

OFFICE OF THE CHIEF OF POLICE

SPECIAL ORDER NO. 2

March 3, 2026

APPROVED BY THE BOARD OF POLICE COMMISSIONERS ON March 3, 2026

SUBJECT: OFFICER-INVOLVED SHOOTING OR IN-CUSTODY DEATHS (ICD) OR INJURY– CONFIDENTIAL REPORTS – REVISED; DEFINITIONS – REVISED; UPPER BODY CONTROL HOLDS, USE OF FORCE INCIDENTS – RENAMED AND REVISED; DEPARTMENT OPERATIONS CENTER NOTIFICATION – REVISED; AND MEDICAL TREATMENT REQUIRED WHEN A CAROTID UPPER BODY CONTROL HOLD IS USED – RENAMED AND REVISED

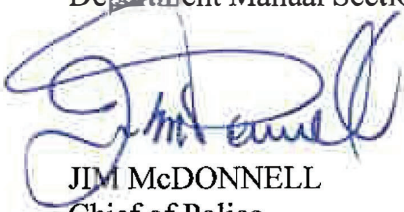
PURPOSE: The purpose of this Order is to update and revise multiple sections of the Department Manual to align with the provisions outlined in Assembly Bill 1196, titled “Peace Officers: Use of Force.” This legislation added Government Code section 7286.5(a), which explicitly prohibits law enforcement agencies from authorizing their peace officers to use carotid restraints or chokeholds to effect an arrest, to prevent escape, or to overcome resistance.

PROCEDURE:

- I. OFFICER-INVOLVED SHOOTING OR IN-CUSTODY DEATHS (ICD) OR INJURY-CONFIDENTIAL REPORTS – REVISED.** Department Manual Section 3/409.20, *Officer Involved Shootings or In-Custody Deaths (ICD) or Injury-Confidential Reports*, has been revised and is attached with the revisions in italics.
- II. DEFINITIONS – REVISED.** Department Manual Section 3/792.05, *Definitions*, has been revised and is attached with the revisions indicated in italics.
- III. UPPER BODY CONTROL HOLDS, USE OF FORCE INCIDENTS – RENAMED AND REVISED.** Department Manual Section 3/796.01, *Upper Body Control Holds, Use of Force Incidents*, has been renamed *Carotid Restraints and Choke Holds, Use of Force Incidents*, and is attached with the revisions indicated in italics.
- IV. DEPARTMENT OPERATIONS CENTER NOTIFICATION – REVISED.** Department Manual Section 4/214.50, *Department Operations Center Notification*, has been revised and is attached with the revisions indicated in italics.
- V. MEDICAL TREATMENT REQUIRED WHEN A CAROTID UPPER BODY CONTROL HOLD IS USED– RENAMED AND REVISED.** Department Manual Section 4/648.07, *Medical Treatment Required when a Carotid Upper Body Control Hold is Used*, has been renamed *Medical Treatment Required when a Carotid Restraint or Choke Hold is Used*, and is attached with revisions indicated in italics.

AMENDMENT: This Order amends Sections 3/409.20, 3/792.05, 3/796.01, 4/214.50, and 4/648.07 of the Department Manual.

AUDIT RESPONSIBILITY. The Commanding Officer, Audit Division, shall review this directive and determine whether an audit or inspection shall be conducted in accordance with Department Manual Section 0/080.30.



JIM McDONNELL
Chief of Police

Attachments

DISTRIBUTION "D"

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409.20 OFFICER - INVOLVED SHOOTING OR IN-CUSTODY DEATHS (ICD) OR INJURY - CONFIDENTIAL REPORTS. The original and all copies of the final administrative report of the following incidents shall be marked "Confidential":

- An incident involving the use of deadly force (e.g., discharge of a firearm) by a Department employee;
- *All uses of a carotid restraint or choke hold, as defined in Manual Section 3/792.05;*
- All deaths while the arrestee or detainee is in the custodial care of the Department;

Note: As per California Senate Bill 519, Force Investigation Division shall also provide a copy of the final administrative report of any In-Custody Death Incident that occurs within a Department or city jail or detention facility to the Director, In-Custody Death Review, Board of State and Community Correction.

- A use of force incident resulting in death;
- A use of force incident resulting in an injury requiring hospitalization;
- All intentional head strikes with an impact weapon or device (e.g., baton, flashlight) and all unintentional (inadvertent or accidental) head strikes that result in serious bodily injury (as defined below), hospitalization or death;

Note: Serious bodily injury, as defined in California Penal Code Section 243(f)(4), includes, but is not limited to, the following:

- Loss of consciousness;
- Concussion;
- Bone fracture;
- Prolonged loss or impairment of function of any bodily member or organ;
- A wound requiring extensive suturing; and,
- Serious disfigurement.

Note: All other unintentional head strikes shall be investigated as Level 1 Non-Categorical Use of Force (NCUOF) incidents.

- An incident in which a member of the public is bitten by a Department canine and hospitalization is required; and,
- Incidents where the Department has agreed to conduct similar critical incident investigations for a non-Department entity, such as a Los Angeles Fire Department Arson Unit.

Exception: Related crime and arrest reports shall be marked and regarded as confidential but distributed in the normal manner.

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The Commanding Officer, Force Investigation Division, will retain the original and distribute copies to the Office of the Inspector General (for the Board of Police Commissioners), Risk Management and Legal Affairs Division, and the Department's Use of Force Review Board.

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792.05 DEFINITIONS

Categorical Use of Force: A Categorical Use of Force (CUOF) is defined as:

- An incident involving the use of deadly force (e.g., discharge of a firearm) by a Department employee;
- All deaths while the arrestee or detainee is in the custodial care of the Department [also known as an In-Custody Death or (ICD)];
- A use of force incident resulting in death;
- A use of force incident resulting in an injury requiring hospitalization, commonly referred to as a law enforcement related injury or (LERI)
- Officer-involved animal shootings;
- Unintentional discharges;
- A K-9 bite or contact where hospitalization is required

Note: A K-9 contact occurs when a Department K-9 strikes or makes forcible contact with a person (other than a bite) that results in a *visible injury or complaint* of injury.

- All uses of a carotid restraint *or* choke hold; and,

Note: A carotid restraint is defined as a “vascular neck restraint or any similar restraint, hold, or other defensive tactic in which pressure is applied to the sides of a person’s neck that involves a substantial risk of restricting blood flow and may render the person unconscious in order to subdue or control the person.” A choke hold is defined as “any defensive tactic or force option in which direct pressure is applied to a person’s trachea or windpipe.”

Note: The Department does not authorize the use of *carotid restraints or choke* holds, including the use of a modified carotid, full carotid, or locked carotid hold; therefore, any use is unauthorized and shall be investigated as a categorical use of force.

- All intentional head strikes with an impact weapon or device (e.g., baton, flashlight) and all unintentional (inadvertent or accidental) head strikes that results in serious bodily injury (as defined below), hospitalization, or death;

Note: Serious bodily injury, as defined in California Penal Code *section 243(f)(4)*, includes, but is not limited to, the following:

- o Loss of consciousness;
- o Concussion;
- o Bone fracture;
- o Protracted loss or impairment of function of any bodily member or organ;
- o A wound requiring extensive suturing; and,
- o Serious disfigurement.

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Note: All other unintentional head strikes shall be investigated as Level I Non-Categorical Use of Force (NCUOF) incidents.

Substantially Involved: The term “substantially involved” includes the employee(s) applying force *and/or the employee(s)* who had a significant tactical or decision-making role in the incident.

72–Hour Brief: The briefing for the Chief of Police (COP) and other concerned command staff regarding the preliminary information about a CUOF incident.

General Training Update: Generalized training provided by In-Service Training Division (ISTD) personnel to personnel substantially involved in a CUOF incident (or *to whoever* as directed by the COP). The General Training Update (GTU) is not an inquiry into the specific details of the CUOF incident. The intent of the update is to provide involved personnel with general training on the material area of the incident (e.g., foot pursuit, vehicle pursuit) including tactical issues and actions readily identified in the CUOF incident as well as an update on the Use of Force policy. (Refer to Department Manual Section 3/796.35 for additional information regarding the GTU).

Categorical Use of Force Debrief Facilitator: A Categorical Use of Force Debrief Facilitator shall be a Department recognized expert appointed by the COP to conduct the Tactical Debrief of substantially involved personnel.

Unintentional Discharge: The unintentional discharge of a firearm regardless of cause. Unintentional discharges are evaluated and then determined to be Tactical or Non-Tactical. During the adjudication, they are then classified as “Accidental Discharges” or “Negligent Discharges.”

Tactical unintentional Discharge: Any unintentional discharge of a firearm that occurs during a tactical situation (e.g., warrant service, building search).

Non-Tactical Unintentional Discharge: Any unintentional discharge of a firearm that occurs during a *non*-tactical situation.

Accidental Discharge: The determination that the unintentional discharge of a firearm resulted from an accident such as a firearm malfunction or other mechanical failure, not the result of operator error.

Negligent Discharge. The determination that the unintentional discharge of a firearm resulted from operator error, or negligence, such as the violation of a firearm safety rule.

Drawing and Exhibiting and/or Use of Force - Administrative Disapproval - Out of Policy: A finding, supported by a preponderance of the evidence, that the actions of the employee relative to drawing and exhibiting a firearm or use of force were not within the applicable Department’s policies.

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Extensive Retraining: Formal training on identified areas or concerns completed by ISTD, subsequent to a finding of Administrative Disapproval on Tactics or Administrative Disapproval - Out of Policy on Drawing and Exhibiting or Use of Force.

Drawing and Exhibiting and Use of Force - In-Policy — No Further Action: A finding, supported by a preponderance of the evidence, that the actions of the employee relative to drawing and exhibiting a firearm or use of force were within the Department's applicable policies.

Tactics - Administrative Disapproval: A finding, supported by a preponderance of the evidence, that the tactics employed during a CUOF incident unjustifiably and substantially deviated from approved Department tactical training.

Tactics — Tactical Debrief: A finding, supported by a preponderance of the evidence, that the tactics employed during a CUOF incident did not unjustifiably *or* substantially deviate from Department approved tactical training.

Tactical Debrief: The collective review of an incident to identify those areas where actions and decisions were effective and those areas where actions and decisions could be improved. The intent of a Tactical Debrief is to enhance future performance by reviewing and analyzing Department-wide training, practices, policies, and procedures. The Tactical Debrief analysis shall not focus on or document findings, recommendations, or analysis of individual employees or the incident. (Refer to Department Manual Section 3/792.15 for additional information regarding the tactical debrief.)

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796.01 CAROTID RESTRAINTS AND CHOKE HOLDS, USE OF FORCE INCIDENTS.

Force Investigation Division shall be responsible for the administrative and criminal investigation of all *carotid restraint and choke* hold use of force incidents. Supervisors shall adhere to Department procedures regarding lethal use of force incidents upon being made aware of a *carotid restraint or choke* hold incident.

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214.50 DEPARTMENT OPERATIONS CENTER NOTIFICATION. The following incidents require notification to Department Operations Center (DOC):

Categorical Use of Force Incidents.

- An incident involving the use of deadly force (e.g., discharge of a firearm) by a Department employee;
- All deaths while the arrestee or detainee is in the custody of the Department [also known as In-Custody Death (ICD)];
- A use of force incident resulting in death;
- A use of force incident resulting in an injury requiring hospitalization, commonly referred to as a law enforcement related injury (LERI);
- Officer-involved animal shootings;
- A K-9 bite or contact where hospitalization is required;

Note: A K-9 contact *occurs* when a Department K-9 strikes or makes forcible contact with a person (other than a bite) that results in a *visible injury or* complaint of injury.

- *All uses of a carotid restraint or choke hold, as defined in Manual Section 3/792.05; and,*
- All intentional head strikes with an impact weapon or device (e.g., baton, flashlight) and all unintentional (inadvertent or accidental) head strikes that result in serious bodily injury (as defined below), hospitalization, or death.

Note: Serious bodily injury, as defined in California Penal Code section 243(f)(4), includes, but is not limited to, the following:

- Loss of consciousness;
- Concussion;
- Bone fracture;
- Protracted loss or impairment of function of any bodily member or organ;
- A wound requiring extensive suturing; and,
- Serious disfigurement.

Note: All other unintentional head strikes shall be investigated as Level I Non-Categorical Use of Force (NCUOF) incidents.

Autopsy Notifications. When notified by the coroner's office of a scheduled autopsy, DOC will make the necessary notification to the investigating officer (I/O). When DOC is unable to contact the I/O, DOC shall notify a person in the I/O's chain of command (such notification shall begin with the I/O's officer in charge and progress upward until contact is made with a person in the I/O's chain of command).

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Patrol Related Incidents.

- Barricaded suspect or SWAT call-out;
- Bomb Squad call-out;
- CARE/AMBER Alerts;
- All homicides;
- All pursuits;
- Shootings in which any person(s) are wounded;
- Incidents motivated by hatred (DR Number is required prior to notification);
- Perimeters involving outstanding suspects;
- Bank Robberies;
- Take-Over Robberies;
- Stranger Rapes; and,
- All Critical Missing persons.

Traffic Incidents.

- Fatal traffic crashes;
- Traffic crashes involving multiple victims with serious injuries;
- Traffic crashes involving children under 15 years of age with serious injuries; and,
- Unusual/Major Occurrences.

Unusual/Major Occurrences.

- Major demonstrations or mass arrests;
- Disasters including chemical spills, gas main leaks or breaks, major fires or disturbances, aircraft accidents;
- Department Operations Center (DOC) activation or deactivation;
- City Emergency Operations Center (EOC) activation or deactivation;
- Incident Command Post activation at the scene of a noteworthy or newsworthy incident;
- Incidents involving hazardous/toxic/radioactive materials;
- Citywide Tactical Alerts; and,
- Acts of Terrorism.

Incidents Involving Department Personnel.

- Alleged serious misconduct or arrest of Department employee(s);
- Death or hospitalization of Department employee(s);
- Death or serious illness/injury to immediate family member of a Department employee;
- Rescue Ambulance Transport of on-Duty Personnel; and,
- Negligent discharge of a firearm.

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Other Notable Incidents.

- Extensive damage to Department equipment;
- Newsworthy incident involving the Department in any way;
- Other incident that an officer in charge or watch commander feels should be brought to the attention of the Department;
- Occupational related death or life-threatening injury at a workplace, or a serious environmental incident (requires DOC to notify the Los Angeles District Attorney Command Center); and,
- Incidents involving celebrities or noteworthy persons of interest.

Note: All personnel are encouraged to call DOC at any time they are in doubt as to whether or not an incident requires notification.

Officer's Responsibilities. The senior officer at the scene of an incident requiring DOC notification shall request a supervisor to respond to the scene.

Supervisor's Responsibilities. The first supervisor to respond to an incident requiring DOC notification shall ensure their watch commander and DOC have been apprised of the incident as soon as practical and document the incident in a Sergeant's Daily Report, Form 15.48.00.

Watch Commander's Responsibilities. Upon learning of a reportable incident, the watch commander or officer in charge shall ensure that DOC has been notified and document the incident in a Watch Commander's Daily Report, Form 15.80.00.

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648.07 MEDICAL TREATMENT REQUIRED WHEN A CAROTID *RESTRAINT OR CHOKE HOLD IS USED.* Whenever a modified carotid, full carotid, or locked carotid *hold or choke* hold is used, the suspect shall be immediately examined by a physician at a contract hospital or jail dispensary.

Note: If the suspect is rendered unconscious and fails to regain consciousness immediately, officers shall request an ambulance.