 62:25 131:6 139:13 155:6	entrance 58:2 103:13	56:13 74:6 91:24	extremely 32:13 94:6
drizzly 4:7	electoral 133:14	entries 128:11,21 134:6 135:15	97:7 98:9 112:13	eye 83:14
drool 25:6,7,8,12 44:9	electric 8:14 12:19 107:23	entry 125:7,24 126:2,2 133:2	115:17 131:11	eyes 60:18 70:4,6 70:12 83:15
dropped 139:25	electrical 70:22 87:1,16 120:17,19	134:11,12,18	142:17,20 147:11	
drug 84:8 86:15,21 106:23 120:24	120:23	135:3,14 145:2,6	151:9 152:3	F
drugs 61:4 66:3,4 85:19 107:12 114:14	element 100:14	145:7,15,20 146:6	153:20,25 154:3,5 154:24 156:14	face 9:10,11,12,20 9:24 20:9,18 21:8
due 1:11 26:23 65:6 68:19 71:15 73:11	email 31:1 53:1 126:12 132:19,20	environment 73:11	ex-military 19:22 41:2	25:13 32:18 39:1 39:3 42:22 43:6 46:11 139:2
98:2 149:8,15	embolism 71:5,9 97:2	episode 86:24 105:3 107:23	exactly 21:15 31:11 119:9 150:2	facilitate 128:6
duly 76:17 133:24	emergency 56:11 56:14,22 57:6	121:4,15	examination 78:8,9 79:11	facing 9:4 58:13 102:19
dusk 4:7,12	85:25 96:24	episodes 120:13	examine 129:12,19 133:19	fact 48:22 50:8 63:4 77:13 86:5
duties 100:10	100:25 101:8	equipment 28:11 58:21 63:7 65:16	example 66:24 68:5 68:10 81:4 115:18	115:15 116:20 120:5 128:10 140:25 142:24 151:3 152:11
duty 113:12 141:2	112:5	65:23 66:2,3	115:25 122:16	failed 119:25 120:4
E	emotion 149:8 151:25	71:24 93:12 114:7	139:25 140:9	faint 17:18,20 20:6 39:24 41:25 42:10
e 68:9 69:25 156:3	emotions 149:11,16	114:15 117:22	141:11	fair 8:9 27:22 37:17 135:24 136:1
earbuds 29:25 30:2 55:5	emphasis 100:13	118:25	excrement 109:21	fairly 37:20
earlier 26:14 129:1 129:5 147:12	employed 56:14	errors 92:14	excuse 132:20	fall 61:22
early 58:24 59:14 59:20 95:11	empty 119:6	essentially 106:7 115:23 118:23	executive 103:21	fallen 9:8 39:7 50:16
earphones 27:4,12 51:22 55:4,12	enable 65:25 117:17 121:16	120:10 122:3	exhibit 73:9 125:14	familiar 108:17 112:2 132:8
125:11,12 132:13	encourage 62:16	128:4 130:6 136:4	exhibits 137:17	family 91:17 152:13
ears 51:22 54:13	encouragement 24:17	established 70:14	existing 61:20	
easier 91:20 145:9	endotracheal 63:9	establishing 72:17	expect 89:5 131:19 142:9	
easy 130:1 141:23		estate 3:20 4:24 8:2 8:10,18 19:18	experience 8:1 34:22 87:15 98:8	
ECG 84:11		33:20 35:15 36:5	140:17 141:21	
edge 60:3 151:18		57:12 58:2,10,11	experienced 71:21	
educated 94:16		estimate 58:3 59:21		
educational 114:3		et 85:11 105:2		
		EtCO2 93:1		
		evaluating 119:22		

fantastic 24:5	136:14	62:18,24 63:8	66:15 78:2,10	gate 57:25 58:1,2,7
far 35:11 68:21	finger 132:3	66:5 84:9 98:3	95:11 113:16	gated 76:17
71:19 73:5 106:11	fingertip 131:9	foamy 48:7	115:12 122:4	gates 8:11,12,14,14
131:3 141:20	finish 24:3 89:7	focus 114:21	141:17	8:18 12:19 35:9
142:24 143:3	107:3 123:4	focused 94:6	foundation 56:16	36:1
fast 68:5 89:12	137:16	149:20,22 150:5	56:20	gather 150:12
FEAR-SEGAL	finished 72:12,13	foetal 136:17,19	four 14:22 16:7	gathered 78:6
29:6,7 30:21	75:15 92:19 123:2	follow 82:13 84:16	24:3 52:23 59:15	88:13
53:13,14 54:25	first 2:6 4:2 12:5,10	136:21,23	99:16 104:6,6	GCS 70:3,13
55:15 124:14	30:24 31:7 32:15	followed 57:23	148:23 149:9	general 111:7
156:8,13	34:20,21,24 35:3	85:14	fourth 147:1	generally 80:24
feature 8:1 51:4	35:3 41:23 43:19	following 31:21	fractures 69:23	102:5 121:14
feel 49:13 120:22	50:23 52:9 56:20	63:25 64:14 70:25	Francois 153:18	generated 70:8
130:22	62:5 72:12,13,16	155:16	free 101:11 112:13	generating 70:11
feelings 50:3	76:1 79:16 80:5,8	follows 64:20	French 128:17	gentleman 90:2
feels 19:13 40:22	84:15 91:5 96:5	food 25:11	129:22 130:2	105:25 110:22
feet 58:25 59:14,14	100:9 101:22	foot 59:22 145:2	148:19,20,20	115:19 117:9
60:3	117:25 122:20,22	force 100:11 139:6	153:21	120:5 122:21
fell 50:18	129:4 130:13	forces 12:7	front 2:23 3:8 4:19	133:15 135:1
felt 32:12 65:5	firstly 102:23	forefront 90:16	15:15 32:15 33:5	George's 3:20 4:24
119:24	fit 19:10 90:9 103:7	forehead 43:23	38:23 58:14 61:12	8:2,11,12 11:4
female 1:22 14:21	fits 116:17	foreign 69:5 106:19	74:13 75:2 95:16	12:12 14:24 33:20
15:3,9,13,19,23	five 5:14 11:24	forever 27:2	99:8 103:25 113:4	35:15 57:12,25
22:4 45:8 148:17	16:16 27:19 30:17	forget 140:21	123:16 134:10	115:16
fetching 108:4	41:1 49:13 59:14	Forgive 29:22	full 2:7 52:8 74:21	getting 4:7 19:8
fewer 153:6	59:14,22 85:4	146:6	130:19	20:15 37:2 42:12
FF 83:9,11,13	114:12 119:20	form 50:1 63:13,13	fulls 25:15	86:4,9,14 93:5
fibre 119:3	five/ten 75:14	63:18 65:10 71:4	funny 136:1	121:9
fifties 59:14	fixed 83:9,10,15,21	75:7,11 76:3,3,4,5	furiously 129:10	ginger 126:11
figure 93:9 110:2	flaccid 70:9	76:5,19 79:11	further 5:20 20:21	138:9
filter 118:9	flat 36:23 67:20	80:8,20 85:2	28:12 29:3 48:6	give 14:13 22:11
final 53:8 73:22	70:21	86:24 92:24 97:11	53:11,12 55:18	24:15 25:4 26:18
92:23 112:21	flatline 87:5,15	108:8 115:6,24	65:9 69:18 87:25	45:13,20 46:6
finally 51:14 65:9	flip 87:16	116:8 117:25	93:16,20 98:22	67:6 72:2 79:5
111:11 144:15	floor 15:15 42:6	120:18 121:22,25	111:4 112:9 114:3	84:9 101:23 121:1
152:9 155:2	103:9 105:25	122:1,2	123:5 131:15	137:4,7 139:2
find 1:17 4:20	133:15 135:23	formed 41:21	138:18,19 146:21	145:11 153:4,25
11:21,24 14:15	138:4 140:1	forward 9:9 38:22		154:3,24
51:17 54:7 63:18	141:13	83:9 133:12	G	given 2:24 28:4
131:20 143:19	flow 60:24 62:17	forwards 69:17	gap 5:25 6:7 35:19	57:23 62:24 70:7
145:6,14	147:11	foul 128:7 130:10	35:19	70:10 73:16 77:17
finding 2:14 29:7	flowing 49:22	found 26:18 27:3,9	gargle 39:19,20	78:4,19,23 79:12
30:24 31:1,2	fluid 61:25 62:6,18	27:14 30:25 31:7	41:16,24 42:12	97:1 101:1,6
120:13 143:14	88:6	51:2,14 52:4,25	gas 118:11	102:4 104:19
fine 76:11 108:6	fluids 61:4 62:17	54:20 59:19 60:15	gasp 10:20	124:8 125:14

127:22,23 136:24 142:21 gives 31:17 56:10 118:12 119:9 giving 23:18 24:24 25:2 26:1,24 44:13 46:19 49:11 66:24 78:25 84:23 106:14 136:7 153:20 Glasgow 60:15,17 70:1,3 glucose 80:19 81:15 83:13 go 3:13 5:20 6:21 10:10,10,10 15:20 16:15 23:8 43:9 75:8 85:22 89:6,8 106:17 112:13 115:16 122:6 131:9 132:4 145:20 146:19 147:13 148:10 goes 75:9 86:20 87:4 96:10 105:8 117:21 119:3,7 going 1:5 6:1,23 7:5 14:14 17:11,16 18:3 19:3 20:21 24:6 36:25 37:6,7 37:13,14 44:24 45:5 47:2,3 54:6 60:8 76:12 82:14 89:17 99:1 104:16 107:2,3,4 111:11 111:23 118:9 120:4 126:16 129:4 133:11 145:22 151:11,25 gold 47:14,14,15,15 golden 59:16 golf 11:5 good 61:22 67:3 78:22,25 79:9 82:20 86:4,12,13	86:13,14 87:17 90:16 91:6 92:15 97:25 98:5 112:12 112:16 141:24 152:20 155:11,12 grabbed 13:17 grade 73:24 114:17 114:23 graded 57:18 gradient 36:24,25 grandad 140:9 Granville 3:20 4:3 5:1,4 14:25 31:25 33:17 36:10,15,16 36:17 57:10 77:4 101:9 126:4 127:19 137:24 grass 9:7 131:6 graze 21:19 43:22 49:18,20 116:4 grazed 9:19 grazes 21:19,22,23 21:24 49:19,25 116:4 grazing 21:21 great 4:8 21:21 green 9:7 36:16 greeny 47:16 48:14 grey 59:6,20 ground 9:22 32:5,6 32:10,18 39:4 50:21 54:22 group 108:14 guard 33:25 guards 8:5 Guedel 60:23 guess 48:2 94:16 guidelines 79:5,6 Guildford 56:17 gurgly 89:11 Gursky 155:3 gushing 116:5 guy 16:11 18:1 19:3 19:3,22 41:2 42:6	H	60:4 116:4 headed 74:14 75:3 76:2 113:5 heading 36:15 headlights 4:14,16 20:16,19 103:16 headphones 29:19 29:23 30:13 51:19 53:22 54:4,12,16 54:17 55:1,3 63:19 132:12 headquarters 101:12 health 1:10 hear 1:5,23 12:16 20:3,22 39:18,25 40:2 43:12 54:2 54:25 85:21 86:23 90:4 97:22 105:16 124:14 heard 2:6 27:24 31:25 40:1 41:16 45:8 84:11 87:22 97:9,20 102:11 104:20 105:6 109:14 113:15,22 114:9 116:3 117:23 118:25 122:20 132:7 135:10 136:25 hearing 1:17 41:24 51:25 143:9 heart 70:15,22,23 81:16 87:3,13 120:19,21,23 heartbeat 14:15 heavily 90:19 91:21 heavy 10:16 Hello 20:22 41:7,8 43:12 helmet 112:4 help 6:16 12:1,6 14:8,17,22,24 20:16 26:1 28:8 34:8 36:4 80:3	88:11 102:15 103:1 113:24 115:25 116:7 124:12 125:18 134:18 135:23 145:10 154:9,12 helped 124:21 helps 96:6 110:9 Heywood 61:16 69:8 71:2 73:3,23 87:9 100:20 108:20 112:22,23 113:3 156:22 hi 41:10,11 high 8:4 higher 35:2 140:22 highest 73:23 114:17,23 highlighting 127:10 hill 3:20 4:5,24 6:15,16,16,19,21 6:22,23,24,24 7:5 7:7,10 8:2,11,12 9:4,6,8,8 10:4,5,9 10:14,23,25 11:4 12:12 14:24 16:18 30:22,23 31:12 33:20 35:15 36:1 36:7,8,9,9,11,18 37:2,9,10,13,14 43:8 45:3 55:16 57:12,25 58:11 79:18 115:16 143:7,8,16,22 145:24 146:3,6 147:16 148:11 156:9 157:2 Hillcrest 5:15 6:11 6:12,18,21,25 7:2 7:6 12:25 13:2 14:10,25 31:25 36:2,3,21 57:10 101:9 103:13 113:20
--	---	----------	--	--

history 71:15 82:19	hundreds 98:12	incidents 139:8	insert 71:20,25	140:4
hit 20:23 21:5	110:1	include 114:5	inserted 69:13 84:1	investigation 130:4
43:14,21 50:21	hurts 152:1	including 66:4	85:11 105:20	142:13 148:9
Hmm 6:6 7:14 10:2	hypothermia 73:10	85:15	inserting 69:15	investigators
10:6 15:22 16:6		incontinence 89:24	insertion 69:12	136:23
16:24 17:6,15	I	109:21	inside 14:24 26:9	invite 154:4
22:10 23:16 26:16	ICE 112:3	indefinitely 119:13	49:19 60:7 64:11	involved 124:11
hold 13:18,19,20	ID 63:18 88:13	indicate 72:21 87:7	68:13,15	128:7,8 130:11
16:9 103:5	idea 19:17	104:13	Insofar 66:7	133:16
holding 10:19 27:7	identification	Indicated 9:23	inspector 140:19	involvement 28:12
holds 66:1	99:18 118:23	indication 83:17	140:23 141:2,6,6	92:3 93:16 111:4
hole-punches 96:1	identified 6:2 35:15	90:19 96:21	144:9	122:24 138:14
96:7	40:18 50:22	indications 110:1	inspectors 140:25	iPhone 27:16 29:23
home 135:7	113:16	individual 8:3	instances 96:20	30:8 55:4 132:8
honest 39:12 53:17	identify 117:15	135:6,19	instructions 22:12	iPhones 55:10
honestly 96:22	133:15 151:20	individuals 8:4	23:1,5,6,18 45:14	63:19 111:19
116:3	identifying 5:20	induce 121:2	45:20,23	132:8
hooked 61:25 62:18	identity 63:17	induced 120:24	instructs 117:18	iPod 55:4
Hoover 116:15	ignoring 134:19	infancy 119:20	instrument 117:6	IPs 154:6
hope 121:6	ill 114:6	infection 72:4 98:2	insurers 154:16	Iris 1:9,15,23 2:5
Hopefully 4:20	illness 49:9 112:1	influence 140:1	integrity 151:6	2:12 31:17,20
hospital 1:10 57:22	illuminate 20:16	information 66:20	intentional 102:22	156:10
hour 32:21 94:25	imagine 98:12	71:11 77:17 78:4	intents 117:1	irregular 89:12
107:11 153:4	Imbrey 77:4	78:5 79:12,17	interested 1:12	Ismagilov 155:2
hours 8:18 58:6	immediate 141:10	80:21 91:22 93:11	2:15 29:4	issue 98:7 108:24
93:14 135:8	immediately 32:3	96:16,18 101:2,6	interfering 133:22	154:23
house 5:9,12,25 6:2	116:6	101:18 127:22,23	intermittent 12:12	issues 97:5 128:4
6:5,9,11 12:10,18	impact 124:20	133:9	internal 22:2 40:19	152:25 153:5,6
12:19,21 15:16	imperative 148:4	informed 62:13	43:13 121:24	items 116:20
29:14 31:22 36:1	impetus 79:9 86:11	initial 50:3 61:10	125:3,24 143:16	IV 84:7 85:16
36:1,10,17 53:7	86:11,14	61:13 64:19 80:18	144:17	104:19
75:22 138:10,10	implemented	81:1 83:22,24	intervening 135:16	
145:18 146:7,13	108:23	85:24 96:21 130:4	intervention	J
146:14,16 147:1,2	important 107:8	initially 39:14 40:4	106:24	jacket 34:3
147:5,6,8,9	impression 50:1,20	57:18 84:10 102:4	intravenous 84:8	James 56:6,13
house-to-house	95:3	118:4	106:22	156:14
134:2,16	inasmuch 79:22	initiate 142:16	introduce 121:16	job 3:22 24:5 33:22
housekeeper 26:15	93:7	injured 114:5	intubated 61:23	75:19 85:24 107:8
31:18	Inaudible 15:10	injuries 9:18 49:17	71:2 105:20,25	110:24 115:8,10
housekeeping 1:4	inch 21:16,16	67:23,24 89:20	intubating 69:10	115:12
152:24 153:15,16	inches 59:15,22	110:7	105:9 117:4	jog 96:17
156:5 157:4	83:12 117:8	injury 49:15 116:1	intubation 66:2	John 95:23
houses 5:24 6:5	incident 3:24 31:22	inquest 1:16 65:14	106:1 117:5	Jones 141:7,8
144:21 146:21	76:17,22,23	153:20 154:3,5	inverting 69:14	Joseph 74:12
147:12	127:19 143:13,24	155:16	investigating 64:18	journey 58:4

judging 135:19	38:7 43:14 45:13	17:13 25:5 32:15	27:8,23 28:3	litres 61:1 62:24
judgment 130:6	45:16 59:7 75:20	39:2 58:15 105:25	30:25 31:3 32:9	88:5
Jumper 136:4	75:22 79:17 81:5	lead 63:14 122:10	32:14,19,23 33:1	litter 111:8
junction 7:7 9:6	84:5,7 85:25	134:25	33:4,9 156:11	little 7:17,22 14:13
June 1:1	86:18 87:17 89:12	leader 99:24 100:1	Liam's 24:25	27:16 45:3 48:20
	91:2 92:9,15 94:4	100:4,13 114:20	licked 47:10	48:24 118:9 121:2
	95:1,12,12,14	leading 71:16	licking 47:6	121:17 129:5
K	98:2,20,24 104:25	leant 38:22 39:1	life 17:19 46:10	136:5
keen 79:2	105:12 107:1	learned 149:4	66:1 68:8 73:16	live 2:6,9 8:1 32:23
keep 2:6 3:7,16	108:10,11,13	leaving 12:17 57:21	73:18 76:5 82:9	74:7
11:4 13:11 75:1	109:20,20,21,23	led 70:23 103:14	85:12 87:9,25	lived 19:18
91:2 99:1 124:15	110:24 112:2	left 4:9 5:2,5,9	89:7 106:13	localised 141:19
131:2 138:24	115:25 116:23	35:10,20,20 36:12	107:13 109:10	located 58:10
143:12 146:8	117:7 120:5	38:17,24 58:10	120:16,16,18	location 76:23
150:22	121:18 122:17	62:1 70:18 74:1	121:21 122:2,11	96:12 145:11
keeping 50:25	127:22 130:19	93:1 103:16,17	129:17	locked 27:9
kicking 111:9	133:10,18 139:5	129:20 132:4,5	lifepac 61:17,19	log 93:13 128:18
kid 47:9	143:2 145:1	136:11	65:25 70:20 84:13	143:13,25 144:4
kidnap 7:19	151:10 153:9	left-hand 4:6 39:1	93:3 118:3	London 28:22
kin 147:20 149:2	knowing 90:6 93:5	39:2 76:22 82:4	light 4:8,15 20:9	long 18:13 24:21
150:1,5,17 151:4	knowledge 3:4	82:22 145:3	25:9 38:17 42:22	25:16 26:24 34:9
kind 9:15,21 13:16	33:14 74:19 99:13	146:20 148:22	102:24 103:18	36:9 39:22 49:11
35:25 36:19 38:25	99:15 103:11	legal 153:24	154:22	49:13 71:20 72:5
50:11,14 115:18	113:9 127:14	legs 14:9 62:16	lighter 102:8	73:20 94:14
kindly 35:13	known 139:24	length 59:16 94:17	lighting 4:11 38:15	111:15 117:8
kit 108:16 114:11	147:19	117:10	50:10 79:24 80:1	139:6
119:22	knows 91:18	lengthy 76:14	80:2 103:2	longer 63:15 107:1
kitchen 32:1	krysha 154:18	let's 4:18 14:17	lights 58:9 147:3	121:25
knee 111:15		16:15 23:4 40:16	limited 80:21 91:22	look 4:18 8:25
kneel 23:11	L	42:2 99:1 118:15	115:3	12:15 13:20 14:17
knees 9:19 10:19	lack 71:15	138:24	line 16:4 17:21	15:20 17:21 26:9
21:23 49:18	lady 12:22 14:9	letter 153:20	64:13 69:19 70:21	26:20 29:12 30:4
110:16 116:4	38:6	level 34:21 35:2	79:12 96:5,11	35:14 37:23 39:6
knew 19:18 27:8,11	Laerdal 64:7 69:6	60:14 73:6 81:13	110:11 147:1	40:16 44:4 52:10
110:22	69:9 116:11,12	114:3 119:9	lines 14:22 16:7,16	55:12 64:25 76:18
knock 32:1	large 76:17 98:14	140:17	24:3 41:1 52:23	87:6 88:2 90:9
knocked 15:4	103:21 120:24	levels 61:11 71:1	85:5 88:17 122:7	95:17 97:11 129:4
know 4:12 7:21	137:2	96:13	146:12 148:23	129:16 131:4
10:19 11:2,3,15	laryngoscope 117:6	liaise 154:6	linked 131:11	132:22 133:19
11:22 12:6,8,16	late 58:24 59:5	Liam 1:25 10:11	lips 69:19	134:5 141:11
12:17 13:14,16,22	law 154:1 155:2	12:7 13:19,20	liquid 47:13,21,22	144:2 145:9,20
13:22 14:2 15:4	Lawrence 95:23	14:3,8,13,15	116:19	148:22
17:18 19:19,20	lawyer 153:18	19:24 21:2,3,8,9	listening 50:10	looked 7:16 10:8
20:23 22:11,14	lay 23:11	21:20 22:15 23:6	115:17 116:8	25:18 32:1,18
25:9,10 26:6,7	laying 4:6 9:5,9	24:24 25:1,2 26:3	literally 41:15	52:2,25 65:1
28:2,16,20 33:20				

68:16 130:13,20 131:3 132:16,19 133:2 136:19 145:15 looking 5:23 18:6 27:1 31:1,3 36:12 37:24,25 69:1 79:11 125:6 126:21 131:11 134:23 looks 16:19 20:9 42:22 119:5 126:24 127:5 128:18 145:6 146:16 149:12 loss 152:2 lost 110:12 lot 8:9 26:6 37:1 52:5 91:20 115:8 lots 91:1 102:3 loud 18:11 loudly 105:18 low 96:13 118:18 lowly 152:25 Lucas 62:20 73:1,3 87:21,22 108:7 114:9,16 119:1 121:16 Luncheon 112:18 lungs 64:13 117:17 118:7 lying 9:2 32:6 38:21 60:2 67:20	male 1:7 16:4,8,13 20:2,12,21 22:8 22:13,17,20 23:7 23:9 32:6,10,14 32:15,20,20 40:19 40:21 41:1,6,9 45:11,15,22 57:14 59:20 96:13 101:10,17 103:9 126:4 127:19,24 129:9,11 135:23 135:24 136:1,10 136:14,14 137:9 137:24 138:4,4,8 male's 32:12 101:14 males 1:24 135:23 man 7:9,12 8:25 10:3,5 13:9 14:2 15:4,14,15 24:22 26:18 27:3 31:22 32:2,3 36:7 37:8 38:14 46:1 58:22 59:3,5,9,18 67:14 79:18 96:12 124:8 124:20 128:2 137:10 man's 26:9 manage 130:3 managed 13:19 133:22 153:23 management 114:21 144:10 managerial 100:10 manned 8:12,18,18 manoeuvre 69:17 manoeuvred 58:16 manual 72:22 manually 108:12 120:1 map 4:18,20,24 5:2 5:9,21,23 35:13 35:15,21 36:12 March 123:18 127:8	mark 43:22 104:1 123:14 marked 5:14 6:18 9:7 marks 67:23,24 104:11 130:16 Martin 141:7 mask 60:25 65:21 71:20 72:1,3 84:20 masking 86:19 masks 65:22 massage 79:7 80:4 83:25 87:21 108:9 massaging 32:8 Masters 114:3 mate 20:24 43:12 43:16 44:3 material 64:24 65:1 matey 20:22 matter 83:8 122:13 127:5 147:18 148:20 matters 150:13 152:24 maximally 83:20 maximum 83:18,24 MDT 57:7 58:4 meal 34:10 mean 13:13 19:10 19:20 38:20 39:24 43:7 45:2 46:11 48:13 49:24,24 51:7 54:5 80:6 81:12 82:18,25 83:22 84:17 85:24 87:2 89:15 114:23 115:25 120:19 122:19 148:7,7 153:6 meaning 154:20 means 57:19 60:16 84:21 106:14 115:8 meant 60:10	133:12 mechanical 62:21 108:8 116:14 120:20,21 121:7 medic 16:12 18:2 medical 12:8,9 13:23 35:4 112:7 medically 34:20,24 medium 59:22 meet 35:7,23 members 11:5 142:6 membranes 64:13 memory 57:4 78:15 92:12 96:17 137:12 151:18 men 137:6 mention 5:1 128:1 mentioned 27:12 27:23 29:15 92:18 98:1 104:23 124:7 131:24 151:7 mentions 90:4 Mercedes 59:12 103:22 message 147:20 148:8 149:17 messages 52:6 messy 116:22 met 38:2 metal 117:7 metallic 47:8 methods 117:19 119:25 metres 58:14 131:5 metronome 61:8 Micheli 153:18,23 microphone 30:1 55:4 microphones 3:8 3:12 mid-clavicular 70:17 middle 34:19 37:21 61:11 80:13 83:12	88:16 103:9 126:10 131:5 mightn't 51:9 mild 73:10 military 16:11 18:1 34:22 milligram 62:6 millilitres 62:6 mind 94:17 136:20 139:1 minded 107:6 minds 127:6 mine 140:15 141:19 141:21 Mintram 61:16 63:12 99:2,3,7,10 99:20 112:9 113:12 156:20 minute 58:3 61:2,9 67:5 79:16 minute's 28:17,20 minutes 38:17 49:14 62:23 63:2 72:14 75:14 79:13 79:15 81:20 84:4 87:25 88:4,22 94:20,21,23 107:3 107:6 109:5 119:12,17 121:13 121:14 122:14 misplaced 106:21 missed 92:24 mistake 64:19 misty 115:19 mix 70:18 105:2 mixture 65:1 68:17 mmols 73:12 mobile 8:17 12:11 27:4 51:18 52:12 52:22 53:14 111:17 124:5,8 125:2,9,11,15,23 141:23 142:10,18 142:22 model 118:3
M				
mac 117:10 machine 65:24 119:8 main 35:9 58:2,7 78:12 84:14 major 110:15 making 1:22 75:18 111:8 118:22,23 119:22 121:11 155:5				

moment 12:23 15:24 20:4 26:4 28:16 29:23 40:5 42:7 53:15 54:1 56:5 75:17 85:21 86:23 151:11	Moxon 25:8 93:21 93:22 95:7 138:20 138:21 142:19 143:6 154:17 156:17 157:1	necessarily 84:5 104:14,25	126:21 133:3	117:18
moments 139:24	MP3 111:19	need 13:4 22:12 23:5 45:14,20 59:7 84:7 102:23 128:4 133:22 138:13 144:20	notebook 123:23 123:25 124:7 125:4 126:22,25 131:22 132:11,22 134:5,11 144:16 144:17 146:19 148:14	objections 55:24
money 154:21	mucous 65:2 68:17	needed 28:8 116:6 130:13	notes 73:8,9 101:20 102:16 105:24 106:11 119:14 120:8 124:24 125:1	objective 84:5
monitor 61:18 65:25 70:20,21 84:11,13 118:1,5 118:11	multifunctional 61:18	needs 23:11	noticed 9:19 58:22 63:23 64:11	objects 2:16 106:19
morning 1:12	muscles 70:10	negative 60:20	noting 75:23	obliged 2:14
motor 60:19 70:10 70:11,12	music 30:13 50:11 51:25 53:18,20,24 54:2,25 132:14,15	Neil 1:24 2:18,22 156:6	notice 21:6 30:2,9 88:24 89:22	obs 80:14
motorcyclists 112:3	N	nerves 12:4	noticed 9:19 58:22 63:23 64:11	observation 65:23 81:9
mount 118:9	N 156:3	Nettlingham 134:1	noting 75:23	observations 75:16 75:18,20,23 80:18 81:4,8 97:12
mouth 14:14,14 24:24,24,25 25:1 25:2,2,4,4 26:1,1 26:9 32:8 44:4,6,7 44:13 46:19,19 47:2,3 48:19,23 49:4 60:6,7 63:24 64:6,12,16,23 65:4 67:9 68:10 68:13,15,25 69:1 69:16 78:17,18,19 78:20 79:5,5 90:11,12 98:1,1 116:18	name 2:20 12:22 19:20 27:10,11 30:24 31:7 33:3 35:18 52:4,7,8,9 52:25 53:1 74:10 99:5,10 113:2 123:13,14 132:18 133:11,25 134:19 135:6 146:7,7,13 146:14 147:1,2,2 147:6,8	never 63:17 136:4 147:13	November 1:18 3:2 3:19,25 31:18,23 33:11,16 52:11 56:24 73:8 74:21 76:16,23 99:23 100:18 113:12 128:12,14	observe 28:21
mouth-to-mouth 79:1,2	names 53:4 134:9 144:20	nevertheless 142:9	nowadays 141:21	observed 87:19
mouthful 48:2	narrowing 135:12	new 96:23	number 1:6 8:11 92:9 93:2 104:14 109:25 114:3,14 117:11 118:13,13 123:15 125:14 135:15	obstruct 60:7
move 32:14 41:18 59:11 62:11 63:7	nasal 65:2,7 68:17 68:20	noise 16:10 17:18 17:25 18:9 39:19 39:22	numbering 144:18 145:12	obstructions 60:5 69:2,4,5
moved 21:8 39:25 50:17 86:15	Nash 55:23 56:6,10 56:13 65:11 74:6 76:13 84:24 87:22 96:3,15 102:10 104:18 116:9 156:14	noises 18:15,20 48:6,7 89:2 109:14	numbers 71:12 94:1,2 99:17 125:6	obtain 117:20 153:19
movement 105:11 106:19	nasopharynx 65:22	noisy 89:11	numerous 148:1	obtained 106:23 132:18 133:7
movements 41:19 46:17 88:24 89:1 109:12	natural 43:7	NOK 149:2		obvious 9:18 69:23 91:19
moving 11:20,21 32:7 135:3	nature 115:8 130:16	non-responsive 60:16	O	obviously 26:17 44:12 52:5 53:18 80:23 82:18 83:23 91:5 92:9 94:12 101:14 102:2,10 104:18,22 106:21 111:1,2,8,9,23 114:12,20 115:5 115:17 116:8 122:19,25 128:8 129:6 135:15
	navy 12:7 34:25 35:1	non-shockable 61:14 84:22	O/P 69:13	occasion 8:23 108:21 121:5 141:1
	near 59:10 136:17	Non-specific 91:9	O/S 77:4	occasions 10:8 140:18
		non-viable 82:12	O2 81:12	occlude 106:20
		normal 65:6 68:18 71:13 73:13 89:13 93:8 118:19	obese 90:8	occupation 31:18 56:10
		normally 4:9 34:15 121:12	object 2:16 56:8	occupy 122:8
		north 36:12,15,24 37:13,14,23,24,25		occur 141:10
		north/south 5:6		occurred 106:2 142:10
		northwards 37:6,7		
		nose 69:15		
		note 3:9 75:23 120:25 125:19,21		

odd 52:6 146:1	operating 57:2	45:6,22 52:10,13	100:7 112:21	password 132:2
odour 47:5 64:3,4	operation 58:1	52:20 63:21 75:9	113:22,25,25	patched 57:7
odours 26:12 53:9	opportunity 28:20	76:1,2,19 77:13	114:1,10,14 115:9	patent 61:21 86:3
89:22	56:8 153:4	80:9,11,13 83:8	122:13	patient 15:2 58:5
OE 78:8	opposed 104:14	83:12 85:2,4	paramedics 26:23	58:10,15,16,22
officer 64:18,20	opposite 12:18	88:17 92:24 95:17	27:5 28:6 32:18	59:4,10,17,19
95:23 138:21	35:19,25	96:1 97:11 99:17	35:2 40:11 45:23	60:2,15 61:3,6,15
139:7 140:4,17,18	oral 65:7 68:20	99:17,18 103:17	48:25 49:12 56:19	61:23 62:4,11,13
142:13,15 143:8	orange 69:13	104:17,17 105:7	61:19 92:6 128:3	62:14,23,24 63:4
143:11 144:3,15	order 68:22 82:13	109:2,2 110:9,12	129:6 133:20	63:6,8,12,17 65:6
145:10,14 147:18	107:16 117:20	110:13,13 111:12	paramedics' 93:23	66:17 67:9,14,15
148:17 149:5	124:12 133:14	118:15 121:20	park 102:22	67:16,20 68:3,7
151:2	146:2 154:25	125:3,3,17,22,24	parked 58:12 59:10	68:19 69:10,23
officers 63:11 74:4	ordinary 91:10	125:24 126:1,2,10	80:1	70:2,4,6 71:3,14
95:5 96:19 139:13	98:17 141:9	126:22,23 132:23	part 9:6 37:17	71:25 72:2,17
141:25 142:8,8,18	orientate 143:12	134:10 135:3,14	57:11 71:17 76:3	73:10 75:7,8,22
Oh 129:10 136:25	145:10	143:9,15,19 144:2	79:3,4 85:23	76:3,18 77:11,22
152:13	orientated 5:8	144:3,17,18,25,25	93:23 100:16	78:14,15 80:5,8
okay 3:11,17 6:16	original 66:9	145:3,5,12,14,15	114:24 117:5	80:12,18 81:3,5
11:16,16 12:1	123:25 134:11	145:20 146:9,20	118:21 121:11	82:4,17 83:6
14:20 15:2,24	oropharynx 65:21	146:20,24,25	130:10 131:7	84:10 85:2 86:5
16:9,15 17:22	69:1,18	148:11,14,22	133:21 151:21	86:24 87:20 88:13
18:22 20:21 22:1	Ottershaw 56:17	pages 76:1 99:16	particles 25:10	88:13,25 92:24
22:11,25 23:11	outfit 34:2	113:7 123:20	particular 26:12	94:6,6 97:9 98:15
24:5,9 29:5 36:9	outside 6:17 13:4	126:24 143:25	57:17 66:14 68:23	106:4,9 107:19
40:16 42:1,20	15:20 31:22 32:5	148:10	92:2,5 109:14,18	109:10 112:6,6
45:13,20 55:21	59:13 77:4 101:9	pagination 143:16	112:8 144:16	115:5,24 118:20
78:10 79:21 81:22	outstanding 153:5	pain 60:19	147:9 154:20	119:4,24 122:3,8
88:20 104:16	overflowing 116:24	painful 70:5,7,11	particularly 109:23	patient's 57:19
114:1 134:9	overlap 94:13	pair 59:24 111:15	120:24	60:4,17,22,23
old 42:17 121:25	overriding 92:12	pale 9:25,25 10:1	parties 153:1	61:10,11 62:1,2,3
olive 59:21	oxygen 60:24 61:1	11:9,10 68:3 83:4	parts 119:3	62:16,25 64:9
once 7:1,5 58:7,10	61:2 65:20,22	83:5 97:14	Pasley 123:10,11	68:25 69:5,8,15
58:11 62:19 63:3	72:2 81:13 106:3	panel 119:6	123:14 137:16	69:16,24 70:8,17
71:2 93:4		Panfilova 154:15	156:24	70:23 71:16 72:19
ones 27:15,16	P	154:23	pass 8:13 18:3	73:12 105:9
111:16 125:13	pace 51:7	paperwork 95:2	19:22	110:16
onwards 141:19	pads 61:12,20 63:9	123:1,3	passed 57:13 71:10	patients 66:1
OP 60:23 69:16,18	70:16,19	paragraph 52:10	96:18 98:3 106:5	pause 125:3 149:4
71:25	page 4:20 14:21	52:21 104:21	133:10 139:9,23	149:9
OP/Guedel 69:12	15:1 16:5,7,7,15	110:9,11 111:14	139:25	pauses 107:16
open 61:11 111:12	20:3,3 22:1,2,25	paramedic 1:6 35:5	passenger 59:13	pausing 53:23
opened 111:1	23:4,18,18 24:12	56:23 57:2 64:7	passes 139:18	130:25
opening 69:1 70:4	29:12 40:19,20,20	66:4 69:6 74:22	passing 58:19	pay 154:21
opens 110:23	42:5 43:13,13,13	85:7 91:23 100:1	117:15 139:24	PC 32:22 77:20

123:10,11 128:17 129:22 130:2 137:16 148:18 149:1 150:7,8,10 151:1,12 156:24 PE 71:15 PEA 62:14 86:25 86:25 107:23 120:13,17 121:4,7 121:10,15 peaks 36:19 pearlescent 59:12 penultimate 111:14 people 7:20 8:6 11:3 66:8 79:17 82:19 94:10 95:9 102:4 114:6 130:3 141:22,24 142:2,3 142:4,11 percentage 81:12 Perepilichny 29:8 29:18 65:18 66:15 66:24 67:11,18,22 68:4,22 73:15 84:24 97:10 113:17 132:21 133:18 153:25 Perepilichny's 63:24 64:6,12,15 64:23 65:4 66:12 68:1,10,12,24 69:25 70:15 71:1 73:6 95:10 perform 67:15 performed 71:10 92:14 138:7 performing 67:1 72:20 98:1 104:19 performs 97:16 perfusion 86:13 period 53:15 135:16 person 2:15 4:10 5:21 30:24 56:20 66:23 88:14 91:18	97:18 98:3 102:5 111:25 113:16 131:16 132:5 133:21 138:22 139:23 141:12 150:24 personally 107:25 108:17 133:16 personnel 129:15 persons 1:12 29:4 104:15 perspective 91:24 92:6 perspiration 10:16 11:18 Peter 132:20 Peter's 57:22 Phil 85:25 86:8,18 94:25 104:22 116:9 Phil's 84:12 Philip 55:23 56:6 56:13 65:11 74:6 156:14 phlegm 60:10,11 64:21,22,22 65:5 68:16,18 109:22 phone 12:11 14:5 23:17 27:5,9,9,24 27:24 28:4 29:17 29:20,22 30:4,6 31:1,3 32:5,13 34:6,17 41:14 54:5,9,18,19 55:12 111:21 124:21 125:15 132:5 133:7 phones 29:17 51:18 51:20 52:2,2,12 52:22 53:15,16 54:23 55:7,9 111:17 124:5,8,17 125:2,9,23 126:11 131:23 132:2,12 132:16 137:19	138:9,15 141:23 142:10,18 photograph 142:23 photographs 93:24 95:5 141:22 142:3 142:4,24 143:3,4 photos 142:7 physically 62:9 90:9 104:24 105:3 111:23 physique 59:23 pick 148:11 picked 93:7 picking 136:5 144:1 picks 137:2 pictures 141:24,25 142:11,18 piece 43:25 55:22 108:16 114:11 118:25 119:21 pieces 72:3 114:7 114:15 117:22 place 35:24 54:22 63:10 71:4 86:20 106:7 108:1 placed 39:6,8 plain 39:11 plainly 150:24 plastic 30:16,19 72:4 play 128:7 130:11 players 111:20 playing 30:13 132:14 please 2:21 30:23 33:3,6 63:25 64:14 66:8,11,22 66:24 67:17 68:5 68:10,21,23 71:9 71:19 72:11,21 74:11 75:1 95:17 99:2,6 113:2 123:13,17 139:16 143:10 144:2,15	144:25 145:20 146:9 148:10,12 148:23,25 149:7 150:6 pleura 60:6,9 64:11 64:12,20,22,25 68:15,16 plug 119:12 plugged 63:20 plunger 119:5 plus 41:24 pluses 104:6 pm 31:24 56:25 57:6 63:15 74:1 112:17,19 135:14 153:12,14 155:15 PNI 73:10 pocket 28:2 point 9:18 14:11,15 26:9 37:16 40:8 43:18 46:6,9 72:18 86:1,6,16 89:15 92:23 101:6 111:20 114:19,21 115:23 123:2 124:4 pointed 21:9 pointing 69:14 points 44:15 police 28:4 32:22 53:6 63:6,15 68:14 74:4 88:9 88:12 92:18,22 93:13 94:1,11,11 94:14,16,19 95:4 95:23 96:20 99:18 100:11 110:17,20 111:5 123:14,15 123:23 127:16,17 128:2,6,11,18 134:21 142:7 143:13 147:21 148:1 150:23 151:2,23 152:2,10 policeman 96:22	policemen 94:24 policy 139:12,17,21 139:22 140:16,19 148:1,2 poor 79:25 115:20 position 9:9,13,22 14:9 17:14 38:20 38:23 39:7,9,17 50:15 51:8 67:18 136:17,20 140:12 positioned 50:23 possibility 122:17 possible 52:16 67:17 133:12 147:21 148:6 154:10,11 possibly 66:20 103:21 111:6 145:25 potential 91:1 140:7 potentially 81:5,7 82:18 117:19 120:2 132:7 pouring 49:20 practice 93:23 102:7 121:1 140:16 precise 37:22 75:24 Precisely 153:8 prepare 72:1 preparing 34:10 presence 65:3,5 68:18 122:3 present 26:18 58:18 66:6,8,13 70:9 71:11 88:4 102:10 presentation 82:5 presented 61:13 Presenting 77:20 press 129:5 pressing 129:2 pressure 65:23 81:18 82:2
--	--	---	---	---

presumably 7:13 39:13 43:19 78:4 79:14 80:5 83:6 110:1 131:11	153:24	pulseless 62:14 87:1,16 107:23 120:17	120:12,15 139:15 148:15 150:2	81:6,6,11,16
presume 82:5	profile 8:4	pumping 120:20,21 120:23	questions 2:19 29:3 29:6 30:22 32:4 33:2 53:11,12,13 55:16 56:3 63:21 63:25 64:14 65:9 65:12,13,14 74:9 93:20,21 95:8,12 95:14 97:4 98:22 99:4 112:10 113:1 123:5,12 138:18 138:19,20 143:7,8 144:1 147:17 152:15 156:7,8,9 156:12,13,16,17 156:18,19,21,23 157:1,2,3	ratio 66:25 72:14
pretty 6:18 12:18 51:3 122:7	prognosis 87:17	pupil 83:9,13,16	quick 13:21 19:23 34:18 41:3 129:4 129:13	reach 91:14 154:11
prevent' 58:18	programme 119:21	pupils 83:20	quicker 152:10	reached 129:6
previous 122:1	progress 128:1 152:20,23	purely 103:6	quickly 32:11 148:5 149:14	reaction 83:9,13
previously 64:17 109:19 122:4	projectile 26:7	purple 59:12	quite 6:22 7:4 8:9 36:9 37:1,1,3,5 39:24 47:14,15 48:7 50:9 51:12 96:20 107:7 111:6 116:19,22 124:14 124:17,19 139:1 141:24	read 2:5,7 23:4 31:16,20 56:1,13 76:14 134:8 138:13 144:20 148:23,24 149:20 149:22 150:6 154:5,8 155:7 156:10,14
PRF 85:1 90:22 108:25 109:3	pronouncing 122:23 154:19	purpose 82:11 151:21	radios 129:2	reading 55:24 93:1 93:6,7 118:18,19 134:8
primary 65:19 84:5 97:12	properly 42:13	purposefully 80:1	rain 11:18	ready 62:11 153:10
primitive 116:14	properties 5:14 35:20	purposes 2:11 72:4 117:1	raining 44:21	real 152:4
principal 7:19,25 8:7	property 3:19 4:4 5:14,17 6:17 13:19 27:3 31:24 32:10 33:17,24 35:8,9,18 36:23 51:14 144:23	pushed 69:17	raise 14:9 62:16	realistically 49:14
principals 10:9 34:11	proposal 2:5 154:10	put 8:22 11:17 13:17 15:25 39:17 42:14 44:14 80:22 82:9,22 85:18 89:17 107:22 108:25 109:24 110:2 117:23 133:11 136:22 154:10	rank 140:17,23	really 10:14,15 20:8 42:21 79:2 80:22 82:11 87:10 90:8 92:11,17 93:11 94:5 132:5 141:14 155:4
printout 57:3 58:6	propose 31:16	putting 152:25	rate 23:24 61:7	rear 62:10
prior 60:13 66:19 67:7 108:2 135:1	proposed 154:22	Q		reason 101:22 103:6 119:18
private 3:19 33:17 33:23 57:12,24 103:19	protect 58:17 60:23 152:2	qualifications 56:7 56:21		reasonably 148:5
privilege 153:24,24 154:2	protecting 128:5	qualified 56:19,21 57:2 61:3		reasons 87:11
probable 142:10	protection 154:21	quality 67:3 78:22 120:2 141:24		recall 18:13,15 20:18 21:1,3,5,24 22:22 23:2 24:1 25:3 26:11,12,23 38:15 42:11 43:3 43:6 44:22 47:24 51:24,25 53:2,8 55:6,7,9 64:1 67:22 73:5 74:1 79:23 89:21 91:11 93:14 95:6 104:8 109:15,16 111:10 111:17 115:15,18 116:2 132:14
probably 3:13 4:15 7:4 11:8 21:15 49:13 50:19 81:13 92:20 93:10,10 94:18 108:12 110:2 115:10 121:1,11 152:25	protocol 82:13 84:16,18 86:11 122:14	quarter 21:16		
probe 65:23 118:10	protocols 84:14	query 77:24 154:16 154:17,18		
problems 1:10 49:4	prove 131:14	question 30:23 53:8 63:22 64:5,10,24 65:3 66:6,11,22 67:10,17 68:21 70:14,25 71:8,19 72:5,11,21 73:1,5 73:14,19,25 87:8 90:8 92:23 93:22 104:1 107:21,21		
procedure 71:22	provide 62:3 114:13			
procedures 40:9	provided 67:3 72:10 73:7 109:25			
proceed 2:17	providing 61:1 108:8			
process 106:2	prudent 153:3			
produced 128:10	public 142:6			
profession 35:4	pull 4:22			
professional	pulmonary 71:5,9 97:2			
	pulse 14:16 40:7 46:13,15 81:6,16 81:17,25 120:22			

139:8 154:16 received 57:6 76:16 77:9 96:18 100:22 101:8 131:24 153:21 155:3 receiving 34:6 recognise 80:7 122:1 136:24 recognition 8:15,15 76:5 121:21 122:2 122:11 recollect 12:3 21:15 21:25 30:20 31:8 48:12 79:18 recollection 14:18 16:25 18:25 19:15 27:17 30:25 37:15 41:13 76:12 115:3 115:6 record 63:13 75:17 78:10,12 80:20,23 80:25 90:24 115:7 134:20 148:25 154:8 recorded 75:16 79:13 81:14 118:13 136:5 recording 3:13 80:21 records 133:13 recovery 9:9,13 17:13 38:22 39:9 39:17 red 5:9 6:3 43:7 49:19,22 57:18 reduce 120:3 refer 66:9 reference 27:24 64:10 85:14 124:5 132:7 referred 64:24 105:10 114:10 referring 35:18 84:12 101:7,13,14 101:19 102:16	115:24 125:13 135:6 reflect 144:12 reflection 145:24 reflexes 70:9 refresh 57:4 regard 98:17 130:7 regardless 82:17 131:23 registration 8:15 Regrettably 98:12 regular 18:23,24 regularly 42:20 50:9 relates 97:13 104:11 relation 31:21 35:8 36:8 37:9 133:13 relaxing 37:3 relaying 23:1 45:23 released 24:24 remained 53:6 63:10,14 93:13 120:9 123:3 remember 3:7 12:21,22 17:16 20:15 21:20 24:23 25:14,16 26:2,3,5 27:1,18 31:6 34:10 39:10,11 54:8,12,14 55:5 55:14 64:2,4 66:9 66:17,19,21 67:13 69:4,10 71:12,17 72:7,9,24 74:3,5 78:24,24 79:25 80:1 86:7 89:25 90:2,5,6,11,12,13 91:8,9 92:8 94:4 94:10,11 95:15 96:15,17,20,22 98:5 109:23 111:22,23 124:9 129:9 131:2 132:3 139:1 143:1	remembered 116:3 remind 139:6 reminded 20:17 reminds 19:16 remove 88:12 116:18 removed 62:10 63:8 69:2 removing 111:8 replies 15:9 report 75:7 76:3,16 76:19 80:8 85:2 86:24 87:21 92:24 115:6,24 116:8 125:17 126:4 136:22 137:21,24 138:16 request 154:22 requests 153:18 required 14:22,24 63:16 rescue 66:25 67:6 residence 57:25 residents 58:1 resourcing 130:2 respect 2:1 28:22 153:24 respectively 1:25 respiration 81:10 89:13 respiratory 81:6,11 81:17 101:10,17 responded 57:17 responder 56:20 responding 63:4 response 48:4 57:7 60:14,18,18,19,20 61:10 70:6 73:2,4 73:15,17 102:6 141:6 responsible 144:10 responsive 20:22 42:7 43:12 46:12 responsiveness 70:1	resps 81:9 rest 20:1 104:23 138:13 restore 97:18 result 57:19 111:1 resume 28:23 resuscitated 133:19 resuscitation 60:21 63:2,3 67:8 79:1 82:6,14 84:14 91:25 92:7 93:17 114:2,6 118:24 119:25 121:12 122:5,9,10,21 128:1 resuscitations 115:9,11 resuscitative 109:7 109:25 114:25 retain 151:23 return 62:12 returned 53:7 62:13 134:20 returning 118:12 149:1 revealed 141:18 reversible 71:7 91:14 reviewed 155:5 rhythm 61:13,14 70:15,23 72:15 84:15,21,22 87:5 88:1,4 89:13 107:17,21 120:9 121:7 rhythms 87:6 121:3 right 3:20 4:23 6:14 7:8 10:5 13:25 20:23,25 22:11,18 28:5,18 31:10 34:25 36:9 36:18 38:23 40:12 40:20 43:14,16,19 45:13,18 50:22 51:2,2,5 52:14,15	52:20 54:19 58:13 62:2 70:17 76:2,6 76:15,19 77:6,10 77:12,25 78:1,21 79:4,8 80:11 81:10 82:16 83:3 83:7 84:1 85:3,8 85:10,13 87:24 88:2,7,15 94:3 97:7,14,17 99:17 100:20 101:24 102:20 103:24 104:4 112:12 113:11 114:18 119:1,10 123:19 123:24 125:6,10 125:12 126:5 127:2,3,11 128:20 129:25 130:1 132:1,4,4,23 133:8 134:4,17,19 135:18,22 136:2 136:10,14,18 137:10,11,14,15 137:20 138:12 140:14 144:21,23 144:24 145:12 146:18,22 147:4,7 147:9,10 148:16 148:19 151:14,17 152:7 155:9,12,12 right-hand 6:1 37:20,22 50:11 143:17,18 144:22 rigid 116:17 ripped 35:14 rise 61:22 86:4,13 153:3 risk 94:9,9 98:2 road 1:7 3:20 4:1,2 4:3,6 5:1,1,4,22 7:12 9:3 13:21 14:25 15:5,10,15 16:11 18:2 24:23 25:5 31:25 32:11
---	---	--	--	--

32:21 33:17 34:19 35:10 36:15,16 37:8,19,21 38:10 38:14,19,20,21 50:8,9,9,12,13,23 51:5,8 56:17 57:10 58:13,15,17 60:3 77:4 78:16 79:18 101:9,15 102:21 103:10 113:16 115:19 126:4 127:19 131:6,15 137:24 141:16 Robert 113:3 role 56:18,22 76:5 88:14,17 100:9,10 roles 100:4 105:4 roll 17:22 46:1 133:14 rolled 23:15 118:2 rolling 14:2 room 3:15 105:17 124:16 127:24 130:7 133:10,12 rotate 62:8 rotated 62:19 69:16 rotating 84:23 roughly 35:11 42:17 139:8 round 8:17 36:19 62:5 72:12,13 131:3 route 131:16 Rule 1:15 2:12 56:1 154:5 Rules 1:16 run 6:17 9:5,7 10:14 37:1 44:24 50:4,6,9,9 92:7,11 119:11,12 runner 16:18 running 10:4,5 11:7 12:17 15:11 19:19 25:13 37:4	42:6 43:8 45:4 50:18 59:23 66:18 79:22 91:22 119:11 runs 10:11 143:25 Russian 31:7 52:5 53:1,2 <hr/> S <hr/> sadly 133:18 saline 66:4 saliva 25:19,20 44:10 65:1 68:17 saliva-like 48:9 samples 118:11 sat 75:21 118:19 satnav 57:24 sats 65:23 Saturday 31:23 33:16 56:24 save 129:10,17 saw 4:1,5,10 7:9 9:2 32:2,5,7,15 64:15,22 97:10 116:25 134:21 142:1 saying 15:8 21:2,3 31:6 77:24 says 5:12 12:25 14:24 15:3,9,12 15:13,23 16:8 20:7 31:19 41:1 45:8 56:12 60:9,9 65:13 68:14 80:13 101:13 103:25 110:14 126:13 146:14 scale 60:15,17 70:1 70:3 103:4 scanning 20:1 scenario 102:3 104:24 105:13 109:19 scenarios 92:12 scene 20:16 41:12	42:3 56:20 58:17 61:17 63:7,11,14 66:7 67:19 71:11 72:8 73:24,25 74:5 77:11 78:4,6 80:11 82:19 88:10 88:12,21 91:24 92:18 93:13,24 95:10 100:17 102:9,15,20,25 108:2 113:19 114:17,23 122:20 122:22 123:3 127:25 128:5,19 133:21,24 140:3,6 140:6,7,25 141:25 142:12,25 150:13 151:6,18,20 scenes 139:12 140:2,5 143:1 scheduled 1:8 scoop 62:11 score 70:5,8,11 scores 70:13 scratch 21:12,13 screen 30:4 57:9 72:16 screens 111:21 scuffs 50:18 search 131:8,8 141:9,10,18 searches 131:9 133:13,16 SECamb 74:22,24 99:24 second 12:15 18:14 19:4 28:10 51:4 59:3 61:15 72:6,8 72:22 81:7 85:1,2 85:22 98:7 100:16 113:15 126:2 146:16 secondly 102:24 154:15 seconds 57:6 58:3	67:2 71:23 72:1 83:24 100:24 secretions 65:8 68:20 69:9 90:10 91:11 109:18 116:7 section 83:1 secure 61:24 secured 105:8 106:7,15 secures 106:5 securing 105:11 security 7:25 8:9 8:16,17 58:7,8 see 1:18 2:24 5:1,5 5:8,12,14,21,24 6:24 9:18,20,24 10:14,25 14:21,22 15:6,15,21 16:5 17:5 19:22 20:2 20:25 22:18,21 23:19 25:10 26:21 26:22 30:15 33:8 35:10,16,21 36:12 36:17 38:17 40:1 41:1 43:16 44:6 44:10,17 45:18 46:3 49:17,19,20 49:22 52:23 58:12 58:14 60:8 67:6 72:16 74:14,15 75:3 76:22,24 77:14 78:17 80:11 80:13 81:9 82:4 83:22 85:1,5,14 87:21 88:16,18 89:20 90:10 92:2 93:13 95:4 96:2,6 99:9,16 102:19,21 103:8,13 104:3 106:8,11 109:2,10 113:5,19 119:14 119:22 120:7 123:17,22 125:7 125:24 128:7,11	128:12,21 130:23 134:5,12 136:7 141:14 142:4 143:5,11 146:12 147:6 151:4,16 seeing 24:23 69:4 seemingly 110:24 seen 7:12 10:3,4,5 11:6 19:19 41:19 51:11 76:1 108:25 126:12 131:22 132:12 134:11 135:10,23 138:10 150:7,10,18,19 seizing 124:5 send 101:24 102:7 senior 114:22 133:23 sense 39:21 115:13 147:18,23 sensible 142:16 sent 10:11 65:13 128:19 129:24 sentence 96:2 separate 76:2,4 separated 72:3 sergeant 100:11 133:24 134:1 140:19 sergeant's 151:19 Serial 80:13 81:4 series 128:11 serious 1:10 served 12:7 service 1:21 14:5 14:22 15:1,9,12 15:17 16:15 17:24 19:9 20:2,10 22:2 22:6 24:4,8,18 41:4,8 42:8 45:6 56:6,16 74:25 75:4 84:15 113:6 151:2,12 services 96:24 set 26:21 61:8
---	--	--	--	--

62:15 66:11 140:3 sets 65:14 seven 8:19 severity 82:4 shading 5:10 6:3 shallow 6:22,24 7:5 68:6 shape 117:11 shed 102:24 shift 56:25 123:4 shining 20:18 103:18 shirt 61:11 136:1 137:1 shivering 19:14 40:23 shock 87:7 shockable 84:21 shoes 59:25 111:16 shook 11:17 shopping 135:7 short 28:25 53:15 58:16 59:20 66:18 96:14 107:19 153:13 shortly 24:6 shorts 59:24 111:15 shoulder 59:15 shoulders 129:14 shouted 32:2 show 46:9 58:5 68:8 73:15 showed 70:21 81:22 shown 71:13 143:9 144:7 sick 47:18 sickness 100:10 side 4:6 6:1 9:15,21 23:12 25:13 32:16 37:21,22 39:1,2 50:11,13 54:18,20 58:13 60:6 63:24 65:20 68:9 76:22 78:16 82:4,22	103:7,7 104:3 131:6 144:22 145:3 146:20 148:22 sides 130:4 sign 87:9,10 120:16 120:18,18 signal 12:11 signalled 129:1 signature 65:11 76:8 signed 113:7 121:21 122:25 significant 90:13 90:14 94:10 109:15 significantly 80:25 90:5 signs 17:19 46:10 46:12 60:14 68:8 69:20,21,23 73:16 73:17 81:22 82:9 89:7 92:2 109:10 110:7,15 116:1 120:16 130:21 silence 28:17,21 Silva 1:9,15,23 2:5 2:12 29:11 31:17 31:20 156:10 similar 25:19 47:6 47:13,15 77:18 100:11 131:18 154:21 simple 138:24 simply 2:8 9:14 51:4 142:16 sinister 154:20 sink 119:6 sir 1:5,20 2:4 28:16 31:14,16 32:23 55:16,22,24 56:9 60:12 65:9 74:6 98:22,24 105:15 112:21 123:10 124:9 125:1 127:1	127:12 129:8 131:13 132:6 137:12 138:17,23 139:11 142:4,17 152:15,18,20,24 153:3,11,16 154:15 155:3,10 sirens 58:9 site 94:23 situ 151:4 152:5 situation 26:22 102:8 135:1 136:18 139:15 140:3 151:25 six 85:15 120:25 size 43:24 69:13 83:16 sizes 117:9 Skelton 153:16,18 154:13,15,18 155:2,8,10,13 skill 100:5 skills 92:14 skin 49:7 59:21 68:2 skipping 135:15 slight 36:25 110:15 slightest 144:8 slightly 36:25 37:20 37:22 43:25 46:11 75:21 77:19 129:1 140:22 slim 58:24 slow 20:8 42:21 Slowed 4:8 slowly 148:24 small 21:12 26:8 48:2 49:24 57:13 58:11 60:5,6 63:23 64:11 68:15 118:11 smaller 69:15 smell 68:12 smells 26:12 53:9 89:22	smooth 92:13 smoothly 92:7 SOCA 139:19 socks 59:25 SOCO 139:17 140:12 141:9 142:5,8 sodium 61:25 62:2 84:3 88:5 soft 18:11,12 soiled 90:19 91:1 solicitor 65:13 solid 47:13,19,20 116:20 somebody 7:19,21 12:9 13:4,14,21 83:23 89:5 91:18 124:17 137:13,14 144:3 somewhat 38:22 soon 18:3 148:9 sorry 15:8 25:12 26:11,14 35:24 37:22 44:7 47:4 52:13 53:19 55:14 83:11,12 89:8 90:23 100:24 103:21 105:19,22 110:12,19 111:11 118:16 125:18 126:18,22 137:5,9 139:3 143:14 149:12,12 sort 4:9,15 5:9 7:17 11:15 12:15 14:8 29:25 30:6 34:14 35:4 47:6,8 50:7 50:17 54:18 86:19 87:4 89:10 90:7 92:16 94:9 100:11 101:11 103:4 104:1 105:2,12 106:19 107:19 110:23 111:7 114:12,21 117:10	119:7 132:2 141:9 sorts 133:14 sound 18:10 41:16 42:12,15,16 89:11 sounded 41:25 sounds 89:3,4 south 4:3 5:7 6:1,19 6:25 7:1,6,10 36:13 37:23 South-east 56:15 74:25 75:3 84:15 113:5 SP 81:12 space 103:7 speak 11:16 18:16 18:18,19 38:6 100:12 129:24 135:16 speaking 1:12 59:4 80:24 96:3,22 105:18 speaks 105:15 special 12:7 specialises 114:1 specialist 114:1 specific 114:7 specifically 114:4 154:23 speech 60:18,20 speed 67:4 speeding 61:4 spelling 64:18 split 130:1 spoke 11:15 29:7 40:13 48:25 49:1 59:17 63:11 74:2 122:4 spontaneous 62:12 spook 73:25 spot 21:11 50:12 spotted 21:10 spouse 149:25 150:3 152:11 square 131:5 squeezes 84:20
---	--	---	---	--

St 1:24 2:18,22,23 3:7,20 4:24 8:2,11 8:12 11:4 12:12 14:24 24:14 28:15 29:2,7 33:20,24 34:7,16 35:7,13 35:15,23 38:2 44:9 45:15 48:9 55:3 57:12,22,25 115:16 156:6	stated 96:11 statement 2:5,12,24 3:4,18,24 4:1 13:11 27:23 28:3 31:16,17,20,21 33:8,8,9,13 34:12 52:10,11,20 56:10 63:23 64:11,19,21 65:11 66:10 68:14 73:9 74:14,17 76:14 84:12 91:13 91:23 95:22 99:9 99:11,13,16 100:23 101:7,23 103:22 104:17,17 107:25 109:24 110:8,14 111:11 111:24 113:5,9 115:2 123:17 124:3,4 125:2 126:16,20 127:8 127:13 156:10	73:19,21 79:2 86:7 114:25 118:9 118:24 121:14 122:18 stopped 7:12,16,23 10:25 11:13 22:22 26:20 86:6 88:9 88:21 90:11 103:19 104:2 109:1,5 111:5 133:20 stopping 110:20 118:22 straight 13:5 50:17 59:15 101:1 129:3 strange 47:12 50:5 50:7,22 53:9 STRAW 95:8,9,19 95:22 96:10 156:18 street 127:24 128:3 139:10,18,23 147:3 streetlights 38:18 strenuous 37:2,5 stretch 38:19 strike 44:23 striked 44:24 struggled 11:24 151:3 struggling 10:15 stuff 10:11 50:10 stuffs 25:11 stumbled 50:19 subject 154:4 submarines 35:1 submissions 154:4 155:3 subsequently 113:16 substance 48:10,15 substances 44:6,17 successful 87:18 sucker 64:8 69:7 116:13 117:3	sucking 116:14 suction 69:9 116:10 116:16 117:19 sudden 140:22 suffer 49:4 suffered 71:5 112:1 suffering 10:16 71:15 sugar 63:1 65:24 73:6,12 suggest 4:22 65:4 111:25 112:7 116:23 120:15 134:15 154:6 suggested 9:5 suggestive 67:25 suggests 118:20 suit 135:24 Superintendent 141:5 supervisors 130:7 supine 67:20 supply 61:4 support 56:11,15 66:1 85:12,25 87:25 96:24 106:13 107:13 suppose 51:7 116:14 supposed 64:21 68:16 supposedly 66:18 supraglottic 66:2 sure 3:12,14 12:4 23:20 27:19 41:5 55:10 90:16 96:25 101:19 107:24 108:1,2 111:8 116:25 119:20 120:6 124:18,19 124:19 132:22 145:25 151:8 surgery 1:11 surname 31:2,7 53:2 135:20	Surrey 56:17 123:15 127:16 128:10 148:1 surviving 149:24 150:3 152:11 suspect 3:12 154:9 suspected 101:24 suspicion 92:4 98:19,20 suspicious 91:25 130:16,22 139:22 140:9,13 144:7,9 144:11 Sussex 99:17 Suter 153:21 swapped 62:7 72:18 86:9 sweat 44:20,25 45:3 sweating 45:1 sweep 117:14 swipe 132:3 Swiss 153:18,19 154:1 sworn 2:18 74:8 123:11 156:6,15 156:24 sympathetic 151:22 sympathetically 147:21 sympathy 148:4 system 3:14 57:4 61:5 62:4 101:4 systolic 81:18
T				
				t-shirt 39:11 59:24 111:16 tab 1:17,20 2:24 4:19 14:19 33:6 40:18 56:3 74:14 75:2 99:9 110:12 110:13 113:5 123:17,22 128:9 132:25

table 130:20	134:19 137:13	153:11 155:13,14	149:14 150:9,14	117:4 118:2,3
tablespoon 25:15	138:24 146:3	thanked 86:6,8	151:2,6,12,17,17	119:10 125:19,19
tact 148:4	152:11	thanks 136:15	152:7	125:20,21 127:16
tactful 151:22	telling 107:19	themselves 107:19	thinking 29:9 71:6	130:15 132:9
tactfully 147:21	137:10	therapy 86:15,21	122:6	133:3 139:8
take 3:9 65:16	tells 17:24 118:18	thermometer 65:24	third 67:4 76:1	141:22 142:22
76:11 80:8 82:16	temperature 62:25	thicker 25:21,23,24	79:12 110:9,11	147:8,14 151:6,7
83:8 87:8 93:23	73:6 80:19 81:14	44:9 48:12	third-party 92:2	152:5
94:4 95:5 105:4	150:22	thin 48:13	thought 12:5 17:7	timeframe 134:23
110:23 111:2	temporary 86:19	thing 12:4 13:17	29:11 39:16,18	135:2,12
141:22 142:23	87:4,4 141:5	50:14,15 91:5	40:8 59:18 141:8	times 10:4 11:6,8
145:14 147:25	ten 38:17 59:22	105:22 116:16	147:22	32:21 62:20 72:22
taken 27:6 64:19	79:13 107:3,6	120:10 130:16	thousands 108:13	72:24 75:21 85:15
68:14 73:8 79:6	109:5	152:7	three 23:25 56:18	128:12
98:4 131:17	tend 8:4 11:4	things 4:9 14:10	59:14 88:17	timings 85:4,18,19
142:11,25 143:4	115:11	21:2,3,20 27:6,7	123:20	128:9
takes 19:2	tennis 11:5	50:4,7,22 102:3	three-quarters	tire 119:9
talk 16:3 23:10	term 112:3 140:21	102:23 115:12,15	92:20	tired 86:9
130:2	terminal 89:17	115:18 130:1	throat 48:1	tiring 62:9 120:2
talked 74:3	terminals 142:22	131:12 133:14	throwing 105:2	to' 73:23
talking 13:16 16:1	termination 118:24	think 2:11,14 3:13	tidal 71:4 93:6,9	today 1:5,8,24
20:2 22:15 26:7,7	terms 5:20 37:1	4:23 11:6 14:11	117:25 118:1,5,18	28:21 38:8 114:13
45:22 48:14 151:7	75:16 79:2 90:10	14:15 19:13 24:14	tidied 123:1	123:25 127:11
tall 58:25 59:15,22	100:5 103:15	27:3,11 28:3	tidy 111:7	140:3 152:20
targeted 114:4	107:21 119:5	32:20 36:2 40:3	time 1:20 3:18	153:21
taste 47:5,6,12	128:5 130:2	40:22 43:21 46:20	10:15 14:6 17:7	told 11:9 28:3
team 73:21 99:23	131:15 151:3	47:19 49:11 54:1	18:4 19:2 24:21	29:17 32:13 36:2
100:1,4,13 108:19	tested 70:21	54:14 55:10 57:12	24:22 25:16 32:9	53:15 54:1 57:25
114:20,24	text 77:14 78:17	58:18 59:9 73:22	34:8,9,14 36:5	74:2 79:14 95:9
tears 149:8,15	85:20 101:11	78:15,25 84:1	38:16 39:18 41:24	95:15 100:25
technically 106:17	126:12 138:10	92:20,25 93:9	43:19 44:21 47:25	107:12 133:2
techniques 106:13	textbook 92:16	94:1 96:5 97:6,9	48:2,3 49:13,15	135:7 139:5 142:8
114:7	texts 27:10	97:11,20 98:8	50:1 53:15 54:21	151:11
telephone 138:22	thank 2:10 8:20	100:22 103:6	57:9,11,16 58:4,4	tomorrow 154:24
telephones 138:25	25:8 28:15 30:21	104:12 107:7	59:4 61:8 62:13	155:14
139:2	31:12,15,15 33:7	110:8 111:19,20	72:7,10,22 73:14	tone 70:10
tell 10:7 11:19	52:18 55:15,19,19	117:22 119:14	73:18 74:21 75:23	tongue 69:17
16:13 19:2,13	56:9 93:18,19	121:10,15 123:2	75:24 77:7,9,24	117:14
20:8,13 23:24	95:7 97:3,23 98:6	127:25 128:25	77:24 78:2 80:16	top 5:2,9 6:20,22
30:6,8,10 32:13	98:21,22,23 99:22	129:22 131:14	81:14 84:13 88:16	7:1 10:15,23,24
34:16 40:22 42:21	112:9,14,15 123:5	132:3,4,13,16	88:17,24 94:13,17	16:4 23:4 35:20
42:25 47:23 90:21	123:8,8,9 126:15	133:24 134:2	94:18,23 96:23	36:12 37:2,9,14
90:23,25 93:2	138:18 143:6	137:12 138:21	97:17 98:24 101:7	40:20,21 45:2,6
112:5 116:25	147:16 152:14,15	140:8,12,21,23,25	103:1,12 108:7,10	52:14,15,20 59:1
118:17 124:22	152:16,17,18	145:24 146:3,5,10	109:9 115:21	76:2,19 80:11

85:18 88:16 92:25 99:17 110:13 119:7 125:6 126:23 128:14 143:16,18 144:2,3 145:12 146:20 torches 14:11 torso 54:17 total 72:23,25 touch 11:12 touched 32:12 tough 37:10 towels 13:17 trachea 106:6 117:16 traditional 34:3 traffic 51:1 trailed 54:17 train 92:9 98:11 trained 7:18 8:22 13:23 16:11 18:2 34:20,21,24,25 100:1 training 12:8,9 59:25 92:12 93:23 100:6 111:16 traipsed 105:1 transcriber 15:25 transcribers 3:9 transcript 1:21 2:8 10:18 14:17 18:6 20:1,21 22:1 24:3 40:5,16 42:2 45:5 translation 153:22 translator 154:15 transparent 25:18 trauma 67:25 110:15 travel 6:25 7:10 travelling 4:3 5:4,6 6:19,21 7:1,6 58:9 treat 68:22 96:12 treated 144:6,9 149:2 treating 98:16	129:9 treatment 63:5 65:17 73:15,16,17 73:19,22 115:23 trembling 11:25 12:2 19:4,4,5,7,10 29:8,10 triangle 36:16 tried 12:10 13:11 trolley 62:11,15,18 trouble 143:14 trousers 59:2 true 3:4 33:13 74:19 99:13 113:9 127:13 trust 56:16,21 151:23 trusted 8:6 try 14:14 18:16,18 18:19 54:7 63:18 87:12 91:16 92:15 102:24 120:10 trying 3:9 11:21 13:18 40:11 129:10,17 134:23 135:23 142:19 150:22 tube 63:9 71:3 85:11 105:10,21 106:1,5,20,21 116:16 117:15,20 118:7 tucked 32:17 Tuesday 1:1 turn 2:24 33:5 40:19 74:13 91:16 99:8 102:13 113:4 116:15 123:17 125:22 144:15 146:9 turned 16:10 18:1 28:9,10 39:4 58:10 70:20 115:21 turning 14:25 16:7	22:25 35:9 38:14 77:13 99:18 turns 140:18 twice 92:15 two 5:18 6:5 8:12 12:20 18:14 23:25 25:15 27:25 35:20 44:15 49:18 50:22 51:8,18,20 52:11 52:22 53:14 57:18 61:7 62:20 63:19 64:13 72:15 76:1 83:12 84:14,19,20 89:3 96:1,7 97:5 101:24 102:4,7 103:8 111:16 113:7 117:22 119:3 125:9,12 126:9,11 127:6 131:23 134:5,21 135:23 137:6,25 138:9 140:25 146:21 two-person 76:13 type 43:22 101:12 116:15 130:16 141:10 typed 146:10 typical 137:1	150:23 undergo 1:11 undergone 114:2 underlying 112:1,6 underneath 32:17 93:1 119:4 understand 1:11 2:1 15:8 29:25 64:12 149:24 understood 144:12 undertaken 78:18 79:13 108:12 underway 82:16 undisputed 2:2 unequivocal 122:15 unfolded 28:7 unfortunate 135:1 150:24 unfortunately 1:9 109:7 115:11 124:9 uniform 58:22 104:9 uniformed 141:2 unit 64:8 69:7,9 117:3 unknown 77:24 88:13 152:1 unlock 124:11,13 124:21 unlocking 131:25 unremarkable 115:13 116:5,22 117:2 unresponsive 83:6 unsuccessful 109:7 121:18,19 untimely 144:6 untoward 109:22 130:23 unusual 44:23 89:22 90:1 110:4 update 58:6 130:6 updated 58:4	updates 155:10 updating 155:4 upgraded 118:3 upset 149:1 150:7,8 150:10,16,17 usable 61:21 use 53:20,23 62:20 80:2 87:11 114:8 116:17 117:5,12 117:19 119:5,18 119:23 121:3,25 134:11 user 70:21 usual 56:7 usually 30:1 105:18
V				
				valve 60:25 65:21 72:1,3 84:20 86:19 vanilla 113:24 vans 8:17 vehicle 8:14 57:8 57:23 59:9,11,11 59:13 62:10 85:5 85:9 102:17,20 103:15,17 104:2 vehicle's 57:24 vehicles 58:19 66:8 103:7,15 ventilate 106:9 117:17 ventilation 60:25 61:6 72:2,6,15,20 93:5 106:3 ventilations 61:7 72:10 verbal 60:20 70:5,6 70:7,8,10,12 verge 131:6 versed 132:21 version 95:19 146:10 viable 82:12 vicinity 111:7
		U		
		unable 55:25 64:2 64:4 66:9 71:14 unaware 108:3 unclear 34:9 uncomfortable 130:22 uncommon 109:20 unconscious 13:14 16:23 18:8 32:10 32:12 70:2 unconscious' 32:3 uncontroversial 1:22 4:23 uncontroversially		

130:3 141:10 victim 149:22,24 150:2,5 view 41:21 78:22 114:19,22 115:23 117:18,20 120:4 130:14 155:5 virtually 5:25 visible 67:23,24 vision 115:20 visited 147:12 visual 131:8 visually 68:25 vocal 106:6 117:15 117:16 voice 3:8,16 75:1 124:15 131:2 volume 62:3 68:11 vomit 24:23,25 25:3,25 26:2 46:22 47:17 60:5 63:24 64:2,5 67:8 68:9,11 69:11 90:10,12 91:8,11 109:16,21 116:7 116:24 vomited 141:16 vomiting 26:7 91:1	76:18 83:8 91:6 96:21 98:7 120:20 134:8 143:12 wanted 86:2 wants 7:19 28:21 wash 25:1 wasn't 4:8 11:21 13:13 21:17,21 27:9 34:20 38:3 42:12 43:7,7 44:12,14 45:2,24 48:7 49:24 50:17 103:7 106:21 130:14 waste 111:9 Wastell 1:5,20 2:19 2:20 3:15,18 18:18 25:12 28:15 29:2 31:13,14,16 31:21 33:2,3 48:21 50:1 51:14 52:15,20 53:11 54:1 55:18,22 56:3,9,14 59:9 60:11 74:9,10 83:16 89:17,20 93:19 98:22,24 99:2,4,5 100:16 105:19 107:12 112:9,21 113:1,2 123:5,10,12,13 125:3,22 127:8 137:16 138:18 152:20,23 153:3,8 153:11 154:7 156:7,12,16,21,23 watches 27:1 watching 28:6 water 24:25 141:11 141:13 wave 71:4 93:8 117:25 way 8:22 9:4 20:24 21:5 39:7 42:14 43:15,21 51:1	93:5 98:16 105:10 117:14 119:10 129:1 130:13 136:4 150:16 we're 19:7 weapons 131:12 wear 34:2 wearing 27:4,12,15 34:4 39:10 59:1 59:16,23 131:18 135:24 wears 137:1 week 1:11 8:19 Weller 57:1 65:16 65:19 72:13 74:7 74:8,12,15 75:1 96:3,15 102:10 104:18,19 107:22 120:12 156:15 went 4:5 8:25 13:3 13:9 18:13 29:14 32:5 35:7 58:12 60:3 62:10 100:25 107:2 123:4 134:20 144:22 146:16 147:9 weren't 27:1 48:23 134:3 142:9 wet 11:18 44:11,19 44:19,23 45:2 65:2 68:17 Weybridge 31:25 33:18 57:10 77:5 101:9 whatsoever 91:10 92:4 98:20 Whereabouts 37:19 whilst 22:23 24:15 60:22 61:5 62:1 69:10 72:20 96:3 108:1 149:1 white 4:5 29:25 30:7,10,11,15,16 30:16,19 34:3	39:11 55:6 58:24 59:1,1,19,23,25 111:16 136:1 whitish 59:6 widely 93:8 widow 151:16 Wilson 32:22 129:22 148:18 149:1,8 150:7,8 150:10 151:1,12 window 32:1,1 windows 7:20 winter 79:25 wish 101:12 witness 2:6 32:23 65:11 74:7 90:4 95:22 98:25 99:9 105:15 112:21 123:10 witnessed 67:1 91:17 witnesses 1:6,8 2:9 89:3 96:14 152:21 woman 59:13 wondered 4:6 7:16 word 19:23 41:3 64:21 96:5 132:13 136:3 154:18 words 34:18 43:5 148:23 149:18,19 149:21 work 4:4 13:19 31:23 52:9 82:11 82:13 87:11 91:20 102:8 116:19 128:5 135:24 worked 32:20 33:24 35:8 36:24 126:6 137:25 152:6 worker 56:11,15 85:25 96:25 working 3:19 5:17 32:19 33:17 36:4 56:6,24 71:17	74:21 91:13,14 99:23 129:10,15 133:20 works 116:18 worry 95:21 132:21 worth 147:25 wouldn't 12:25 18:24 26:6 37:3 39:25 44:22 51:1 82:15 90:13 97:1 97:1 140:12 142:23 154:12 wound 116:6 wrapped 72:4 writing 77:1,2 138:15 149:14,20 written 55:22 74:6 80:16 81:18 103:23 137:21 146:1,7,8,13,21 147:2,5,8 153:21 wrong 35:24 wrongdoing 152:4 wrote 64:20 136:19
<hr/> W <hr/>				<hr/> X <hr/>
waist 54:18 wait 29:2 40:11 53:11 93:19 123:6 138:19 walking 140:10 walks 10:10 wallet 63:18 Walsh 1:25 12:7 19:24 20:3 23:1 25:25 26:17,25 32:23 33:1,4,9 51:14 53:8,14 97:6,20 156:11 want 2:16 10:9 19:23 23:5 41:3			<hr/> Y <hr/>	
				Yankauer 64:8 69:7 116:13,16 yards 35:12 141:17 141:19 yeah 16:9 19:7 23:14,23 24:7,11 41:2,10 42:4,25 47:3,9 year 115:2 139:7 years 8:7 11:24 27:19 30:17 47:11 56:18 92:10 114:12 119:20 149:9 yellow 47:16 48:15 young 120:5 younger 10:11

151:2,12	144:2,3	126:24 127:1	24 8:18	5(b) 14:19 40:18
Z	12 56:11 57:6 65:25	18.04 145:6,7,8,21	25 52:10,14,20	5.00 3:24 31:24
zero 81:12,16,18,19	70:20 84:13 118:4	145:22	26(c) 95:22	34:12,13
82:5	12.50 98:24	18.29 134:12,15	27B 4:19	5.01 102:9
0	123 156:24	144:21 145:16,17	29 156:8	5.15 135:2
0.9 61:25	138 157:1	145:23	3	5.27 119:15
1	13th 139:7	18.33 134:18	3 2:24 16:5,15	5.5 73:12
1 1:24 14:21 16:4,8	14 99:10	18.44 145:25 146:5	34:21 60:15 65:3	50 42:18 141:16,19
16:13 22:8,13,20	143 157:2	146:6	69:13 70:3,13	500 115:10
23:9 40:21 41:1	147 157:3	19 126:24 127:1	110:9	50p 43:25
45:11,15,22 62:6	149 146:9	148:14	3.08 153:12	50s 59:5,20
63:22,25 64:14	15 60:16 61:1,17,19	19.05 135:4	3.50 153:14	52 104:17
70:5,8,12 80:14	70:3,13 93:3	19.34 147:5	3.54 155:15	53 110:13 156:13
82:6 85:15 113:6	118:3 128:9	19.39 135:14	30 58:3 61:7 63:2	55 99:17
118:20 136:10	15(b) 143:20	2	67:2 71:25 72:14	56 156:14
156:5	15(c) 128:9	2 1:24 20:2,12,21	83:24 84:18,18,19	57 99:18
1.00 99:1	153 157:4	22:17 23:7 40:19	86:11 88:4 156:9	6
1.10 112:17	16 125:3 144:18	40:19 41:6,9	30s 58:24	6 1:1 20:3 58:25
1.5 62:24	16.30 134:20 135:8	64:10,24 65:16	31 40:20 156:10	70:12 83:16,17,18
1.6 93:2 118:16,17	16.35 135:8	72:14 81:4 84:18	318 95:17,22	117:8 118:20
1.7 118:14	16.50 134:20	86:11 104:17	33 156:11,12	129:2
10 1:18 3:2,25	16.51 100:22,24	114:9 137:17	342 4:20	6(a) 56:3
31:18,23 33:11,16	16.51.44 100:24	156:6,7	35 63:2	60 71:23 76:19
52:11 56:24 62:6	16.52.29 58:6	2.15 112:16,19	35.6 73:10	80:11 97:11
73:8 76:16,23	16.53 76:18 77:11	2.5 88:5	4	61 85:4 92:24 109:2
79:15 83:24 87:25	77:11 80:17	20 47:11 65:10	4 16:7 33:6 52:17	118:15
100:18 113:12	164 57:3 104:4	83:24 121:13,14	58:14 70:6 117:10	62 76:2 121:20
119:17 123:17,18	1645 77:7	122:14	4.15 135:2	627 102:17
128:12,14 131:5	1653 80:12	200 35:12	4.46 57:6	67 125:3,5 132:23
10(b) 132:25	17 114:14 145:3	2012 1:18 3:2,19	4.5 118:20	132:24 134:10
10,000 85:16	17.01 113:19	31:18,23 33:11,16	40 42:18 135:24	144:17 145:12,13
10.00 1:2 155:14,16	17.02 85:11	56:12,24 73:8	400 115:10	145:14,15
10.46 28:24	17.03 85:12	74:21 99:10,23	40s 101:14	68 145:20
100 55:10 61:8	17.15 134:21	100:18 113:12	4120 149:1	69 125:17,22,24
62:22 67:5 120:6	17.21 128:19	128:12,14	44 88:22	126:1 146:20,20
124:22 141:17	17.21.29 128:14	2013 1:16 123:18	45 119:11 135:24	146:24,25
109 143:13,19,24	17.27 87:21 109:1,4	2016 74:15 113:6	4610 128:15,15,17	7
11.00 28:17	17.34 128:23,24	2017 1:1 65:10	128:22	7 22:1,2 43:13,13
11.10 29:1	17.34.42 128:21	20s 58:24	4633 123:15 128:15	45:6 74:14
11.25 137:21	17.37 88:9,17 109:1	22 29:12	128:16,17,22	7.00 56:25,25
112 156:22	109:6	23 56:1 154:5	5	7.39 135:14
113 156:23	17.39 88:18	23.1(d) 1:15 2:3	5 40:20 58:14 70:8	7.45 63:15 74:1
116 143:10,12	17.40 125:7,18	23.25 125:23 126:2	5(a) 1:17	70 4:15,15 27:19
	133:2 134:12	126:3		126:23 148:11,22
	18 74:15 125:24			

74 156:15,16

75 27:19

8

8 23:4 99:9 110:12

110:13

8.55 137:16

9

9 23:18 65:14

9(a) 113:5

9(b) 75:2

93 156:17

95 156:18

97 156:19

99 156:20,21

999 1:21 2:13 12:1

14:17 15:14 32:2

32:3 77:9