PURPOSE
To obtain medical/psychiatric treatment for prisoners in police custody.

DEFINITION
PRISONER REQUIRING PSYCHIATRIC TREATMENT - an emotionally disturbed prisoner, who has attempted suicide, is extremely violent, or exhibits other irrational behavior.

PROCEDURE
When a prisoner in custody requires medical/psychiatric treatment:

UNIFORMED MEMBER OF THE SERVICE
1. Request ambulance and remove prisoner to hospital directly from place of arrest, if necessary.
   a. Accompany prisoner to hospital.
   b. Make ACTIVITY LOG (PD112-145) entry.
      (1) Include name of person notified re: Medic Alert Emblem, if worn.
      (2) Include Ambulance Call Report (ACR) number or Patient Care Report (PCR) number related to the prisoner (obtain from responding ambulance attendant).
   c. Notify desk officer.

SUPERVISOR AT SCENE
2. Ensure that MEDICAL TREATMENT OF PRISONER (PD244-150) form is prepared in accordance with step “4” below and accompanying ADDITIONAL DATA statements under heading, “PREPARATION OF MEDICAL TREATMENT OF PRISONER FORM”, when a prisoner is removed from the scene of an arrest direct to a hospital for medical/psychiatric treatment.
   a. Review and sign Section I of MEDICAL TREATMENT OF PRISONER form.

DESK OFFICER, COMMAND OF ARREST/ BOROUGH COURT
3. Request ambulance and have prisoner removed to hospital, if medical/psychiatric/drug addiction treatment is required during arrest processing (see ADDITIONAL DATA statements under heading, “LIFE-THREATENING MEDICAL SITUATIONS” and “SUSPECTED INGESTION OF NARCOTICS/OTHER DANGEROUS SUBSTANCES”).
   a. Make Command Log entry.
      (1) Include name of person notified re: Medic Alert Emblem, if worn.
      (2) Include Ambulance Call Report (ACR) number or Patient Care Report (PCR) number related to the prisoner (obtained from the responding ambulance attendant).

4. Ensure that MEDICAL TREATMENT OF PRISONER form is prepared for each prisoner who:
   a. Receives medical/psychiatric treatment, OR
   b. Refuses treatment after claiming injury or illness, OR
   c. Is in apparent need of treatment, OR
d. May require prescribed medication, OR

e. Volunteers his/her positive status regarding a communicable disease, if not documented on Prisoner Movement Slip, OR

f. Already has previously treated injuries.

5. Direct, in non-emergency situations, that prisoners requiring medical, psychiatric, or drug addiction treatment, which may result in being admitted to the hospital, be removed to a local hospital for treatment and evaluation.

6. Confer with medical staff at the local hospital. If the medical staff at that hospital determines that the prisoner has a psychiatric condition that requires admission to a hospital, the prisoner will be transferred to the appropriate hospital as determined by medical staff, using only a private ambulance under contract with that local hospital. FDNY Emergency Medical Service ambulances will NOT be used to transport the prisoner.

Generally:

a. MALE prisoners requiring admission for psychiatric treatment will be transported to Bellevue Hospital.

b. FEMALE prisoners requiring admission for psychiatric treatment will be transported to Elmhurst General Hospital.

7. Assign uniformed member of the service to escort prisoner.

a. Ensure that appropriate relief is provided to uniformed members of the service guarding prisoners.

8. Make entry in Command Log when prisoner leaves.

9. Direct arresting officer to continue arrest processing, and have another uniformed member of the service assigned to escort prisoner, when possible.

ARRESTING/ESCORTING OFFICER

10. Rear cuff and place leg restraints on prisoner before transporting to hospital.

a. Handcuffs and leg restraints will be double locked.

11. Remain with prisoner at all times in hospital.

12. Notify the desk officer of prisoner status prior to transport from local hospital to Bellevue or Elmhurst General Hospital.

13. Ride inside the ambulance when accompanying the prisoner to either Bellevue or Elmhurst General Hospital.

14. Make ACTIVITY LOG entry.

a. Include name of person notified re: Medical Alert Emblem, if worn.

b. Include Patient Identification Number (in place of Ambulance Call Report [ACR] number or Patient Care Report [PCR] number) related to the prisoner (obtained from hospital intake personnel).

15. Notify desk officer, precinct of arrest/borough court section facility, regarding Medical Alert Emblem and Patient Identification number.
DESK OFFICER, COMMAND OF ARREST/ BOROUGH COURT SECTION

   a. Include name of person notified re: Medical Alert Emblem.
   b. Include Patient Identification Number (in place of Ambulance Call Report [ACR] number or Patient Care Report [PCR] number) related to the prisoner [obtained from hospital intake personnel].

17. Make the appropriate notation of the prisoner’s new location and determine, what, if any, additional resources are needed for the transfer, if a prisoner is transferred from the initial hospital to another hospital for psychiatric treatment.

ESCORTING OFFICER

18. Request room change if security is inadequate.

19. Do not remove handcuffs or leg restraints, unless requested by attending physician.
   a. If requested to remove handcuffs or leg restraints, inform physician of circumstances of arrest.
   b. If physician still requests removal, request the response of the patrol supervisor to evaluate the need for additional personnel and equipment (including Emergency Service Unit) to ensure safety during prisoner treatment prior to removal of handcuffs or leg restraints.

20. Remain immediately outside room and attempt to maintain visual contact even if requested to leave examination room after informing physician of circumstances of arrest.

21. Make appropriate entries of foregoing in ACTIVITY LOG and request attending physician to sign entries.
   a. Indicate physician’s refusal to sign any entries.

22. Complete entries on MEDICAL TREATMENT OF PRISONER form.

23. Notify desk officer, precinct of arrest, who will notify borough court section concerned immediately, if prisoner is admitted to any hospital (see P.G. 210-02, “Hospitalized Prisoners”).

24. Forward copy of ON-LINE BOOKING SYSTEM ARREST WORKSHEET (PD244-159) to Department of Correction supervisor for any prisoner admitted for psychiatric treatment in Bellevue or Elmhurst General Hospitals.

25. Request borough court section concerned to supply transportation, if available, to return prisoner to command of arrest/borough court section facility, as appropriate, when prisoner is released to police custody.
   a. Return prisoner to command of arrest if arrest processing not completed thereat.
   b. Remove prisoner to borough court section facility if arrest processing was completed at command of arrest.
      (1) Confer with borough court section supervisor prior to transporting a prisoner who is confined to a wheelchair or otherwise mobility impaired, and be guided by his/her direction regarding lodging and further processing.

26. Deliver completed MEDICAL TREATMENT OF PRISONER form to desk officer, borough court section facility.
**DESK OFFICER, BOROUGH COURT SECTION**

27. Forward three copies of completed **MEDICAL TREATMENT OF PRISONER** form (white, blue, and pink) with prisoner to Department of Correction.
   
a. Retain fourth (buff) copy of **MEDICAL TREATMENT OF PRISONER** form at borough court section facility.

28. Direct arresting/escorting officer to obtain receipt for prisoner on pink copy of form and return to borough court section facility.
   
a. Complete entries on buff copy of form retained at desk and return to command of arrest.
   
b. File pink copy of form at borough court section facility.
   
c. Forward duplicated copy of **MEDICAL TREATMENT OF PRISONER** to arresting officer’s command for file, if different than command of arrest.

**DESK OFFICER, COMMAND OF ARREST**

29. File buff copy of **MEDICAL TREATMENT OF PRISONER** form in folder maintained at desk.

**ADDITIONAL DATA**

**PRISONER SECURITY**

To prevent escape, leg restraints will be placed on ALL prisoners transported to a hospital for medical treatment. If the desk officer determines that extenuating circumstances exist that preclude placing leg restraints on a prisoner that is being transported to the hospital for medical treatment, a Command Log entry will be made detailing the reasons why.

All procedures detailing the use of handcuffs remain in effect. When using leg restraints on a prisoner, the escorting officer is to exercise caution to prevent the prisoner from falling.

Patrol supervisors and desk officers shall assign additional personnel to accompany arresting officers who remove prisoners to hospitals for treatment, based on the following:

a. Type of offense (e.g., violent crime, resisting arrest)

b. Physical size of prisoner

c. Prisoner’s past history, if known (e.g., history of violence, escape attempts)

d. Suspected escape opportunity

e. Lack of physical signs of injury (e.g., faking injury to attempt escape)

In the event the prisoner must be placed in a hospital bed or on a gurney:

a. Handcuff prisoner (double locked) to the bed or gurney

b. Utilize second pair of handcuffs to handcuff prisoner’s free wrist to bed or gurney, before removing first pair of handcuffs for treatment

c. Keep prisoner under constant observation, even if prisoner is handcuffed to a hospital bed or gurney, to prevent escape at all times.

Supervisors may also consider the assignment of Emergency Service Unit for extraordinary circumstances.

Patrol supervisors and desk officers shall direct that long chain handcuffs and leg restraints be used to secure prisoners when appropriate.
LIFE-THREATENING MEDICAL SITUATIONS

IN ALL LIFE THREATENING SITUATIONS, APPARENT HEART ATTACK, BREATHING DIFFICULTIES, SERIOUS FRACTURES, SEVERE HEMORRHAGING, EPILEPSY, EXTREME EMOTIONAL DISTURBANCE, ETC., A PRISONER WILL BE REMOVED TO THE NEAREST HOSPITAL.

SUSPECTED INGESTION OF NARCOTICS/OTHER DANGEROUS SUBSTANCES

When a uniformed member of the service observes or suspects that a prisoner has ingested a narcotic or other dangerous substance, the prisoner will be transported from the place of arrest DIRECTLY to the nearest hospital facility. The uniformed member of the service WILL PROMPTLY notify the communications section dispatcher and the patrol supervisor upon observation or suspicion of ingestion, when transport to hospital is initiated, and upon arrival at the hospital. Emergency Medical Service (EMS) and hospital personnel will be informed of the quantity and type of substance ingested, if known. UNDER NO CIRCUMSTANCES will a prisoner who has ingested a narcotic or other dangerous substance be transported to the command for arrest processing prior to receiving medical treatment.

Whenever a member of the Criminal Justice Bureau assigned to a Borough Court Section observes, suspects, is informed of, or otherwise becomes aware that a prisoner in the custody of the Court Section may have ingested a narcotic and/or other dangerous substance and has not already been treated by a doctor for that condition, the member will immediately notify the Borough Court Section desk officer. The Borough Court Section desk officer will make a Command Log entry and arrange for the immediate removal of the prisoner to the nearest hospital emergency room. In those Borough Court Sections where the Emergency Medical Service is situated, the Borough Court Section desk officer will request the assistance of the assigned Emergency Medical Technicians (EMT) regarding the prisoner’s medical treatment. However, in all cases where ingestion is suspected, it is the responsibility of the supervisor to ensure that the prisoner is removed to the nearest hospital emergency room for treatment.

In all cases, the Borough Court Section desk officer will document the occurrence in the Command Log and direct the preparation of the MEDICAL TREATMENT OF PRISONER form.

RELIEF OF ARRESTING OFFICER GUARDING HOSPITALIZED PRISONER

In addition, when a prisoner is transported directly from the place of arrest directly to a hospital facility, the desk officer, precinct of arrest, will ensure that the arresting officer is relieved as soon as possible to expedite arrest processing. The arresting officer will comply with P.G. 210-02 “Hospitalized Prisoners” in regards to vouchering prisoner’s property.

TREATMENT OF PRISONERS DETAINED IN DETENTION FACILITIES

When a prisoner who has been detained at a borough court section or other detention facility, but has not been arraigned, requires medical/psychiatric/drug addiction attention, the borough court section or command supervisor will ensure that the MEDICAL TREATMENT OF PRISONER form is prepared and distributed, as indicated.
Whenever a member of the Criminal Justice Bureau assigned to a Borough Court Section is informed of, or otherwise becomes aware that a prisoner in the custody of that Court Section requires medical/psychiatric/drug addiction attention, that member will immediately notify the Borough Court Section desk officer. The Borough Court Section desk officer will make a Command Log entry and ensure that medical treatment is provided. In Borough Court Sections where the Emergency Medical Service is situated, the Borough Court Section desk officer will request the assistance of the assigned Emergency Medical Technicians (EMT) regarding the prisoner’s medical treatment. However, if it is determined that a prisoner requires medical attention at a hospital emergency room, the supervisor is responsible to ensure that the prisoner is transported immediately for treatment.

In all cases, the Borough Court Section desk officer will document the occurrence in the Command Log and direct the preparation of a MEDICAL TREATMENT OF PRISONER form.

PRE-ARRAIGNMENT PRISONERS REQUIRING PRESCRIPTION MEDICATIONS

If, during the course of treating a pre-arraignment prisoner, a hospital physician or his/her health care assistant indicates the need for information concerning invoiced medication belonging to the prisoner, the individual will be given the appropriate PROPERTY CLERK INVOICE (PDS21-141) number. Furthermore, such individuals will be advised on how to contact the desk officer in the NYPD facility where the medication is invoiced. Desk officers receiving telephone inquiries of this nature are authorized to provide the name of the medication. If the hospital physician, after learning the name of the medication, advises the desk officer that the medication is not available at the hospital and requests that the medication be delivered to the hospital, the desk officer shall comply with the request. In this instance, the desk officer shall:

a. Check the name of the medication against the PROPERTY CLERK INVOICE, as appropriate.

b. Complete the “R.T.O.” function utilizing the Property and Evidence Tracking System. Sign rank and name and include pertinent details under “Remarks” section including name of physician, hospital, and name of uniformed member assigned to deliver medication.

c. Release medication to uniformed member assigned to make delivery.

d. Make appropriate Command Log entry with all pertinent details.

The member assigned to deliver the medication to the authorized physician shall indicate receipt thereof by requesting the physician to sign the member’s ACTIVITY LOG. If the physician refuses to sign, the uniformed member of the service concerned will note such fact in his/her ACTIVITY LOG, making sure to include the full title and name of the person refusing and all details involved. In the event that any medication is returned to the command, it will have to be invoiced again pursuant to this procedure.

If a physician at a hospital provides a pre-arraignment prisoner with medication to be taken by the prisoner during the pre-arraignment period, the uniformed member accompanying the prisoner will take custody of the medication until the member reaches the court section for processing. At this location the medication will be given to the available emergency medical technician (EMT) to hold until the prisoner needs to self-administer it. If a pre-arraignment prisoner needs further medication during the period of pre-arraignment detention in any form that is not authorized to be administered by an EMT, he or she will be taken to a hospital for that medication.
Prepare **MEDICAL TREATMENT OF PRISONER** form when a properly identified relative or member of the prisoner’s household appears at any Department facility where the pre-arraignment prisoner is located and:

a. indicates that the prisoner has a medical condition or needs medication, AND/OR

b. brings medication in a pharmacy container with the prisoner’s name.

The uniformed member preparing the form will ensure that all pertinent information is entered in the appropriate captions and in the “Remarks” section, including the name, address, and telephone number of the relative or household member, name of medication(s), nature of medical condition(s), and the name, address, and telephone numbers of the pharmacy and any physician noted on the label of any pharmacy container.

If as described above a properly identified relative or member of the prisoner’s household appears at a Department facility and the pre-arraignment prisoner in question is not being detained there, the uniformed member of the service (UMOS) concerned will determine if the prisoner is still in Department custody. If so, the UMOS will ascertain the location and inform his/her supervisor. This supervisor will in turn contact the desk officer/supervisor at the Department facility where the prisoner is being held. Both the supervisor making the notification and the desk officer/supervisor receiving it will make respective command log entries. The entries will include the time of notification, the prisoner’s name, and the name of the desk officer/supervisor receiving/making the notification. In addition, the desk officer/supervisor at the lodging facility receiving information relating to the prisoner’s need for prescription medication shall prepare a **MEDICAL TREATMENT OF PRISONER** form.

Uniformed members of the service will not be required to accept medication from relatives or household members for the purpose of providing it to the prisoner.

Uniformed members of the service will not be required to invoice prisoner medications brought to the command by relatives or household members.

**PREPARATION OF MEDICAL TREATMENT OF PRISONER FORM**

In the event that a prisoner has prescription medications in his/her possession, such will be invoiced as required in P.G. 208-03, “Arrests - General Processing.” In addition, with respect to any such medications, ensure that all appropriate captions on the **MEDICAL TREATMENT OF PRISONER** form are properly filled out. Information listed on the pharmacy label of a prisoner’s prescription container, which may include the name, address, and telephone number of the pharmacy/physician concerned, will be recorded in the appropriate captions and in the “Remarks” section of the form. Ensure that the “Remarks” section also contains any specific instructions from Emergency Medical Service (EMS) staff regarding the care of the prisoner, and/or if EMS staff brought the prisoner to a hospital room for further treatment. The appropriate check off boxes will be used to document that a prisoner has refused medical aid.

The Ambulance Call Report (ACR) number or Patient Care Report (PCR) number related to the prisoner will be entered in the appropriate caption in Section I of the **MEDICAL TREATMENT OF PRISONER** form. An ACR number is assigned when a prisoner is transported to hospital via ambulance; a PCR number, in contrast, is assigned when a prisoner is transported to a hospital by any other means, e.g., RMP.
In any instance where either a prisoner, attending physician, or hospital staff member, refuses to complete or sign in the designated caption(s) on the **MEDICAL TREATMENT OF PRISONER** form, the uniformed member of the service concerned will note such fact on both the form and in his/her **ACTIVITY LOG**, making sure to include the full title and name of the person refusing and all details involved.

The Health and Hospitals Corporation (HHC) is entitled to a copy of the **MEDICAL TREATMENT OF PRISONER** form. Therefore upon completion of the treatment of the prisoner, the uniformed member of the service concerned will allow hospital personnel to photocopy this form.

A copy of **MEDICAL TREATMENT OF PRISONER** form **MUST** accompany the prisoner until his/her custody is no longer the responsibility of this Department.

When a prisoner dies, is seriously injured in connection with a police action, or sustains an injury resulting from a police firearms discharge, the uniformed member of the service will immediately request the response of the patrol supervisor, safeguard the possible crime scene and provide and/or secure appropriate medical attention for the injured prisoner. The patrol supervisor will respond to the scene and comply with **P.G. 221-05, “Person Dies or Sustains a Serious Injury and is Likely to Die in Police Custody or in Connection With Police Action.”**

**RELATED PROCEDURES**

- Arrests - General Processing (**P.G. 208-03**)
- Desk Appearance Ticket - Hospitalized Prisoner (**P.G. 208-30**)
- Hospitalized Prisoners (**P.G. 210-02**)
- Bedside Arraignment (**P.G. 210-05**)
- Mentally Ill or Emotionally Disturbed Persons (**P.G. 221-13**)
- Person Dies or Sustains a Serious Injury and is Likely to Die in Police Custody or in Connection With Police Action (**P.G. 221-05**)

**FORMS AND REPORTS**

- **ACTIVITY LOG** (**PD112-145**)
- **MEDICAL TREATMENT OF PRISONER** (**PD244-150**)
- **ON-LINE BOOKING SYSTEM ARREST WORKSHEET** (**PD244-159**)
- **PROPERTY CLERK INVOICE** (**PD521-141**)