
ATTACHMENT 6



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF THE CHIEF MEDICAL EXAMINER

1910 Massachusetts Avenue, S.E., Bldg. 27
Washington, D.C. 20003

Telephone: 202-698-9001

Fax: 202-698-9101

26 November 2002

The Editor
The Washington Post
1150 15th St., NW
Washington, DC 20071

To Whom it may Concern:

I am writing in response to the stories that appeared November 21 and 22, and the related editorial of November 23, regarding the pronouncement of death of Ms. Deborah Wilson, specifically whether a pulse was detected after her arrival at the mortuary in the Office of the Chief Medical Examiner (OCME).

These stories have succeeded in sensationalizing and misrepresenting the facts, to the detriment of both the truth, and more importantly, the family of the decedent. The misimpression is conveyed from the very beginning, with the headline of the first article: "Pulse Felt in Body in D.C. Morgue." In fact, two staffers of the OCME *thought* they perceived a pulse in Ms. Wilson, which upon review of all of the facts was not possible. At the time of the examination, Ms. Wilson was in rigor mortis, an unequivocal sign of death. Paramedics also indicated that she exhibited rigor mortis when they arrived at her apartment. The paramedics from DC Fire and Emergency Medical Services had placed a cardiac monitor on her at the apartment, which also documented that there was no electrical activity of her heart: another indicator of death. There really is no doubt that Ms. Wilson was deceased when found in her home, based on consideration of the totality of the evidence. All of this was conveyed to the *Post* reporter, but the facts that would place these events in their proper context were selectively omitted. The events are not "in dispute" as the story claims; the perception of feeling a pulse was in conflict with the other evidence, a conflict that has since been resolved and explained.

With the perfect vision of hindsight, it is easy to question the investigator and medical examiner who thought they felt a pulse; I will not second-guess them. When confronted with a seemingly inexplicable (and frightening) finding, they were both thorough and cautious. Rather than take any risk of ignoring an apparent sign of life, they called 911 to reconfirm her death. Envision yourself in their place, and I challenge you to suggest a better course of action.

The *Post* castigates the District government over this episode for not providing various documents to the press. The reports in question are confidential medical records, not public documents; disclosing them violates the law. The facts have been supplied, and the questions

9-20

have been answered publicly. Nonetheless, the editorial states disingenuously, "We have no wish to prolong what must be a very difficult time for Ms. Wilson's family."

As far as the "independent review of Ms. Wilson's death" called for by the *Post*, Councilmember Kathy Patterson has requested copies of the relevant documents. The appropriate oversight role of the Council, given their authority to review privileged documents, is much better suited to the task compared to a distorted presentation in the press.

Jonathan L. Arden, MD
Chief Medical Examiner, District of Columbia