



**University Hospitals  
Bristol and Weston**  
NHS Foundation Trust

Trust Headquarters  
Marlborough Street  
Bristol  
BS1 3NU  
Tel: 0117 342 3720  
Switchboard (Bristol): 0117 923 0000  
Switchboard (Weston): 01934 636363  
Email: [REDACTED]  
Website: [www.uhbw.nhs.uk](http://www.uhbw.nhs.uk)

9 January 2025

Dr Simon Fox KC  
Assistant Coroner for Avon

**By email only to:** [REDACTED]

Dear Dr Fox

### **Inquest of Lisa Gale**

I am writing in response to the Regulation 28 Report to Prevent Future Deaths dated 12 November 2024. I would like to begin by extending my deepest condolences to the family of Ms Gale. I hope that my response provides both you, and Ms Gale's family, with assurance that the Trust has taken this further opportunity to carefully consider any actions we can take which may improve patient care in the future.

In order to respond to the Matters of Concern set out in your report, I have sought the assistance of [REDACTED] Clinical Chair for Diagnostic and Therapies, [REDACTED] Consultant Chemical Pathologist, [REDACTED] Chief Medical Officer, and [REDACTED] Consultant Obstetrician who was present throughout the inquest.

We have carefully considered the issue of setting a lower threshold for the urgent reporting reference range for Liver Function Tests (LFTs) in pregnant women. On reflection, we consider that one hospital Trust changing the reference range in isolation will not address the broader issue which has the potential to affect all pregnant women at a national level. UHBW is a tertiary level referral hospital, treating women from across the South-West region. We are concerned that developing guidance in respect of reference ranges for LFTs in pregnant women in UHBW in isolation, could potentially create more risk to patients rather than reduce it, as hospitals within the region, and across the country, would be working to different guidance.

To safely implement any recommended changes to reference ranges for LFTs in pregnancy we would ordinarily consider national guidance from the Royal Colleges. We have therefore written to both the Royal College of Pathologists and the Royal College of Obstetricians asking them to

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consider your report and the development of national guidance on this important issue. Given our knowledge of this case, we are happy to work alongside the Royal Colleges in the development of guidance.

The Royal College of Pathologists have advised that their guideline '*The Communication of Critical and Unexpected Pathology Results*' is published as advice to pathologists and is offered as a basis on which pathologists can construct their own local guidelines after discussion with relevant stakeholders. The Royal College of Pathologists recommend that individual cut offs are agreed locally with clinicians, and this could be for a variety of clinical conditions with might include pregnancy.

At the time of writing, we are awaiting the response from the Royal College of Obstetricians. In the meantime, we have also raised the issue with the regional obstetric lead, who we understand is liaising with the national obstetric lead on this issue.

Once national guidance has become available regarding a recommended reference range for urgent reporting of LFTs in pregnancy, UHBW will set up a task and finish group, led by Dr Bennett, Dr Willis, and Dr Liebling to implement these across the Trust in a safe and robust manner.

In the event of no national guidance, UHBW would look to change our reference range locally with guidance from our obstetric and laboratory teams.

We hope that the above response provides you, and Ms Gale's family, with assurance that the Trust has carefully considered your report and identified the safest way of proceeding. We continually challenge ourselves to consider any further action we can take to strengthen patient safety across our hospitals, whilst recognising that some aspects of patient safety are best raised at a national level.

Yours sincerely

**Hospital Managing Director**

Joint Chair: Joint Chief Executive: