


POLICY 502.2	INJURED PRISONERS	
	REVISED: 05/98, 12/00, 03/03, 10/04, 03/08, 08/11, 01/14	RELATED POLICIES: 119.3, 507
	CFA STANDARDS: 18.16, 29.01, 29.05	REVIEWED: 11/03, 03/08, 08/11, 01/14

A. PURPOSE

The purpose of this policy is to direct Department members in the care of prisoners who are injured, unconscious or in need of immediate medical attention.

B. GENERAL PROCEDURES

NO PRISONER WILL BE ACCEPTED BY THE BOOKING OFFICER IF HE/SHE APPEARS TO BE SERIOUSLY INJURED, UNCONSCIOUS, OR IN NEED OF IMMEDIATE MEDICAL ATTENTION.

1. It will be the responsibility of the arresting officer to summon EMS to transport injured prisoners to the hospital for treatment. A police officer will ride in the EMS vehicle when a prisoner is being transported for treatment. Once EMS makes contact with a prisoner, the arresting officer will relinquish control of him/her to EMS. However, the arresting officer will maintain contact with the prisoner for security purposes. All prisoners transported by EMS will be restrained through the use of handcuffs, flex cuffs, leg shackles or hospital restraints. Prior to being transported to the hospital and prior to leaving the hospital, the arresting officer will search the prisoner for weapons and/or contraband.
 - a. When treatment has been received, the arresting officer will acquire a Uniform Referral Form (medical clearance form) from the hospital stating **CLEARED FOR JAIL**. Once the prisoner is medically cleared, the arresting officer or District Unit will transport the prisoner to BSO intake without delay.
 - b. If the prisoner refuses treatment, this will be so noted. The Uniform Referral Form will still be given to BSO intake.
2. E.M.S. and/or Fire Department personnel will treat prisoners in need of immediate, emergency medical attention at the scene. They will then be transported by EMS to whichever facility is dictated by the condition of the individual, as determined by qualified paramedics.
3. EMS should be requested to evaluate and transport any prisoner who appears to be intoxicated and the police have a medical concern for them. EMS will transport the prisoner to the closest appropriate medical facility prior to being received by the booking officer.

4. EMS may be requested to evaluate prisoners who have been bitten by a police canine. If EMS responds to the scene, they will transport the prisoner to a medical facility.
5. It will be the responsibility of the arresting officer to determine if a prisoner requires medical attention at the time of the arrest and prior to booking, regardless of whether the injury was a pre-existing or sustained during the arrest. Pre-existing injuries will be documented in the offense report with the cause (if known) and notification to a supervisor of the need for medical attention. Injuries sustained as a result of officer action will require the response of a supervisor who will investigate the circumstances as directed in policy 119.3, Response to Resistance-Reporting, Evaluation and Investigation. Any arrestee who has been subjected to the use of subject control spray WILL BE evaluated by EMS and transported to a medical facility for medical clearance.

NOTE: When there is doubt as to whether or not to take an injured or ill prisoner to the hospital, the officer shall contact a supervisor. If the supervisor determines that the prisoner should receive medical attention, the arresting officer will notify EMS and request that they respond to evaluate the prisoner. If EMS determines that the prisoner should be transported to a medical facility, they (EMS) will conduct the transport. EMS shall make the final determination regarding patient care issues.

6. Any prisoner determined to need medical treatment but refuses to accept the treatment, will still be taken to an emergency room by EMS. Hospital personnel will fill out a Uniform Referral Form and indicate that the prisoner "REFUSES TREATMENT." An officer will sign as a witness that the prisoner refused medical/EMS treatment. The officer will attach a copy of the form to the Probable Cause Affidavit (P.C.).
7. No prisoner will be forced to have medical treatment, but must be given a choice. However, a police officer may order a prisoner to be transported to a hospital for an evaluation.

C. SECURITY AT THE HOSPITAL

1. In order to enhance officer safety, upon arrival at the hospital, the accompanying officer shall notify the hospital detail officer that a prisoner is being treated. Further, the accompanying officer will advise the detail officer of the nature of the charges and injury or illness. This in no way relieves the accompanying officer of his/her responsibility for the security of the prisoner.
2. While at the hospital the arrestee shall remain handcuffed at all times, except when it is necessary to facilitate treatment.
3. If it is necessary to remove the handcuffs, the officer should seek and use other approved restraint devices (soft leather or cloth restraints) if available and appropriate.

4. At no time shall an arrestee be left unattended whether restrained or not. An officer must be present at all times, unless a medical authority must remove the prisoner for necessary treatment.
5. When the arrestee is charged with a misdemeanor and is admitted to the hospital, the transporting officer shall contact a supervisor who shall contact a lieutenant. The lieutenant shall determine if an officer will be assigned to guard the prisoner or if the prisoner should be released or issued an NTA in accordance with Department Policy. The arresting officer may also complete a "NOT IN CUSTODY" Probable Cause Affidavit. If a "NOT IN CUSTODY" Probable Cause Affidavit is completed, the arresting officer is responsible for filing with the State Attorney's Office for issuance of a warrant. The Broward Sheriff's Office will not take over security of any prisoner arrested for a misdemeanor. When the prisoner is arrested on a misdemeanor warrant and is admitted to a hospital, the prisoner shall be released from custody. The officer shall have the Communications Center, Teletype Unit notify the Sheriff's Office to put the warrant back in the system. Hospital personnel should be notified of the situation and requested to contact the Police Department upon discharge of the patient.

D. FELONS – Non-Bondable

Felons who are charged with a non-bondable offense and require hospitalization may have an officer assigned to guard them at the discretion of the Duty Lieutenant for the applicable district.

1. The arresting officer in this case will insure that all appropriate paperwork (including Offense Report and Probable Cause Affidavits) is completed prior to securing from his/her tour of duty.
2. When a prisoner is admitted to a hospital, the arresting/custodial officer or detective will call the Broward Sheriff's Office (BSO) booking desk and advise them of the information. BSO will respond and take custody (guard) of the prisoner. The arresting/custodial officer will leave a copy of the Probable Cause Affidavit (P.C.) with the responding deputy. The arresting/custodial officer shall respond to the BSO booking desk and submit the P.C. to them so they can officially book the prisoner into their system. This occurs only when a prisoner is admitted. If there is a long wait at the Emergency Room and the prisoner is not being admitted, the arresting officer must stay with the prisoner until taken to the Fort Lauderdale Police Department's booking facility.

E. FELONS CHARGED WITH BONDABLE OFFENSES

If hospitalization is to be prolonged, it is more desirable to complete a "NOT IN CUSTODY" Probable Cause Affidavit and file with the State Attorney's Office for issuance of a warrant.