

WRITTEN STATEMENT OF DR. WATT CHI LEUNG

1. I was on duty on 22 February 2003. Shortly after 11:30 a.m., my colleague Dr. Ng Chung Hoi received a telephone call from AED asking to transfer a patient from AED to ICU direct.
2. I then discussed with Dr. Ng about this case and was told that the patient was a (大陸醫生) having dyspnoea. I asked whether he was a Hong Kong doctor who previously immigrated from Mainland or a medical doctor from Mainland who came to Hong Kong. It was then clarified that the patient was a medical doctor from Mainland having shortness of breath with very low level of SaO₂.
3. I was aware of the news about epidemic in Mainland and in view of the patient's history, I instructed our ICU staff to prepare the isolation room. It is the usual practice in ICU for staff to wear N95 masks when TB patients are sent into the isolation room because TB is an airborne disease. In this case, I instructed our ICU staff who would attend to ■■■ to put on N95 masks to admit this patient. I instructed our ICU staff who would attend to ■■■ to implement our standard precaution measures on managing patients suspected to have air-borne diseases (eg tuberculosis). These measures include placing the patient in isolation room, staff wearing N95 mask, glove and gown when caring the patient.
4. ■■■ gave the history that he was a retired professor of the second Affiliated Hospital of Sun Yat-Sen University of Medicine Sciences in Zhongshan. He helped out in the Out Patient Clinic of the hospital. ■■■ said that before coming to Hong Kong, he had had pneumonia on 15 February 2003. Nevertheless, he had received blood tests and the results showed that he was not suffering from atypical pneumonia. He had seen 2 suspected atypical pneumonia cases in the OPD of the hospital and the hospital had taken infection control precautions according to the hospital guideline. He had also taken chest x-rays. In the first x-ray, there was some left lower zone haziness but a second x-ray taken on the following day showed that he had recovered.
5. On 19 February 2003, he was unwell again. He came to Hong Kong on 21 February 2003 to visit his friend(s) and to attend a wedding ceremony.
6. My colleague, Dr. Yip Wai Chun discussed with me about asking the microbiologist of QMH to come to see ■■■. I had no objection to that. In the same morning (24 February 2003), Professor Ho Pak Leung (Microbiologist) and Professor Kenneth Tsang (Respiratory Physician) came to the ICU of KWH. On 28 February 2003, Professor Yuen Kwok Yung of HKU came as well. ■■■ stayed inside the isolation room all along until his death on 4 March 2003.
7. ■■■'s case was reported to HAHO on 22 February 2003 according to the surveillance mechanism on severe community acquired pneumonia.

Date : 9 December 2003


Dr. Watt Chi Leung