

## OPERATION ROCHESTER CLINICAL TEAM'S SCREENING FORM

Patient Identification

BSC/18

Exhibit number

Care Death/Harm	Optimal 1	Sub-Optimal 2	Negligent 3	Intend to Cause Harm 4
Natural A	✓			
Unclear B				
Unexplained By Illness C				

General Comments

Dehydrated  
 Tried NG feeding  
 - couldn't pass tube  
 Thickened feeds etc  
 Dehydrated  
 Didn't give antibiotics

1A 1A 1A

Final Score:

1A

Screeners Name:

Lawson

Date Of Screening:

8/6/3

Signature

**Code A**