## COUNTER-TERRORISM AND SPECIAL OPERATIONS BUREAU

<u>NOTICE</u> 15.2

September 21, 2018

TO:

All Department Personnel

FROM:

Commanding Officer, Counter-Terrorism and Special Operations Bureau

SUBJECT: PROCEDURES FOR HANDLING FENTANYL

This Notice updates Chief of Detectives Notice dated September 12, 2017, Discontinuation of NARK II Testing for Cocaine or Heroin Powder Substance Containing Fentanyl-Revised, by providing procedures for Department personnel who encounter material suspected of being fentanyl or one of its analogues.

Fentanyl is a Schedule II controlled substance and a member of the opiate family of drugs. Although fentanyl and some fentanyl analogues may have a legitimate medical use, they are frequently used as an additive in other controlled substances such as heroin, cocaine, and methamphetamine, resulting in a substantially higher level of intoxication. Fentanyl places a user at significant risk for addiction, and it can cause respiratory distress and death when taken in high doses or when combined with other substances.

The enhanced level of intoxication from fentanyl comes from its increased potency, as it can be from 50 to 100 times more potent than morphine. Some fentanyl derivatives, including carfentanil, can have up to 100 times the potency of fentanyl or 10,000 times that of morphine. Fentanyl and its analogues may be encountered by Department personnel in the form of compressed or loose powder (pure or cut into other controlled substances), as counterfeit prescription pills, as a brittle tar-like substance, or as a liquid. Because of this extremely high toxicity, fentanyl and its derivatives have the potential to be used as weapons of mass destruction. In 2002, a fentanyl derivative was released at the termination of a hostage crisis at the Dubrovka Theater in Moscow, resulting in the deaths of over 200 persons and 700 additional non-fatal injuries.

Fentanyl and its analogues can present a significant hazard to Department personnel, particularly if inhaled. Personnel are most susceptible to inhalation when the drug particles are airborne. This is most likely to occur during the opening of a container or package containing a fentanylbased product, manipulating a fentanyl-based substance, or brushing/dusting fentanyl-based powders off clothing, gloves or other surfaces. Due to this inhalation hazard, the NARK II screening tests on all suspected controlled substances has been discontinued.

Incidental skin exposure to fentanyl is highly unlikely to result in toxic quantities being absorbed through the skin. Illicitly-produced fentanyl and related analogues are not designed to penetrate the skin, and although pharmaceutical grade patches are formulated for skin absorption, the material is absorbed at a controlled rate. Skin absorption of fentanyl may be accelerated when it

is mixed with alcohol; therefore, any skin contamination should be thoroughly rinsed with copious amounts of water and soap, without the use of alcohol-based hand sanitizers. For routine handling of these materials (<u>not</u> including manipulating or sampling), nitrile gloves provide sufficient protection.

Signs and symptoms of opioid intoxication, including exposure to fentanyl and its analogues, include confusion, headache, weakness, difficulty or slow breathing, drowsiness, nausea/vomiting, lightheadedness and dizziness. Department personnel who believe a fellow employee or other person has inhaled or otherwise absorbed fentanyl or its analogues (or is exhibiting the symptoms of opioid intoxication), should immediately request a rescue ambulance or ensure other appropriate medical treatment is immediately provided. Personnel who are trained and equipped with Naloxone (NARCAN) should be prepared to administer it consistent with established protocols.

## **PROCEDURES:**

- I. OFFICER'S RESPONSIBILITIES. Officers encountering suspected fentanyl (or its analogues) shall adhere to the following guidelines:
  - If the material is sealed or contained, officers shall follow existing protocols for booking evidence into Property Division without performing the preliminary NARK II testing.
    - Officers shall don the recommended personal protective equipment (PPE) as follows:
      - Nitrile or latex gloves
      - Dusk mask (N95 rated or above)
      - Eye protection
      - When possible, wear long sleeves
    - o Avoid actions that may cause the material to become airborne. Officers shall not open a sealed container suspected to be fentanyl.
    - Describe the substance on the Property or Combined Evidence Report. Collect and package without agitating the substance or producing airborne particles.
       Write the words "Suspected Fentanyl" on the outside of the sealed plastic bag, and on the Analyzed Evidence envelope.
    - o Determine the gross weight of the sample (including packaging) and include the information on the Property Report, Form 10.01.00 or Combined Evidence Report, Form 5.02.00.
    - Once the materials are collected and packaged, they should be secured in the trunk or rear cargo area of the officer's vehicle prior to transportation.
    - o After the evidence has been booked, contact Forensic Sciences Division as soon as possible and request laboratory analysis.
    - o Following completion of the evidence booking process, officers should wash hands with soap and copious amounts of water only. Alcohol-based wipes or hand sanitizers shall not be used.

- If any of the following occur, the involved personnel shall contact the Department Operations Center (DOC) and notify both the Gang and Narcotics Division (GND) Clandestine Lab Squad as well as the Hazardous Materials Unit (HMU) for guidance:
  - o If the material has breached its container and needs to be collected for evidence, the involved officers shall immediately exit and secure the location.
  - o If the scene involves large quantities of suspected fentanyl (e.g. distribution/storage facility, pill milling operation, clandestine lab, gross contamination, spill or release) or an overdose resulting in a death.

Note: If a Department employee or any other person believes they have been contaminated, officers shall monitor the exposed individual(s) for signs/symptoms of opioid intoxication and request a rescue ambulance or ensure other appropriate medical treatment is immediately provided. If a Department employee is trained, equipped and authorized to administer Naloxone or NARCAN, it can be administered (if needed).

- o Contaminated employees should not enter non-contaminated vehicles.
- o If a Department vehicle is believed to be contaminated with fentanyl or one of its analogues, officers shall immediately remove the vehicle from service.
- o If officers encounter suspected fentanyl combined with a threat, or other terrorism nexus.

Involved officers shall immediately notify a department supervisor of any adverse incident involving fentanyl or its analogues (spilled material, contamination, inadvertent inhalation or other means of accidental absorption, etc.).

II. CLANDESTINE LAB SQUAD AND HAZARDOUS MATERIALS UNIT RESPONSIBILITIES. Upon notification of a potential fentanyl incident, GND Clandestine Lab Squad and HMU personnel will establish contact, review the circumstances of the incident and determine the appropriate response. Depending on the nature of the incident, personnel from either or both GND and HMU may respond. Hazardous Materials Unit personnel may also be requested if identification is needed for the product in the field. Hazardous Materials Unit/GND Clandestine Lab Squad personnel who respond to a potential fentanyl/analogue incident, shall adhere to the following guidelines if field identification of the product is necessary.

Note: When an act of terrorism is involved or suspected, HMU personnel shall have primary investigative responsibility for handling the investigation at scene. The Hazardous Materials Unit shall select PPE, establish control zones, act as a Safety Officer, and investigate the potential act.

• If the scene involves Fentanyl manufacturing i.e. (clandestine lab), distribution/storage facility, a pill milling operation, the Clandestine Lab Squad shall have primary investigative responsibility.

- The HMU and Clandestine Lab Squad personnel shall staff the Safety Officer position as per Hazardous Materials Technician/HAZWOPER standards, determine the appropriate PPE to be worn and document the information on the related Site Safety Plan (ICS form 208).
- While wearing PPE and utilizing the required monitoring instrumentation, GND Lab Squad and/or HMU personnel shall attempt to conduct an analysis of the unknown substance for identification or hazard classification.
- Upon completion of the analysis, GND Clandestine Lab Squad and/or HMU personnel will overpack the substance(s) and decontaminate the outer bag as necessary to ensure safe transportation, handling and booking.
- Additional decontamination will be conducted as necessary at the direction of onscene HMU, GND Lab Squad, and/or LAFD personnel.
- If electronic identification methods are utilized, HMU technicians will complete a Follow-Up Investigation (Form 3.14.00) identifying the methods used for the analysis/identification of the substance(s). A copy of the related digital Spectroscopy Report and confidence check spectra, if applicable, should be included with the 3.14 for case filing consideration.
- In the event a Department vehicle has been contaminated with fentanyl or a fentanyl analogue, GND Clandestine Lab Squad personnel and/or HMU technicians will complete the necessary decontamination.
- Any Department personnel who have been exposed to fentanyl, its analogues, or any
  other hazardous material shall complete the appropriate exposure report. The GND
  Clandestine Lab Squad and/or HMU technicians will provide the affected employees
  with information concerning the involved hazardous material.
- III. SUPERVISOR'S RESPONSIBILITIES. Department supervisors responding to an incident where a Department employee has encountered a substance suspected of being fentanyl or a fentanyl analog, which is outside of a secure container or package, shall ensure that the involved Department employees adhere to the above protocols. In addition, the responding supervisor shall:
  - Notify the Watch Commander of the circumstances of the incident.
  - Ensure that any exposed employees complete an Employee's Report (Form 15.70.00) documenting the exposure and include the related information provided by HMU personnel.
  - Log the circumstances of the incident in his/her daily log.
- IV. WATCH COMMANDER'S RESPONSIBILITIES. In instances where an officer has encountered materials suspected of being fentanyl or a fentanyl analog, the Watch Commander shall:
  - Ensure that established protocols are followed.
  - Ensure the Property or Combined Evidence Report and related documents are forwarded to the appropriate investigative entity.

- Ensure the evidence packaging and associated reports are suitable for transfer to the Property Division couriers before the involved officers complete their duty shift.
- Ensure notification is made to both GND Clandestine Lab Squad and HMU personnel by contacting the DOC.
- V. **DEPARTMENT OPERATIONS CENTER RESPONSIBILITIES.** When the notification of an incident involving fentanyl or suspected fentanyl is received, DOC shall notify both the GND Clandestine Lab Squad and the HMU.

Should you have any questions regarding this Notice, please contact Captain Kathryn Meek, Commanding Officer, Emergency Services Division, at (323) 342-4267.

HORACE E. FRANK, Deputy Chief

Commanding Officer

Counter-Terrorism and Special Operations Bureau

APPROVED:

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DISTRIBUTION "D"