



TRAINING BULLETIN

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NARCOTICS INGESTION

PURPOSE

The purpose of this Training Bulletin is to provide procedural guidelines and consistent definitions to employees who come into contact with persons who are believed to have ingested narcotics.

The Department's primary objective in dealing with suspects who are believed to have ingested narcotics is the preservation of life. The secondary objective is to preserve and recover evidence whenever possible. Officers who are involved in narcotics enforcement or who contact persons suspected of ingesting or attempting to ingest narcotics must have clear guidelines upon which they can rely to make sound decisions. Understandably, officers involved in enforcement of narcotics laws have a duty to timely investigate narcotic violations and process arrestees. Often, suspects fearing arrest will ingest or attempt to ingest controlled substances to avoid prosecution. The Department has a responsibility to ensure that suspects who face a potential medical emergency receive the necessary medical attention, regardless of the impact to the investigation. Consequently, experience has revealed that narcotic suspects may be at risk if they **chewed** a narcotic for sufficient time to allow for ingestion (absorption) to occur, regardless of whether they actually swallowed the narcotic.

DEFINITIONS

Absorption. The assimilation of something into the body.

Ingestion. To take into the body by the mouth for digestion or absorption.

Narcotic. Any class of substances or drugs that reduces pain, induces sleep and may alter mood or behavior, that are also illegal.

Note: For definition purposes in this context, the term "narcotics" although not technically accurate, will be used to refer to any drug or controlled substance.

Narcotic Suspects. Suspects arrested or detained for any narcotics-related investigations or violations.

PROTOCOL

When an employee reasonably believes that a detainee or arrestee has ingested a narcotic (swallowed or chewed on the substance for any period of time, versus merely holding the substance in their mouth), which could present a health hazard, the employee shall summon a Los Angeles Fire Department (LAFD) Rescue Ambulance (RA) for assessment and treatment without unreasonable delay. If such incident occurs during an ongoing tactical incident, officers should consider moving the suspect out of an unsecured area to an LAFD staging area in order to expedite treatment.

Potential Signs of Distress

- Loss of consciousness
- Semi consciousness
- Apparent trouble breathing
- Choking
- Profuse sweating
- Non-responsiveness (mental state)
- Loss of mobility (apparent inability to move or walk)
- Vomiting
- Extreme hyperactivity
- Extremely violent conduct
- Apparent imperviousness to pain (*super-human strength*)

Employees should ask the suspect if he or she has swallowed a narcotic and encourage an honest reply by explaining the serious consequences of swallowing narcotics. When such measures are taken in a timely manner, they may save the lives of suspects who unknowingly place themselves at serious risk of severe injury or death due to overdose.

When the suspect has been detained or is in custody, and in keeping with the Department guiding principle of reverence for human life, officers can use reasonable methods or techniques to prevent the suspect from swallowing a narcotic. Examples of such techniques are tilting the arrestee's head downwards (chin towards chest), or holding the suspect's nose closed by pinching the nostrils to prevent swallowing. Officers shall not apply any direct force or pressure to the neck or throat of any person to prevent them from swallowing narcotics.

When an arrestee or detainee who is in custody has been transported to a medical facility after ingesting narcotics, the arresting officers shall:

- Notify a supervisor as soon as practical;
- Respond to the medical facility;
- Advise the attending physician of the situation, including an estimate of the amount of time elapsed since the narcotic was ingested, and if possible, the type, quantity, and packaging of the narcotic ingested;
- Attempt to obtain a signed Medical Release Form from the arrestee or detainee;
- Book any evidence obtained as a result of the medical treatment in accordance with established procedures;
- Include in any related report a detailed statement of the incident, medical treatment received, and attach any medical record; and,

- Seek advice from the Watch Commander or Detective Watch Commander on whether to maintain custody of the suspect, or how to properly release the suspect and pursue (or decline) prosecution.

Points to Remember

- Only reasonable techniques may be used to prevent swallowing of narcotics
- Primary objective is preservation of life
- Secondary objective is recovery of evidence
- Advise the suspect of the risk of overdose
- Call RA if ingestion is believed to have occurred

CONCLUSION

Often, suspects fearing arrest will ingest or attempt to ingest controlled substances to avoid prosecution. Consequently, experience has revealed that narcotic suspects may be at risk if they **chewed** a narcotic for sufficient time to allow for ingestion (absorption) to occur, regardless of whether they actually swallowed a narcotic. The Department has a responsibility to ensure that suspects who face a potential medical emergency receive the necessary medical attention, regardless of the impact to the investigation.

This Training Bulletin cancels and supersedes Use of Force–Tactics Directive No. 9.2, Narcotics Ingestion, dated April 2014.

Field Training Services Unit
Police Training and Education

DISTRIBUTION “A”

Attachment: Suspected Fentanyl Handling Protocol

LOS ANGELES POLICE DEPARTMENT

Suspected Fentanyl Handling Protocol

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 containers or packages containing a fentanyl-based 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. 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 as follows:
 - Nitrile or latex gloves
 - Dusk mask: (N95 rated or above)
 - Eye protection
 - When possible, wear long sleeves
 - 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.
 - 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.
 - After the evidence has been booked, contact Forensic Sciences Division as soon as possible and request laboratory analysis.
 - 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, at (213) 484-6700, and notify both the Gang and Narcotics Division Clandestine Lab Squad as well as the Hazardous Materials Unit for guidance:
 - If the material has breached its container and needs to be collected for evidence, the involved officers shall immediately exit and secure the location.

LOS ANGELES POLICE DEPARTMENT

Suspected Fentanyl Handling Protocol

- 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).

- Contaminated employees should not enter non-contaminated vehicles.
- If a Department vehicle is believed to be contaminated with fentanyl or one of its analogues, officers shall immediately remove the vehicle from service.
- 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.).