MEDICO-LEGAL CURRICULUM VITAE

Name: Dr Mark Patrick John VANDERPUMP MD FRCP

Consultant Physician and Endocrinologist

Honorary Consultant UCLH

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Date of birth: 30th December 1963

Qualifications: MBChB (Birm) 1987

MRCP (UK) 1990 MD (Birm) 1995

CCST General Medicine, Diabetes and Endocrinology1996

FRCP (London) 2001

GMC Registration Number: 3181931

PSI Integro Ltd Insurance: B0391IZ1402636

Areas of special interest: Thyroid disorders, Diabetes mellitus, Pituitary disorders

Medico-Legal Courses Attended: Report Writing for Expert Witness (Bond Solon) 2006

Witness Familiarisation (Bond Solon) 2006

My main area of expertise is thyroid disease and diabetes mellitus but my clinical practice includes all aspects of endocrinology. I am the current President of the British Thyroid Association and a trustee of the British Thyroid Foundation. I have now written over 150 reports in the past 5 years split approximately 50-50 between the Claimant and Defendant including all aspects of diabetes and endocrinology. I have just completed writing a new chapter on clinical negligence in endocrinology for the 5th edition of "Clinical Negligence" edited by Powers, Harris and Barton.

Further biographical details on website www.markvanderpump.co.uk

Previous appointments:

Consultant Physician and Honorary Senior Lecturer in Diabetes and Endocrinology, Royal Free London NHS Foundation Trust 1999-2016. Consultant Endocrinologist North Middlesex Hospital 1996-1999. Certificate of specialist training within general medicine, diabetes and endocrinology completed in 1996 after postgraduate training in Newcastle upon Tyne and Stoke-on-Trent.

Experience:

Clinics in diabetes and endocrinology including responsibility for thyroid service, pituitary disorders and reproductive endocrinology, patients with type 1 and complex type 2 diabetes. General physician on-call and supervision of in-patients with diabetes (1996-2011). Responsibility for primary care liaison in diabetes (2001-2012). Joint Adolescent Thyroid Clinic UCLH from 2007 and Combined Pituitary Clinic (1997-2007) at National Hospital, Queen Square.

Clinical Director of Medical Specialties, Royal Free Hampstead NHS Trust 2004-2006.

Expert Professional Advisor for NHS Ombudsman 2003-4.

President of British Thyroid Association 2014 to date. British Thyroid Foundation Trustee 2012 to date. Chair of the Trust's European Working Time Directive Service, Training and Care Committee from March 2004 to August 2007 which implemented the development of a generic night-team within Medicine and Surgery.

Member of Trust Drugs and Therapeutic Committee 2007-2011 and Deputy Chairman 2009-2011. Member of Local Awards Committee for Clinical Excellence Awards 2009.

North West London representative on the NHS England Commissioning Clinical Reference Group for Specialised Endocrinology 2013 onwards.

Society for Endocrinology representative on RCP Joint Speciality Committee for Endocrinology and Diabetes Mellitus (2012-2016).

Referee for papers on thyroid and endocrine disorders for Journal of the American Medical Association, Clinical Endocrinology, Clinical Science, Journal of Clinical Endocrinology and Metabolism and Journal of Paediatric Endocrinology and Metabolism. Editorial board of Clinical Endocrinology 2005-2007 and of Journal of Clinical Endocrinology and Metabolism from 2006-2009. Post-graduate teaching commitment and international lecturer.

Medicolegal courses attended

Membership of Societies:

Diabetes UK British Thyroid Association
Royal College of Physicians (London) Society for Endocrinology
European Thyroid Association American Endocrine Society

American Thyroid Association Association of British Clinical Diabetologists

Independent Doctors Federation London Consultants Association

MD thesis (Birmingham, 1995):

"The incidence of thyroid disorders and diabetes mellitus in the community and the relationship of thyroid failure with the development of ischaemic heart disease"

Selected publications:

Vanderpump MPJ, Ahlquist JAO, Franklyn JA & Clayton RN on behalf of a Working Group of the Research Unit of the Royal College of Physicians and the Endocrinology and Diabetes Committee of the College and Society for Endocrinology (1996). Development of consensus for good practice and audit measures in the management of hypothyroidism and hyperthyroidism. British Medical Journal 313:539-44.

Vanderpump MPJ (2005). The epidemiology of thyroid diseases. In "Werner and Ingbar's The Thyroid: A

Fundamental and Clinical Text", 9/E. (Ed.LE Braverman and RD Utiger). JB Lippincott-Raven, pp 398-406.

UK Guidelines for the use of thyroid function tests. The Association of Clinical Biochemistry, British Thyroid Association and the British Thyroid Foundation 2006.

Vanderpump MPJ & Tunbridge WMG (2008). Thyroid disease. The facts. 4th Edition. Oxford University Press.

Vanderpump MPJ (2010). How should we manage patients with mildly increased serum thyrotrophin concentrations? Clinical Endocrinology 72:436-40.

Rajasekaran S, Vanderpump M, Baldeweg S, Drake W, Lanyon M, Markey A, Plant G, Powell M, Sinha S, Wass J (2011). UK guidelines for the management of pituitary apoplexy. Clinical Endocrinology 74:9-20.

Vanderpump MPJ (2011). Epidemiology of thyroid disease and swelling. In "The Thyroid", chapter ed. WM Wiersinga for "Oxford Textbook of Endocrinology" (Ed. JAH Wass and PM Stewart). Oxford University Press, pp 358-70.

Vanderpump MP, Lazarus JH, Smyth PP, Laurberg P, Holder RL, Boelaert K & Franklyn JA; British Thyroid Association UK Iodine Survey Group (2011). Iodine status of UK schoolgirls: a cross-sectional survey. Lancet 377:2007-12.

Wiersinga WM, Duntas L, Fadeyev V, Nygaard B, Vanderpump MPJ (2012). The use of L-T4 + L-T3 in the treatment of hypothyroidism. 2012 ETA Guidelines. European Thyroid Journal 1:55-71

Vanderpump MPJ (2014). Thyroid. In "Oxford Handbook of Endocrinology and Diabetes", 3/E (Ed. J Wass and K Owen). Oxford Medical Publications, pp 1-105.

Vanderpump MPJ (2015). Endocrinology. In "Clinical Negligence", 5/E (Ed. M Powers and A Barton). Bloomsbury Professional Ltd, pp 663-715.

Okosieme O, Gilbert J, Abraham P, Boelaert K, Dayan C, Gurnell M, Leese G, McCabe C, Perros P, Smith V, Williams G, Vanderpump M (2016). Management of primary hypothyroidism: Statement by the British Thyroid Association Executive Committee. Clinical Endocrinology (Oxf) 84:799-808.

Terms and Conditions

Current terms of engagement are:

The current hourly fee rate is £250.00 plus VAT for all time spent on the case. In addition, administrative support will be charged separately at the hourly rate of £25.00 for all time spent on the case. Itemised billing and copies of receipts will be provided if requested. Reports normally take between 6-12 hours depending on the volume of medical records.

Payment must be made 30 days from date of invoice, unless a prior written agreement. Should accounts not be settled within the agreed period, at my discretion, I have the right to charge interest on unpaid accounts at the rate of 2% a month, or part of a month, until full settlement is received.

Draft report produced within 2-6 weeks (dependent on complexity). Report for court completed two weeks following return of draft.

When sending correspondence such as medical records, for the attention of Dr Vanderpump, please send only on paper rather than disc files. Also please check where I would like this sent as I work in various different locations. Medical examinations are usually performed at the Physicians' Clinic 13-14 Devonshire Street, W1G 7AE on a Monday afternoon.

My fees for court attendances are £250 plus VAT per hour assuming 8 hours in court per day and 2 hours briefing. There are additional charges for travel of up to 4 hours per day and accommodation costs if necessary. Cancellation fees are 10% of the total fee if cancelled between 2 and 4 weeks before the date. 50% if cancelled between 1 and 2 weeks and 100% if less than one week.

I am not prepared to have my accounts subjected to assessment and look to you, my Client, to fund my assessment deducted relating to the Case, at any time.

I will use my experience, care and skill in fulfilling your instructions to the best of my ability. Please remember that I am an independent witness.

Please let me have your full instructions, together with any further relevant information you may have, and confirm your agreement in writing to the above terms. Please keep me closely informed on the progress of the case. I can probably help in the period before trial, if indeed the matter proceeds to that stage.