

WITNESS STATEMENT

Criminal Procedure Rules, r27.2; Criminal Justice Act 1967, s.9; Magistrates' Courts Act 1980, s.5b

Statement of: HASLAM, JAMES

Age if under 18: Over 18 (if over 18 insert 'over 18')

Occupation: CONSULTANT

This statement (consisting of 2 page(s) each signed by me) is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated in it anything which I know to be false, or do not believe to be true.

Signature: J HASLAM

Date: 09/07/2018

Tick if witness evidence is visually recorded ☐ (supply witness details on rear)

1.I am Dr James Duncan HASLAM, Consultant in Anaesthesia & Intensive Care Medicine at Salisbury District Hospital. I was appointed to this post in August 2015.

2.I hold the pre-registration qualifications BSc Honours in Philosophy with Basic Medical Sciences (King's College London, 2003) and Diploma in the Philosophy of Medicine from the Society of Apothecaries (DPMSA, 2003). I hold the Associateship of King's College London, (AKC, 2004). I qualified in medicine in 2004 at Kings College London with the qualification MBBS. I hold the higher medical qualifications: Fellowship of the Royal College of Anaesthetists (FRCA, 2011) and Fellowship of the Faculty of Intensive Care Medicine (FFICM, 2015).

3.I am one of the Consultant Intensivists who was involved in the care and treatment of Sergei SKRIPAL and Yulia SKRIPAL at Salisbury District Hospital. In making this statement I have relied on my own recollection of events supplemented by my review of the patients' contemporaneous medical records made by other members of the Intensive Care team.

4.At the request of the Counter Terrorism Command I have been asked to summarise the care and treatment provided to Sergei SKRIPAL and Yulia SKRIPAL whilst they were inpatients at Salisbury District Hospital in March - May 2018, with particular reference to their chances of survival had they not received medical treatment from the time of their arrival at Salisbury District Hospital on Sunday, 4 March 2018.

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Signature witnessed by:

[Redacted Signature]

5. When Sergei SKRIPAL arrived at Salisbury District Hospital on Sunday, 4 March 2018, he presented with bilateral miosis [pinpoint pupils] and profoundly comatose, scoring 3 on the Glasgow Coma Scale (GCS). He therefore required intubation and mechanical ventilation although he was still able to breathe at that point. It became apparent that he was developing cardiovascular compromise, with bradycardia [slow heart rate] and hypotension [low blood pressure]. He developed hypothermia [low core body temperature], lachrymation [secretion and flow of tears], diaphoresis [excessive sweating], salivation, oliguria [low urine output], acidosis and apnoea [inability to draw breath]. Overall, the clinical picture was one of profound compromise of the central and peripheral nervous systems.

6. When Yulia SKRIPAL arrived at Salisbury District Hospital on Sunday, 4 March 2018, she presented with bilateral miosis, profoundly comatose, scoring GCS 3, and apnoeic, requiring manual ventilation on arrival at hospital to keep her alive and was subsequently intubated and mechanically ventilated. She was profoundly hypothermic, faecally incontinent and bradycardic. She developed lachrymation, diaphoresis, salivation, hypotension and oliguria with worsening acidosis. Overall, the clinical picture was one of profound compromise of the central and peripheral nervous systems, and her condition was worse than that of her father.

7. In order to keep them both alive it was essential to provide invasive, aggressive and intensive medical life support, without which they would have died as they were unable to breathe unaided and were suffering from multiple organ dysfunction.

8. I took over the management of their care on Monday afternoon, 5 March 2018. By that time our initial suspicion of an opiate overdose had been replaced with a working diagnosis of organo-phosphate poisoning, which was confirmed by tests revealing profound suppression of the activity of an enzyme called acetylcholinesterase, and subsequently treated with the relevant antidote medication in addition to continuing with invasive and aggressive intensive care to keep them alive.

9. Specialists at Public Health England and Defence Science and Technology Laboratory became involved after a Major Incident was formally declared. Following further tests, they advised us that the SKRIPALS had been exposed to a nerve agent, which was later confirmed to be a Novichok. This information and further specialist advice enabled us to adjust and target our treatment.

10. After about a week we were hopeful that both patients might survive, although at that stage the likely extent of any recovery from the insults to their central and peripheral nervous systems was far from clear.

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As with any critically ill patient cared for on an Intensive Care Unit, the possibility of a significant and life-threatening complication remained present throughout most of their time in hospital.

11. Both patients underwent surgical tracheostomy formation on 21 March 2018. By 27 March 2018 we were able to decannulate [remove] Yulia SKRIPAL's tracheostomy tube, and she was eventually discharged from hospital on 9 April 2018. Sergei SKRIPAL's tracheostomy tube was decannulated on 5 April 2018 and he was discharged from hospital on 16 May 2018.

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Signature witnessed by: