

## SARAH EDWARDS

Year of call  
1990



Sarah Edwards is a highly experienced advocate in both clinical negligence and family law at all levels including appearances in the Court of Appeal.

Sarah has extensive expertise in complex clinical negligence cases, often involving difficult medical and legal issues. Her cases have involved most clinical and surgical specialities, general practice and nursing. Having studied pre-clinical medicine at Cambridge, she is able to evaluate complex medical evidence.

Sarah's family practice has a particular emphasis on financial remedy applications (often involving high net worth clients with complex assets) and private children law (including relocation cases).

Sarah is friendly and approachable, and is known for her thorough approach and careful preparation. She is dedicated to achieving the best possible outcome for her clients.

Sarah is qualified to accept instructions directly from clients and is registered under the Bar Council's Public Access Scheme, meaning that members of the public who seek specialist advice can come direct to her. In addition, she welcomes instructions from solicitors, in-house law departments, qualified foreign lawyers, and clients licensed by the Bar Council to give instructions direct to barristers under the Bar Council's Licensed Access Scheme. For more information please visit our Direct Access page [here](#).

## LEGAL EXPERTISE

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### Clinical Negligence

Sarah acts mainly for claimants. She combines forensic attention to detail with a good bedside manner. She has the ability to evaluate the most complex medical evidence, gained from her pre-clinical medical studies at Cambridge and her extensive experience of clinical negligence cases over many years. Her recent cases have

encompassed a wide range of medical and surgical fields, including:

- Surgery (general, colorectal, neurosurgery),
- Accident & Emergency,
- Obstetrics & Gynaecology
- Orthopaedics,
- Oncology,
- Ophthalmology,
- Cardiology,
- Vascular Surgery,
- General Practice,
- Dental and nursing negligence.

## Selected Cases

### A v Royal Free (2019)

Fatal accident claim following death of a man (43), with a history of previous bariatric surgery, after a Whipples procedure for unproven cholangiocarcinoma.

### E v East Lancashire (2019)

Ophthalmic negligence – delay in diagnosis of acanthamoeba infection.

### P v Royal Surrey County Hospitals NHS Trust (2019)

Failure to achieve an adequate reduction to the jaw following an operation of open reduction and inter-maxillary fixation (ORIF).

### T v Barts NHS Trust (2018)

Claimant suffered a fourth degree tear due to a failure to perform an episiotomy in the course of a forceps delivery.

### S v Epsom & St Heliers (2017)

Delayed diagnosis of ureteric damage following hysterectomy leading to loss of function of the right kidney and hypertension. Complex causation issues.

### B v Chelsea & Westminster (2017)

Death of a 6-month-old twin following an operation of gastric pull-up. Negligent failures of fluid management during and following the operation led to hypovolaemia, hypotension, tachycardia, and ultimately cardiac arrest and catastrophic brain damage.

## B v Drs James and Douglas (2017)

GP negligence in failing to refer to a urologist leading to a delayed diagnosis of bladder cancer.

## C v St George's Hospital NHS Trust (2017)

Negligent delay in diagnosis of malignant melanoma.

## J v Guy & St Thomas' NHS Trust (2017)

Failure to administer dexamethasone in premature labour, with the result that the baby suffered bilateral intraventricular haemorrhages and consequent severe visual deficit and problems with fine motor skills, proprioception, sensory input and higher level functioning.

## Y v Kings College Hospital (2016)

Surgical negligence and delay in the diagnosis of rectal perforation and faecal peritonitis.

## S v Barts & The London (2015)

Young claimant who had a serious gun-shot injury to his neck and was likely to have been functionally quadriplegic and ventilator-dependent, suffered severe hypoxic brain damage when his tracheostomy dislodged as he was being turned.

## O v Croydon Health Services (2015)

Cauda equine syndrome following spinal operation.

## Y v Maidstone & Tunbridge Wells NHS Trust (2015)

Failure to diagnose/treat a post-operative infection following operation to repair quadriceps.

## Re BR deceased (2013)

8-day inquest relating to the failure to provide bowel care in the community to a man suffering from quadriplegia and frontal lobe injury. Strongly critical narrative verdict.

## Re AP deceased (2013)

10-day inquest on behalf of the daughter, after her mother took her own life when an error in the repeat prescription of an anti-depressant led to a relapse in her depressive condition and admission to hospital.

## Family Law

Sarah has been instructed in a wide range of financial remedy hearings, including more complex cases

involving company and trust interests and issues on pensions and where expert evidence is required. She has particular expertise in cross-examining in cases of non-disclosure.

Sarah also conducts private children work, including cases involving fact-findings and relocation (both internal and external).

## Selected Cases

Price v Price [2014] EWCA Civ 655, [2015] 1 FLR 1202

Re M (a minor)(contact conditions) [1994] 1 FLR 272

Nottingham County Council v P [1993] 3 WLR 637

## Memberships

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- AvMA
- FLBA
- PIBA
- PNBA