documented that he took steps to reduce the patient population while repeatedly making requests for more funds. These efforts failed for the most part.

"Nevertheless, he attempted to remedy the situation in some manner.

"Since Dr. Hammond's efforts to improve matters were largely frustrated, the 'choking' and other accidental deaths must be characterized (distasteful as it may sound) as being unavoidable.

> Grunberg Kerilan

> > Elisha Wolfe

cated that more storing are cuestions,

Willowbrook State School were he had eaten supper. patients."

can easily be stricken if left tendant. of time."

One case involved what the who had gone to get him for unable to feed or dress himself report called a "typical" his shower. The autopsy and had an IQ of 19. He was choking death. The patient, a revealed the cause of death to also unable to talk.

Two cases of patients who 15-year-old boy, was found dead be asphyxia in the upper part died of accidental causes at in his dormitory shortly after of the larynx caused by vomitus

Continuing, the report said:

severe and profoundly retarded awareness. He needed complete food lodged in the throat. Braisted said, "These patients daily needs, which included stated that this particular

material.

Another case is that of a 23described in District Attorney "He suffered from profound year-old patient who was found the floor of a hall in John M. Braisted Jr.'s report retardation caused by epilepsy. dead on the floor of a hall in as exemplifying "the difficulty His IQ was 13. He could not Building 7. Here again, the in caring for and supervising talk and did not show any cause of death was a bolus of

need constant supervision and having to be fed by the at-patient was the first to leave the dining room after eating alone for even a short period On Oct. 17, 1971, the boy was while she was busy feeding found dead by the attendant other patients. This youth was

Page 2 of 2