

Complaints Department
2nd Floor Tabard House
Guy's Hospital
Great Maze Pond
London SE1 9RT

Michael Jones
[Address]

23 July 2013

Your ref: NN5446/JACGRA

Dear Sir or Madam,

Dissatisfaction with the Chief Executive's response to my complaint of 19 March 2013:

I write to express reasons for my dissatisfaction with the Complaints Dept.'s response to my complaint, signed by the Chief Executive on 3 June 2013.

In response to the first of the list of four items for which my complaint requested explanation – that of the delay of eleven-weeks between the writing of the MRI Findings report and it being forwarded to the SLaM Trust, I appreciate that the lapse of time involved makes it difficult to provide a definitive explanation on this point. Were this issue being considered in isolation, it might not warrant any further investigation than has so far been undertaken by the Clinical Director. It is only in the context of the fullness of the issues raised in my complaint that the potential significance of this delay becomes apparent, in that it represents the initial instance of a series of omissions, which in total constitute an inter-departmental cover-up of medical evidence.

I should point out that the MRI Findings report was only eventually faxed to the SLaM Trust (on 23/12/2008) following a series of requests by Dr. Crews. Your explanation does not specify whether there is any positive record of the report being posted before that date, or whether it was rather "misaid", "misfiled", or delayed due to a (*three-month*) "secretarial backlog". In view of the potential significance of this item in the context of the full complaint, the explanation given is intentionally vague and inadequate.

With regard to the second item listed on page two of my complaint, that of the failure of St. Thomas' Radiology Dept. to attach the MRI Findings report to the online copy of my scan, the same remarks about the relative significance of this item in the context of the full complaint apply, as they did to the first item. This then represents the second in a series of omissions, occurring more or less simultaneously with the first. The explanation provided by the Complaints Dept. treats it again as an item in isolation, thereby neutralising its significance.

The explanation provided is a repetition of that previously given to the Information Commissioner's Office, in early April this year, to explain the "filing system" in operation at the Radiology Dept., and the reasons for the non-attachment of my MRI Findings to the online scan copy. This explanation does not however explain under what circumstances the "digital stamps" respectively created under "PACS", and under "CRIS", would permit a report ever to be successfully attached to the online record, which we must expect to be the standard requirement. If the respective digital stamps are required to be identical, or to have some additional digital association, why were they not so in the case of my scan images and report?

Points 3 and 4 listed on page 2 of my complaint requested explanations for the respective failures of both St. Thomas' Radiology Dept. (in October to December 2008), and Dr. Andrews at Guy's Neurology Dept. (in April 2009) to disclose evidence of significant anomalies in the scan, either to the referring physician or to myself. My complaint referred to the online publication of selected images from the MRI scan at: <http://somr.info/report>.

In response to these allegations, your response states:

" ... your MRI has been reviewed again by the Neuro-radiologists on 8th May 2013. They say that they agree with the original neuro-radiology report of Dr. Hawkins. The specific structures about which you have expressed concern and which you have highlighted on your website are as follows:- the saggital sinus (a vein running across the brain between the two hemispheres), and the left vertebral artery (seen with some surrounding soft tissue). I have been advised both are normal structures and are seen on all MRI Brain. There is no evidence of any abnormality"

At the time of making this complaint, the images referenced on my website included some speculation about image 7.26 (of the extreme rear of my skull, in addition to images 7.13-7.15), which I had thought may have also been anomalous. I am now satisfied that image 7.26 is an image of the *sagittal sinus*, and is normal, and so I have removed this reference. The remaining images, being the 3-image sequence 7.13-7.15, are those it is suggested in the above quotation are explained in terms of the "left vertebral artery" – an explanation which is clearly erroneous, as the object referred to in these images lies on the *right* (not the "left") of the vertebral column. Furthermore, the revealed structure of this object not adequately explained in terms of arterial material and "surrounding soft tissue".

This complaint was submitted before I had access to a copy of a second Brain MRI scan, made at the National Hospital for Neurology and Neurosurgery, UCLH NHS Trust, on 06/03/2013. There are three images selected from this scan now published at: <http://somr.info/report/rep0.php> (see also enclosed scan copy). These images reveal the presence of two rigid square or box-like structures, clearly non-biological

in origin, and situated behind the back of my throat, close to the brain-stem. These images essentially confirm, in principle, the presence of illicit neurosurgical implants in my neck area, and suggest that the explanation given in response to my complaint – in its reliance on what is clearly an error in explanation – is bogus and ultimately unsustainable. It appears therefore as a tactical response, made with cynical awareness of the anomalies revealed by the MRI scan, but whose purpose is to defer an honest and open response to the substance of the complaint, in defence against the threat of immediate legal action.

Indeed, your response includes no documentary statement of the 'review' made by the neuro-radiologists on 08/05/2013, and no indication of the identity of the physician(s) re-affirming the opinion of the original scan report. It remains therefore entirely unconvincing. As a reminder of the assertion in the final paragraph of my complaint, it was in an attempt to obscure the identity of the original reporting radiologist that the MRI Findings report had been sequestered from the online copy of the scan. This point re-emphasises concerns over the significance of the failings noted under points 1 and 2, as indications of *intentional*, rather than 'accidental', omissions, but which can only be appreciated in light of the seriousness of the evidence revealed by (both) MRI scans.

In its stated aim to "provide you with additional reassurance", the response to my complaint recapitulates the cover-up of medical evidence constituted by the earlier series of omissions (also delivered with "reassurance"). In the face of evidence of a serious medical anomaly, such reassurance is inappropriate, and is medically and professionally irresponsible. The fact that this anomaly falls outside the sphere of conventional medical explanation, resulting as it does from a clandestine medical experiment, is no justification for its continued disavowal.

Since 2008, the onus has been upon Guy's & St. Thomas' to take responsibility for the disclosure of this evidence, but it cynically persists in its failure to do so. The Chief Executive's response to my complaint is merely the latest event in a series of dishonesties.

Yours faithfully,

Michael Jones

Enc: Disk copy of MRI HEAD scan made at National Hospital for Neurology and Neurosurgery, UCLH NHS Trust, on 06/03/2013. The three images published on my website are images 51, 52, & 53, from the 128-image sequence located in the top folder named 'AAH SCOUT', in the scan explorer window which opens when running the scan application.