My name is Kevin Doherty and I live at

I would like to tell you of a medical episode I experienced last year. Most of this has been heard from my family and doctors because I was unconscious for some days.

On June 16 2014, I collapsed. My wife found me and rang Triple Zero and was told they would send the Fire Brigade as well as the Ambulance. They worked on me for some time and then took me to the Royal Melbourne Hospital.

I was diagnosed with Level Five Subarachnoid Haemorrhage and was resuscitated twice. They discussed my problem amongst themselves and with my family who were given all the PROS and CONS of the effects of treatment. The CONS included death (inevitable anyway), migraine, dizziness or blindness. The family told them to try unless it was clear my brain was dead.

A coil was inserted in my head to stop the bleeding caused by the aneurysm. I gradually regained consciousness and my mental faculties. See copy of letter from Dr Benjamin Ho.

The point I wish to make is that I had signed an Advanced Health Directive for Non Treatment and had the doctors acted on it I would now be dead. Instead, I am now able to enjoy life, family and friends and even a total hip replacement which was approved by the neurosurgeons. I am fully recovered from that.

Thank you,







## The Melbourne Neuroscience Centre Department of Neurosurgery

City Campus 6 July 2015

Dr John Pattison (Opa) 11 Leake Street ESSENDON VIC 3040

Dear Dr Pattison

## **Kevin Doherty**



He is an 86-year-old gentleman who had a grade V subarachnoid haemorrhage secondary to a basilar tip aneurysm which was coiled on 16 June 2014.

He has had a near-complete recovery from this event and he is currently neurologically intact. Previously he had some right-sided visual symptoms which have all but disappeared. He does complain of some minor intermittent headache at times but it is not bothersome to the patient.

There has been a recent CTA conducted in May 2015 that demonstrates the exclusion of the basilar tip aneurysm from the circulation without recurrence and the ventricular size remains stable.

We will organise for the patient to be seen in clinic in 12 months' time with a repeat CTA.

Should there be any queries regarding his care, please do not hesitate to contact the Department of Neurosurgery at Royal Melbourne Hospital.

Yours sincerely

electronically approved by - 13/7/2015 Benjamin Ho Neurosurgery Registrar

Copy: Mr Kevin Doherty,

AVProf Rick Dowling(Emdat User), DEPARTMENT OF NEUROLOGY, THE ROYAL MELBOURNE HOSPITAL CITY CAMPUS



