ឯកសារស៊ើន

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ថ្ងៃ ខែ គ្នាំ ទទួល (Date of receipt/date de reception):

មន្ត្រីទទួលបន្ទូកសំណុំរឿង /Case File Officer/L'agent charge រាត់ សាសនា ក្រះមសាត្សក្នុ du dossier: SANW DADA

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Extraordinary Chambers in the Courts of Cambodia Chambres Extraordinaires au sein des Tribunaux Cambodgiens E238/8

ត្រះព្យសាចក្រកម្ម ស

Kingdom of Cambodia Nation Religion King Royaume du Cambodge Nation Religion Roi

Date: 26 Noveml

TRIAL CHAMBER

TO: IENG Sary Defence; Co-

Prosecutors; Civil Party Lead Co-

Lawyers, Case 002

FROM: Nil Nonn, President, Trial Chamber;

CC: All judges of the Trial Chamber; Trial Chamber Senior 1

Witness and Expert Support Unit; Office of Administration

SUBJECT: Response to Chamber inquiry regarding incident on 16-17 October 2012

Following a hearing on 21 September 2012, the Trial Chamber forwarded all material relevant to the Accused IENG Sary's recent hospitalisation to Professor A. John CAMPBELL (E233). On 8 October 2012, the Chamber appointed Professor CAMPBELL to further examine the Accused IENG Sary, consult with other qualified persons, have appropriate testing done, and report on the Accused's health (E238). On 22 October 2012, the IENG Sary Defence ("Defence") requested that the Chamber look into an incident that occurred on 16 and 17 October 2012 that did not appear in the regular medical reports provided to the Chamber. According to the Defence, the Accused began coughing and vomiting but no doctor promptly responded. The Defence later requested that the court-appointed experts be informed of this incident.

On 22 October 2012, the Chamber asked the Office of Administration to inquire with the hospital as to why the vomiting incident was not indicated in the daily and weekly medical reports provided to the Chamber. On 13 November 2012, the Trial Chamber was informed that during the incident in question, the doctor was not aware of the short knocks at the door. However, it was accepted that the hospital would endeavor to improve its responsiveness. The concerns of the IENG Sary Defence have been addressed to the doctor and the hospital has started the installation of bells in patient rooms to permit patients or caretakers to alert doctors of exigent circumstances. The hospital has also agreed that its doctors will include problems such as vomiting in future medical reports provided to the Chamber. It was also reported that IENG Sary's massage therapist has visited the Accused a couple of times per week from 1 October 2012, contrary to what was stated in the IENG Sary Defence's letter.

Following the hearing on 8 November 2012, the Trial Chamber asked Professor Campbell through the Witness and Expert Support Unit to clarify the circumstances

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surrounding the Accused's vomiting. On 14 November 2012, the Chamber received by email the following response from Prof. CAMPBELL:

It is difficult to comment on the episode of vomiting. This may well have been appropriately handled by the nursing staff. A doctor does not need to be advised each time a patient vomits. The vertigo Ieng Sary has can cause nausea and may occasionally lead to vomiting. The vomiting would only become important and require intervention if it was persistent and might lead to dehydration. I do not feel the lack of mention in the medical notes is a significant oversight.