

1. On February 22, 2025, at approximately 8:02AM, I, Trooper Matthew Dunne #3943, was notified by the H Troop duty office that Randolph Police and detectives were on scene at [REDACTED] [REDACTED] investigating an incident in which an unresponsive 10-year-old female had just been transported from the home to the hospital. I contacted Lt. Daniel Zaiter, at which time I learned that [REDACTED] (DOB: [REDACTED]) had been found in bed by her father a short time ago. She was not responsive and a family member called 911. Randolph Police and Fire responded to the scene and [REDACTED] was transported to Beth Israel Deaconess Hospital – Milton. Lt. Zaiter informed me that the bedroom where [REDACTED] had been found was secured by Randolph Police. I informed Lt. Zaiter that I would be responding directly to the hospital to gather facts and requested that Randolph Police take a statement from the father and continue to gather information at the home.

2. At approximately 8:46AM, while en route to Beth Israel Deaconess Hospital – Milton, I spoke with Lt. Zaiter again, at which time I learned the juvenile female had been pronounced deceased. Upon arrival at the hospital, I met with Dr. Rachel Gershaw. She stated she had pronounced at 8:26AM. [REDACTED] had arrived by ambulance reportedly in cardiac arrest and unresponsive. During treatment at the hospital, a surgical breathing tube had been emplaced by medical staff. When questioned, Dr. Gershaw stated she had not observed any trauma to [REDACTED], nor had she observed any indications of abuse or neglect. When questioned if any family members were still present at the hospital, she stated [REDACTED]'s father and a cousin had already been there, but they had since left.

3. I entered the trauma room to view the body. I observed the surgical airway that had been emplaced. Tpr. Kyle Anderson #4658 from Crime Scene Services arrived to photograph the juvenile. Inside the trauma room I spoke with RNs Allie DiCarlo and Meaghan Hurley, both of whom had been part of the team that treated [REDACTED]. RN DiCarlo stated that medical staff initially attempted to place an oral airway, but were unable to do so because of an obstruction in the patient's airway. As a result, medical staff elected to do a surgical airway. When the incision was made, RN DiCarlo stated it relieved air pressure in the airway and the obstruction shifted up into the decedent's mouth. At that time, the item was removed from the mouth by Dr. Brady. RN DiCarlo stated the obstruction that had been blocking the airway appeared to be chewing gum. She pointed out the object which had been placed on top of the hospital bed next to the decedent's head. At my request, RN Hurley placed the object in a specimen container and labeled it for transport to the OCME. RN Hurley used latex exam gloves while handling the specimen. I observed no obvious trauma to the

1. On March 10, 2025, I, Trooper Matthew Dunne #3943, contacted the OCME and spoke with medicolegal investigator (MLI) Cally Matthews to highlight two specific notations from Beth Israel - Milton records regarding treatment of [REDACTED] on February 22nd. The first was the presence of food in the airway, as noted by Dr. Sean Curran. The second was the documented absence of the cricothyrotomy tube and RAC IV at the time of transport to the hospital morgue at 4:48PM, as noted by RN Meaghan Hurley, after the departure of Shirley P [REDACTED] and her friends and family from the hospital.
2. MLI Matthews took note of the issues I raised and stated that MLI Burns and Dr. Grivetti would be informed.