



DR AMR ELISSI

CONSULTANT IN ANAESTHETICS

MBBCH, MSc, MD, FRCA

GMC NO: 7071283

Genfield Hospital
(2015 - Present)



EXPERT INFORMATION

SPECIALIST AREAS:

- Consent
- Cardiac anaesthesia

CASES ACCEPTED:

Claimant age: 16+

- Clinical assessments
- Remote assessments
- Home visits*
- Prison visits*
- Criminal cases*
- Screening reports
- Desktop reports
- Family cases*

*Case-by-case

MULTILINGUAL:

- ✿ Arabic
- ✿ English
- ✿ French

SCAN ME



EXPERT RATIO



CLAIMANT **70%**
DEFENDANT **30%**



PI **40%**
CLIN NEG **60%**



*Annual report from 2024

VENUES:



Desktop reports

FURTHER INFO:

- Court experience
- Bond Solon trained
- Legal aid (LAA)*
- Personal Injury
- NHS contracted
- Clinical Negligence:
 - Causation
 - Liability
 - Breach of Duty
 - Condition & Prognosis

*Case-by-case

CONTACT

✉ enquiries@mlas.co.uk

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Nether Lane, Ecclesfield, Sheffield, S35 9ZX





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CASES RELATING TO:

- **General Anaesthesia:**
 - Cardio-thoracic
 - Orthopaedics
 - Urology
 - General surgery
 - Maxillofacial
 - Breast surgery
 - Gynaecology
 - Ear, nose, and throat (ENT)
 - Allegations of negligence in the conduct of anaesthesia
 - Pre-operative assessment and optimisation of patients
 - Intraoperative anaesthetic management and monitoring standards
 - Airway management complications (failed intubation, aspiration, difficult airway)
 - Awareness under anaesthesia
 - Anaesthetic drug errors, adverse drug reactions including anaphylaxis
 - Equipment use and safety (e.g. ventilators, infusion devices)
 - Vascular access and line insertions
 - Intraoperative Cardiovascular management
 - Post-operative care and recovery issues (e.g. failure to recognise deterioration)
 - Post-operative cognitive dysfunction (POCD)
 - Post-operative complications (e.g. nausea and vomiting, delayed recovery)
- **Informed consent:**
 - Pre-operative assessment
 - Examination
 - Implications of ceasing medication to undergo surgery
 - After-effects/risks
 - Hypoxic brain injury
 - Cardiac arrest
 - Deep vein thrombosis (DVT)
 - Aspiration pneumonia
- **Adverse reactions:**
 - Previous reaction to anaesthetic
 - Use of medication and the effects anaesthetics can have (anticoagulants /antiplatelet)
- **Intubation placement:**
 - Misplacement/size
 - Tracheal tube insertion/size/procedure
 - Risk of oesophageal tear
- **Spinal block**
Insertion/complications/mismanagement
 - Epidural
 - Repeated attempts at insertion
 - Misplacement
 - Nerve damage
- **Nerve block:**
insertion/complications/mismanagement
 - Peribulbar block
 - Subtenons nerve block
- **Complications during surgery:**
 - Vomiting
 - Waking
 - Risk of choking
- **Emergency Anaesthesia and Resuscitation:**
 - Rapid sequence induction and airway management in emergencies
 - Cardiac arrest management and rescue of the deteriorating patients
 - Management of massive transfusion

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- **Cardiothoracic critical care:**
 - Admission, management and discharge decisions
 - Ventilation management and sedation practices
 - Sepsis management and organ support
 - End-of-life care, withdrawal of treatment and consent/communication issues
- **Medico-legal and Professional issues:**
 - Standards of documentation and consent
 - Duty of candour and communication with patients and families
 - Fitness to practise and professional conduct in anaesthesia practice
 - Review of clinical governance and guideline adherence

MEDICO LEGAL EXPERIENCE:

Dr Elssisi is a Consultant in Anaesthetics and an Expert Witness. He has attended Inspire MediLaw training and is instructed by Claimants and Defendants on clinical negligence cases.

Dr Elssisi has 6 years experience as an Expert Witness and has provided opinion on over 100 reports from anaesthesia related incidents, injection complications, post-surgery complications and issues around informed consent to name a few. Previously undertaking personal injury cases as well as extensive cases in clinical negligence. He prepares clinical negligence reports and completes approximately 20–30 reports per year, providing clear, balance and independent opinions in accordance with his duties as an expert.

His medico-legal work is underpinned by meticulous analysis of medical records, evidence-based evaluation. Dr Elssisi supports courts, legal professionals, insurers and regulatory bodies by delivering authoritative expert opinions that promote accountability, patient safety, and informed judicial outcomes.

He is able to conduct assessments if the case calls for it, but predominantly writes desktop reports, dealing with causation, liability and breach of duty. Although he has received numerous witness summons, he is yet to attend Court.

CLINICAL EXPERIENCE:

Dr Elssisi has over 20 years' experience as an Anaesthetist, Dr Elssisi currently works at University Hospitals Leicester, alongside his private practice at Spire Hospital Leicester, Nuffield Hospital Leicester, and Spire Hospital Nottingham.

His NHS role, Dr Elssisi serves as a dedicated appraiser, demonstrating a thorough understanding of Good Medical Practice Guidelines. He supports and evaluates colleagues throughout the revalidation process, helping to ensure consistent adherence to the highest professional standards.

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Dr Elssisi also leads a high-risk pre-operative assessment clinic for patients undergoing complex thoracic surgery. In this role, he conducts detailed suitability and risk assessments and obtains comprehensive informed consent, with particular emphasis on anaesthesia-related risks. His commitment to education and patient safety is reflected in his role as an Advanced Life Support (ALS) Instructor, accredited by the British Resuscitation Council. He is also nearing completion of full instructor status in European Paediatric Life Support, accredited by the European Resuscitation Council.

In addition, Dr Elssisi holds accreditation in Trans-Oesophageal Echocardiography (TOE) from the British Society of Echocardiography (BSE), highlighting his advanced expertise in cardiac assessment and peri-operative care.

PUBLICATIONS:

- Prospective randomised controlled study to assess the role of dexmedetomidine in patients with supratentorial tumors undergoing craniotomy under general anaesthesia. East Journal of Anesthesiology - Vol. 21, No. 1, February 2011.

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