

WITNESS STATEMENT

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

Statement of: COOMBER, KEITH FREDERICK

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

Occupation: AMBULANCE PERSONNEL

This statement (consisting of 6 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: KEITH COOMBER

Date: 06/07/2018

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

I am an advanced technician and work for South West Ambulance Service. This statement refers to the time I attended a call to a woman who had a cardiac arrest in Amesbury.

In this statement I will refer to the female patient, her boyfriend and to a number of ambulance and HEMS staff namely Glen DAVIES, Mark, Keith MILLS, Fred and a female observer.

The venue I will be talking about is a first floor flat in Muggleton Road, Amesbury. It is in a modern block and I only entered the hallway and bathroom. The bathroom was extremely small about 7 feet by 7 feet. From the doorway it had a small bath on the right hand wall in the middle was a sink and a toilet on the left. I can not remember seeing a window.

On Saturday 30th July 2018 I was on duty as part of a double crewed ambulance partnered with a paramedic called Glen DAVIES who was the driver. Our call sign was 312.

At about 10-14am we were at our base in Salisbury Hospital when I was contacted by our control over the radio. We were tasked to go to a seizure on a 44 yr old female in Muggleton Road, Amesbury. The route we took was via Castle Street and up the A345 and we arrived at about 10-35am.

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2022

Signature witnessed by:

When we arrived I saw an RRV ambulance car parked outside this particular address with its front drivers door open.

The communal door to the block of flats was also open. I placed some gloves on my hands and went into the block with Glen. We went up a set of stairs which took us to the flat which had its door open. We went inside into a hallway and the bathroom was the first room on the right.

Inside the bathroom I saw a woman lying on the floor on her back. She was wearing leggings and a blouse with the front completely open exposing her breasts because I don't think she was wearing a bra.

A paramedic called Marc was kneeling by her head doing chest compressions. She was also connected to a defibrillator.

I knelt down by this woman's waist to the left side of her body and took over chest compressions from Marc whilst Marc told us what he knew. He told us that she had complained of a headache, she went and had a bath. Her boyfriend heard a loud funny noise and found her unresponsive, a possible seizure. He phoned 999 and got her out of the bath.

We followed the instructions to the defibrillator but when the battery went flat we changed it. Glen swapped positions with Marc whilst he went to speak with the boyfriend. I said "Has she taken drugs" and the boyfriend came to the hallway and said "No drugs" but she is an alcoholic". I only saw him for a couple of seconds and he then went out of sight.

We continued with the chest compressions for a while and then Glen went and got a green bag of medical supplies from the ambulance. He then went on to chest compressions whilst I put an IV needle with adrenaline into her left ACF vein and connected a Cannula.

At some point a mask was placed over her mouth and she was being pumped with oxygen and an Igel tube was placed on her mouth to hold her tongue back.

I went on to give her 2 shots of adrenaline, a shock from the defibrillator and a further 5 shots of adrenaline. At this point her heart started pumping which I could tell by seeing the vein pumping in her neck.

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Earlier on route to the call, control had informed me that it had changed to being a cardiac arrest and I had requested HEMS. After being with the patient for about 25 minutes three HEMS crew turned up; Keith MILLS, a guy called Fred and a female observer. Mark gave them a verbal handover and I swapped places with them. Whilst they were engaged with the patient I went to prepare the ambulance and brought up a scoop to the flat.

Between us we took the patient out of the bathroom, placed her on the scoop in the hallway and carried her to the ambulance. Whilst we were working on her in the bathroom she defecated herself and it moved around and out of her trousers as her body was moved.

She was placed on a cot in the back of the ambulance, Fred put an ET tube in her mouth because he noticed that her tongue was swollen and replaced the dressing on her arm because she was sweating so much.

I travelled with the woman in the back of the ambulance with Fred and the female observer.

When we got to Salisbury Hospital I helped lift the patient in her cot to the resus unit in A and E. Fred gave a handover to the doctors and I returned to clean the ambulance. At one point I did change my surgical gloves and these were deposited in the sluice in A+E once we had finished.

The following Wednesday when I went into work I was informed that our unexplained substance had been detected from the above mentioned call. We were told to double bag our uniform which I did. These items are at my home address in my garage. However I did wear the same trousers when I worked the day after the incident.

All of the ambulance crew were wearing their green uniforms and the HEMS staff their orange uniforms.

I would describe the female patient as white, slim, 5'4", mid 40s, short blonde hair, thin lips, she had two black rubber bands on her right wrist, wearing leopard skin leggings and a cream blouse. When I arrived I noticed that her fingers were blue but they returned to a normal colour as we worked on her.

I would describe the boyfriend as white, slim, mid 40's, 5'8", thin short dark hair wearing brown short sleeve top and blue jeans.

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I worked at close quarters with the female patient for about 45 minutes. I only saw the boyfriend for a couple of seconds from a distance of about 3 metres. Although the light was good in the flat I do not believe I would be able to recognise either of them if I was to see them again.

I have worked continuously since the incident and I have felt no physical effects or had any bad thoughts since.

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