

FORMAL STATEMENT

Gilderoy Mungo Lockhart states:

1. My full name is Gilderoy Mungo Lockhart. I am a registered medical practitioner, qualifying MBChB in 2010 and Diploma of Child Health in 2014. I am an advanced trainee in Paediatrics working in Starship Hospital as a Paediatric Registrar in the Children's Emergency Department, under the supervision of Professor Albus Dumbledore.
2. I saw this 16-month infant on Thursday 26/08/2017 at 11.30 a.m. He was accompanied by his mother Dolores Umbridge and maternal grandmother Hannah Umbridge.
3. The reason that we saw Harry was that he had presented first thing that morning to his GP, Dr Pomfrey, with an unexplained fracture of the left radius and ulna (the two bones of the forearm). Dr Pomfrey referred him in to Starship Children's Emergency Department for further evaluation.

History

4. I spoke with Dolores and Hannah on 26/08/2017, along with Sybil Trelawney (Te Puaruruhau social worker). The history as given to us by them was as follows:
5. Hannah said that she and her husband Neville had got up that morning at their usual time. Neville went to work. Harry also got

FORMAL STATEMENT

up about 0630, as usual. Hannah made him his bottle. He was on the couch and she was tickling him when she accidentally touched his left arm and he yelled out. She looked at it and saw that it was swollen.

6. Hannah works at Pak N Save. On the previous afternoon (August 25) she finished work at 4 p.m. Dolores came bringing Harry to Pak N Save to do the shopping. They put Harry in the supermarket trolley and took him around the supermarket as they were shopping. He was grizzly but had no obvious problem with his hands and arms. They attributed the grizzliness to him developing an upper respiratory tract infection.
7. They went home and had dinner about 6 p.m. They fed Harry and bathed him about 7 p.m., as per usual routine, in an adult bath together with his two brothers. Dolores undressed and bathed him. There was no problem with his arms. He then had his bottle (which he normally holds with his left hand) and they noticed no difference. He went to sleep at 7.30 p.m, on a mattress on a floor in the lounge. Dolores stayed up watching TV until about 10 p.m., when she got into bed with him on the same mattress and there was no incident overnight.
8. Neither Dolores nor Hannah could recall any possible injury. Dolores left him at home at 8.30 am the previous day to take his

FORMAL STATEMENT

older brother to school, and returned at 0900. He was fine. She went out at 12.30 for half an hour. When she got back he was crying a little, she gave him his bottle and he fell asleep. He woke at 3.30 p.m. with a cough but no other symptoms of note.

9. While she was out of the house on these two occasions, Harry was looked after by his maternal aunt Fleur Umbridge (22) and her boyfriend Charles Weasley (22). Dolores said she had asked Fleur and Fleur said that Harry was grizzly but nothing had happened while she was out.

10. Hannah and her family live at 69 Privet Drive. It is single storey. There are two steps at the front and four steps at the back with no internal stairs. The outside steps are concrete onto a concrete path. He has fallen down these outside stairs in the past but has not sustained any injury in doing so.

Past medical history

11. Harry was born by a normal vertex delivery at home in Godric's Hollow. No resuscitation was required. Dolores described no problems in the pregnancy.

12. Dolores could not remember exactly when Harry was able to roll and sit, but recalled it as "normal". He was not a bottom shuffler. He was crawling "late" just before his first birthday and pulling to

FORMAL STATEMENT

stand shortly after the age of 12 months. They thought he was “late” to walk, however they said that he had been walking for about three months at the time that I saw him. He was now climbing into chairs and couches, and had been doing that for about a month. He had fallen off a chair and coffee table which was at the same height of the chair, and had sustained no injuries in doing so. He had quite a few single words, and was starting sentences such as “Where is my pie?” They were confident that his hearing and eyesight were normal.

13. Harry had been seen not admitted twice at Godrics Hollow Hospital for flu or bronchiolitis, and had also been seen for chicken pox. He had had no previous bruises or injuries, apart from the bruise on the forehead from knocking into the coffee table.
14. His immunisations were up to date except for his 15 month immunisations which had been due last week. He was on no medications and there were no allergies.

Family medical history

15. Harry is the third child to Cornelius Fudge (29) and Dolores (27). The elder children are Draco Fudge (dob 14/06/2011, NHI GHI9101) and Dudley Fudge (dob 22/03/2013, NHI JKL1213). Dolores is currently pregnant to Cornelius and expecting their fourth child in September. There is no family medical history of

FORMAL STATEMENT

note, in particular no history of bony fragility or bruising or bleeding disorders. Dolores is the fourth of five children to Hannah and her husband Neville. The others are Fred aged 36, George 35, Percy 33 and Fleur.

Social history

16. Dolores and Hannah are the primary caregivers for Harry, although Hannah works three days a week (6 a.m. to 4 p.m). Fleur and her boyfriend do not usually reside there. The usual occupants of the house are Neville, Hannah, Dolores and her three children.
17. There is an extensive history of family violence between Cornelius and Dolores, with repeat Police callouts. Cornelius is currently in Prison for an assault on Dolores's sister Fleur. Hannah and Dolores said that they had a protection order out against Cornelius, and he had no ongoing access to the children. They said that although the older boys had witnessed a lot of the violence between their parents, Cornelius had not physically assaulted the older children. However, Dolores felt that the older children had been emotionally harmed by what they had observed, because their behaviour was angry and aggressive.

FORMAL STATEMENT

Examination

18. On examination Harry was a well-nourished and active toddler, who interacted normally with his mother, grandmother and examining medical and nursing staff.
19. His weight was 12 kilograms (75th percentile), height 79.3 cm (50th percentile) and head circumference 49 cm (90th percentile). He was walking competently and climbing securely on steps in the examination room. He was not moving his left arm, which was visibly swollen over the lower forearm, but was undistressed unless I tried to touch it. There was no external bruising over the fracture site. He showed good fine motor skills with his right hand.
20. On general examination he had a runny nose, but the rest of his physical examination was normal. In particular, there was no sign of any bruising or other injury elsewhere on his body on careful examination. I did not examine his retinae, (that is I did not dilate his pupils and attempt to look into the back of his eye with an ophthalmoscope).

Investigations

21. X-ray of the left arm at the A&M clinic showed complete mid-shaft fractures of the left radius and ulna (the two bones of the forearm). These fractures were not at exactly the same location in the forearm, with the break in the radius being a little more proximal

FORMAL STATEMENT

(closer to the elbow) than the break in the ulna. There was some angulation (bending) of the radius, but not enough to require any manipulation. There was no sign of subperiosteal new bone or callus formation (that is, no signs of healing of the fracture).

22. We performed a skeletal survey (x-rays of all the bones in the body) at Starship at 1pm, and a repeat skeletal survey two weeks later, on September 10. These were normal. That is, Harry had no broken bones. We did not perform a CT scan of the head. No blood tests were taken, as there were no bruises.

23. Harry was seen by the orthopaedic doctors and had a plaster applied, which he ended up wearing for 4 weeks. He was followed up in orthopaedic clinic and made a complete recovery. There should be no long-term consequences of his injury.

Conclusion

24. Harry is a well 16-month old infant who presents with an acute fracture of both bones of the left forearm.

25. It is not possible to date the fractures with any precision. The absence of any signs of healing on xrays means that they are almost certainly less than 5-7 days old. However, the symptoms that a child displays are almost always the best guide to the time of fracture.

FORMAL STATEMENT

26. The history as it stands does not make sense.
27. With regard to the injury itself, a child can get a mid-shaft fracture of the radius and ulna from a fall in an outstretched arm. It is common in childhood from accidental falls, although typically in older children who have fallen during sporting activities, (for example, falling off a jungle gym).
28. Harry is a 16-month toddler, capable of climbing onto chairs and couches, and it is conceivable that he could sustain such a fracture in such a fall, or even possibly in a fall from his own height (for example, if he was running).
29. The part of the history which makes no sense is the absence of symptoms. When Hannah noticed his broken arm on the Thursday morning, he cried out when the arm was touched and the arm was swollen to observation. In the GP's referral letter he writes that when Harry presented, he "*could not move his left arm. Undressing him was very painful*". In CED, although he was running around, he was not using his left arm.
30. Hannah's description on Thursday morning around 6.30 a.m. is exactly what I would expect for a fracture like this in a child of this age.

FORMAL STATEMENT

31. It is therefore bizarre that there is no history of any symptoms the previous evening. In particular, in my view it is not possible for Dolores to have undressed him and put him in a bath playing with his siblings at 7.30 p.m. and for this fracture not to have been evident (if it was already present).
32. Assuming that the history regarding the bath at 7.30 p.m. the previous evening is correct, the broken arm must have occurred after this time. Yet there is no history of injury at all between 7.30 p.m. on Wednesday night and the discovery of his fracture the next morning. All that time he was reportedly asleep on a mattress on the floor.
33. The most likely explanation is that part of the history is missing. The missing part is the mechanism of injury.
34. This may be an accidental mechanism which for some reason has not been disclosed, or a non- accidental mechanism. A non- accidental mechanism would require forceful bending or twisting of the left arm.
35. Either kind of mechanism would result in immediate and obvious distress in the child.

FORMAL STATEMENT

Conclusion

36. I cannot reach a definite conclusion as to the cause of this fracture, but I am concerned that it may be non-accidental (that is, I am concerned that it may have been caused by child abuse).

37. We notified Child Youth and Family and the Police on the day we saw him. A case conference was held at Starship. The Child Youth and Family Social worker, Minerva McGonagall, came to Starship and arranged for Harry to stay with other family members while an investigation took place.

I confirm the truth and accuracy of this statement. I make the statement with the knowledge that it is to be used in court proceedings. I am aware that it is an offence to make a statement that is known by me to be false or intended by me to mislead

Dated at Auckland this day of 2017.