

## **PREPARATION AND ADMINISTRATION OF CHEMICALS**

### **A. Obtaining Chemicals and Equipment**

1. Upon receipt of the Order Setting Execution Date, the H Unit Section Chief shall:
  - a. Confirm and ensure all equipment necessary to properly conduct the procedure is on site, immediately available for use and functioning properly.
  - b. Ensure all medical equipment, including a backup electrocardiograph, is on site, immediately available for use and functioning properly.
  - c. Ensure the chemicals are ordered, arrive as scheduled and are properly stored. The chemicals shall be under the direct control of the H Unit Section Chief and stored in a secured, locked area and monitored to ensure compliance with manufacturer specifications.

### **B. Preparation of Chemicals**

1. At the appropriate time, the H Unit Section Chief shall transfer custody of the chemicals to the Special Operations Team to begin the chemical(s) and syringe preparation in the chemical room, under the direct supervision by the Intravenous (IV) Team leader.
2. The Special Operations Team leader shall assign a team member(s) to assist preparing each chemical and the corresponding syringe under the supervision of the IV Team leader. The IV Team leader, with the assistance of the Special Operations Team members, shall prepare the designated chemical and syringes for a total of one (1) complete set of chemicals. One (1) full set of syringes is used in the implementation of the death sentence and an additional complete set of the necessary chemicals shall be obtained and kept available in the chemical room.
3. The IV Team leader, with the assistance of a Special Operations Team member, shall be responsible for preparing and labeling the assigned sterile syringes in a distinctive manner. The specific chemical contained in each syringe will be identified with the following information as set forth in the chemical charts:
  - a. Assigned number
  - b. Chemical name
  - c. Chemical amount
  - d. Designated color

This information shall be pre-printed on a label, with one label affixed to each syringe to ensure the label remains visible.

C. Chemical Charts

1. CHART A: One (1) Drug Protocol with Pentobarbital

CHEMICAL CHART	
Syringe No.	Label
1A	2.5 gm pentobarbital <b>GREEN</b>
2A	2.5 gm pentobarbital <b>GREEN</b>
3A	60 ml heparin/saline, <b>BLACK</b>

- a. Syringes 1A and 2A shall each have a dose of 2.5 grams of pentobarbital for a total of 5 grams. Each syringe containing pentobarbital shall have a **GREEN** label which contains the name of the chemical, chemical amount and the designated syringe number.
- b. Syringe 3A shall contain 60 milliliter of heparin/saline solution at a concentration of 10 units of heparin per milliliter. The syringe shall have a **BLACK** label which contains the name of the chemical, chemical amount and the designated syringe number.

2. CHART B: One (1) Drug Protocol with Sodium Pentothal

CHEMICAL CHART	
Syringe No.	Label
1A	1.25 gm sodium pentothal, <b>GREEN</b>
2A	1.25 gm sodium pentothal, <b>GREEN</b>
3A	1.25 gm sodium pentothal, <b>GREEN</b>
4A	1.25 gm sodium pentothal, <b>GREEN</b>
5A	60 ml heparin/saline, <b>BLACK</b>

- a. Syringes 1A, 2A, 3A, and 4A shall each contain 1.25 grams/50 milliliter of sodium pentothal in 50 milliliter of sterile water in four (4) syringes for a total dose of 5 grams of sodium pentothal. Each syringe containing sodium pentothal shall have a **GREEN** label which contains the name of the chemical, the chemical amount and the designated syringe number.
- b. Syringe 5A shall contain 60 milliliter of heparin/saline solution at a concentration of 10 units of heparin per milliliter. The syringe shall have a **BLACK** label which contains the name of the chemical, chemical amount and the designated syringe number.

3. CHART C: Reserved

4. CHART D: Three (3) Drug Protocol with Midazolam, Vecuronium Bromide and Potassium Chloride

CHEMICAL CHART	
Syringe No.	Label
1A	250 mg midazolam, <b>GREEN</b>
2A	250 mg midazolam, <b>GREEN</b>
3A	60 ml heparin/saline, <b>BLACK</b>
4A	50 mg vecuronium bromide, <b>YELLOW</b>
5A	50 mg vecuronium bromide, <b>YELLOW</b>
6A	60 ml heparin/saline, <b>BLACK</b>
7A	120 mEq potassium chloride, <b>RED</b>
8A	120 mEq potassium chloride, <b>RED</b>
9A	60 ml heparin/saline, <b>BLACK</b>

- a. Syringes 1A and 2A shall each have a dose of 250 milligrams midazolam for a total dose of 500 milligrams. Each syringe containing midazolam shall have a **GREEN** label which contains the name of each chemical, the chemical amounts and the designated syringe number.
- b. Syringes 4A and 5A shall each have a dose of 50 milligrams vecuronium bromide or 50 milligrams pancuronium bromide or 50 milligrams rocuronium bromide, for a total dose of 100 milligrams. Each syringe containing the selected bromide shall have a **YELLOW** label which contains the name of each chemical, the chemical amounts and the designated syringe number.
- c. Syringes 7A and 8A shall each contain 120 milliequivalents potassium chloride for a total dose of 240 milliequivalents. Each syringe containing potassium chloride shall have a **RED** label which contains the name of each chemical, the chemical amounts and the designated syringe number.
- d. Syringes 3A, 6A, and 9A shall each contain 60 milliliter of heparin/saline solution at a concentration of 10 units of heparin per milliliter. Each syringe shall have a **BLACK** label which contains the name of the chemical, chemical amount and the designated syringe number.

D. Choice of Chemicals

1. The director shall have the sole discretion as to which chemicals shall be used for the scheduled execution. This decision shall be provided to the offender in writing ten (10) calendar days prior to the scheduled execution date.

2. Any compounded drug used shall be obtained from a certified or licensed compounding pharmacist or compounding pharmacy in good standing with their licensing board. Licensing certification and criminal history reviews shall be conducted by the Inspector General's office prior to obtaining the compounded drug. A qualitative analysis of the compounded drug to be used in the execution shall be performed no more than thirty (30) calendar days prior to the execution date. The decision to use compounded drugs shall be provided to the offender in writing no less than ten (10) calendar days prior to the scheduled execution.
3. After the IV Team prepares all required syringes with the proper chemicals and labels as provided in the Chemical Chart, the IV Team leader shall attach one complete set of the prepared and labeled syringes to a 3-Gang, 2-Way Manifold in the order in which the chemicals are to be administered. The syringes shall be attached to the 3-Gang, 2-Way Manifold in a manner to ensure there is no crowding, with each syringe resting in its corresponding place in the shadow board which is labeled with the name of the chemical, color, chemical amount and the designated syringe number.
4. The syringes shall be affixed in such a manner to ensure the syringe labels are clearly visible. Prior to attaching the syringes to the 3-Gang, 2-Way Manifold, the flow of each gauge on the manifold shall be checked by the IV Team leader running the Heparin/Saline solution through the line to confirm there is no obstruction.
5. After all syringes are prepared and affixed to the 3-Gang, 2-Way Manifold in proper order, the Special Operations Team leader shall confirm that all syringes are properly labeled and attached to the manifold in the order in which the chemicals are to be administered as designated by the Chemical Chart. Each chemical shall be administered in the predetermined order in which the syringes are affixed to the manifold.
6. The quantities and types of chemicals prepared and administered may not be changed in any manner without prior documented approval of the director.
7. All prepared chemicals shall be utilized or properly disposed of in a timely manner after the time designated for the execution to occur.
8. The chemical amounts as set forth in the Chemical Chart are designated for the execution of persons weighing 500 pound or less. The chemical amounts shall be reviewed and may be revised as necessary for an offender exceeding this body weight.
9. The Special Operations Team Recorder is responsible for completing the Correctional Service Log. The Recorder shall document on the form the amount of each chemical administered and confirm that it was

administered in the order set forth in the Chemical Chart. Any deviation from the written procedure shall be noted and explained on the form.

E. Movement and Monitoring of Offender

1. Prior to moving the offender from the holding cell to the execution table, the director shall confer with the attorney general or designee and the governor or designee to confirm there is no legal impediment to proceeding with the lawful execution.
2. The offender may be offered a mild sedative based on the offender's need. The sedative shall be provided to the offender no later than four (4) hours prior to the execution, unless it is determined medically necessary.
3. At the designated time, the offender shall be brought into the execution room and secured on the table by the prescribed means with the offender's arms positioned at an angle away from the offender's side.
4. The offender shall be positioned to enable the IV Team or the Special Operations Team leader and the H Unit Section Chief to directly observe the offender and/or to monitor the offender with the aid of a high resolution color camera and a high resolution color monitor.
5. After the offender has been secured to the execution table, the Restraint Team leader shall personally check the restraints which secure the offender to the table to ensure they are not so restrictive as to impede the offender's circulation, yet sufficient to prevent the offender from manipulating the catheter and IV lines.
6. A microphone shall be affixed to the offender's shirt to enable the IV Team, or the Special Operations Team leader, to hear any utterances or noises made by the offender throughout the procedure. The Special Operations Team leader shall confirm the microphone is functioning properly, and that the offender can be heard in the chemical room.
7. The Restraint Team members shall attach the leads from the electrocardiograph to the offender's chest once the offender is secured. The IV Team leader shall confirm that the electrocardiograph is functioning properly. A backup electrocardiograph shall be on site and readily available if necessary. Prior to and on the day of the execution both electrocardiograph instruments shall be checked to confirm they are functioning properly.
8. An IV Team member shall be assigned to monitor the electrocardiograph at the commencement and completion of the administration of the chemicals.

9. Throughout the procedure, the IV Team leader shall monitor the offender's level of consciousness and electrocardiograph readings utilizing direct observation, audio equipment, camera and monitor as well as any other medically approved method(s) deemed necessary by the IV Team leader. The IV Team leader shall be responsible for monitoring the offender's level of consciousness.

F. Intravenous Lines

1. The director, acting upon the advice of the IV Team leader, shall determine the catheter sites. A central line shall only be used if the person inserting the line is qualified to insert a central line. The IV Team members shall insert a primary IV catheter and a backup IV catheter.
2. After one hour of unsuccessful IV attempts, the director shall contact the governor or designee to advise of the status and potentially request a postponement of the execution.
3. The IV Team leader shall ensure the catheters are properly secured and properly connected to the IV lines and out of reach of the offender's hands. A flow of heparin/saline shall be started in each line and administered at a slow rate to keep the lines open.
4. The primary IV catheter shall be used to administer the chemicals and the backup catheter shall be reserved in the event of the failure of the first line. Any failure of a venous access line shall be immediately reported to the director.
5. The IV catheter in use shall remain visible to the H Unit Section Chief throughout the procedures.
6. The H Unit Section Chief shall physically remain in the room with the offender throughout the administration of the chemicals in a position sufficient to clearly observe the offender and the primary and backup IV sites for any potential problems and shall immediately notify the IV Team leader and director should any issue occur. Upon receipt of such notification, the director may stop the proceedings and take all steps necessary in consultation with the IV Team leader prior to proceeding further with the execution.
7. Should the use of the backup IV catheter be determined to be necessary, a set of backup chemicals should be administered in the backup IV site.

G. Administration of Chemicals – Charts A and B

1. At the time the execution is to commence and prior to administering the chemicals, the director shall reconfirm with the attorney general or designee and the governor or designee that there is no legal impediment

to proceeding with the execution. Upon receipt of oral confirmation that there is no legal impediment, the director shall order the administration of the chemicals to begin.

2. Upon receipt of the director's order and under observation of the IV Team leader, the Special Operations Team leader shall instruct the assigned Special Operations Team member(s) to begin dispensing the chemicals in the order they appear in the corresponding chart.
3. Upon direction from the Special Operations Team Leader, the assigned Special Operations Team member shall visually and orally confirm the chemical name on the syringe and then administer the full dose of the chemicals immediately followed by the heparin/saline flush.
4. When five (5) minutes has elapsed since commencing the administration of the chemicals, the IV Team leader, dressed in a manner to preserve their anonymity, shall enter into the room where the section chief and offender are located to physically confirm the offender is unconscious by using all necessary and medically-appropriate methods. The IV Team leader shall also confirm that the IV line remains affixed and functioning properly.
5. If, after five (5) minutes the offender remains conscious, the IV Team shall communicate this information to the director, along with all IV Team input. The director shall determine how to proceed or, if necessary, to start the procedure over at a later time or stop. The director may order the curtains to the witness viewing room be closed, and if necessary, for witnesses to be removed from the facility.
6. If deemed appropriate, the director may instruct the Special Operations Team to administer additional doses of the chemical(s) followed by the heparin/saline flush.
7. Upon administering the chemical(s) and heparin/saline from a backup set, the IV Team shall confirm the offender is unconscious by sight and sound, utilizing the audio equipment, camera and monitor. The IV Team leader shall again physically confirm the offender is unconscious using proper medical procedures and verbally advise the director of the same.
8. When all electrical activity of the heart has ceased as shown by the electrocardiograph, the IV Team leader shall confirm the offender is deceased and the offender's death shall be announced by the director.
9. The Special Operations Team Recorder shall document on the Correctional Service Log the start and the ending times of the administration of the chemical(s).

10. Throughout the entire procedure, the IV Team members, the Special Operations Team members and the H Unit Section Chief shall continually monitor the offender using all available means to ensure that the offender remains unconscious and that there are no complications.

#### H. Administration of Chemicals – Chart D

1. At the time the execution is to commence and prior to administering the chemicals, the director shall reconfirm with the attorney general or designee and the governor or designee that there is no legal impediment to proceeding with the execution. Upon receipt of oral confirmation that there is no legal impediment, the director shall order the administration of the chemicals to begin.
2. Upon receipt of the director's order and under observation of the IV Team leader, the Special Operations Team leader shall instruct the assigned Special Operations Team member(s) to begin dispensing the chemicals in syringe numbers 1A, 2A, and 3A.
3. Upon direction from the Special Operations Team Leader, the assigned Special Operations Team member shall visually and orally confirm the chemical name on the syringe and then administer the full dose of the chemicals in syringe numbers 1A, 2A, and 3A.
4. When five (5) minutes has elapsed since commencing the administration of the first chemical, the IV Team leader, dressed in a manner to preserve their anonymity, shall enter into the room where the section chief and offender are located to physically confirm the offender is unconscious by using all necessary and medically-appropriate methods. The IV Team leader shall also confirm that the IV line remains affixed and functioning properly.
5. If confirmed the offender is unconscious, an announcement will be made and the director will order the remaining chemicals be dispensed in the order they appear in the chart.
6. Upon direction from the Special Operations Team Leader, the assigned Special Operations Team member shall visually and orally confirm the chemical name on the syringe and then administer the full dose of the remaining chemicals in the order they appear in the chart.
7. If the offender remains conscious after five (5) minutes, the IV Team shall communicate this information to the director, along with all IV Team input. The director shall determine how to proceed or, if necessary, to start the procedure over at a later time or stop the execution. The director may order the curtains to the witness viewing room be closed, and if necessary, for witnesses to be removed from the facility.

8. If deemed appropriate, the director may instruct the Special Operations Team to administer additional doses of the chemical(s) followed by the heparin/saline flush.
9. Upon administering the chemical(s) and heparin/saline from a backup set, the IV Team shall confirm the offender is unconscious by sight and sound, utilizing the audio equipment, camera and monitor. The IV Team leader shall again physically confirm the offender is unconscious using proper medical procedures and verbally advise the director of the same.
10. When all electrical activity of the heart has ceased as shown by the electrocardiograph, the IV Team leader shall confirm the offender is deceased and the offender's death shall be announced by the director.
11. The Special Operations Team Recorder shall document on the Correctional Service Log the start and the ending times of the administration of the chemical(s).
12. Throughout the entire procedure, the IV Team members, the Special Operations Team members and the H Unit Section Chief shall continually monitor the offender using all available means to ensure that the offender remains unconscious and that there are no complications.

I. Post Execution Procedures

1. Upon the pronouncement of death, the director shall notify the governor or designee and the attorney general or designee via telephone that the sentence has been carried out and the time that death occurred.
2. An IV Team member shall clamp and cut the IV lines leaving them connected to the offender for examination by a medical examiner.
3. An investigator with the Inspector General's office and a medical examiner shall take photos of the offender's body:
  - a. While in restraints prior to being placed in the body bag;
  - b. Without restraints prior to being placed in the body bag;
  - c. Sealed in the body bag; and
  - d. A photo of the seal in place on the bag.
4. The offender's body shall be placed on a medical examiner's gurney and released into the custody of a medical examiner's office.
5. Once the offender's body is placed in a medical examiner's transport vehicle, it shall be escorted off the premises. The examiner's office shall

take the offender's body to the medical examiner's office designated by the county.

J. Documentation of Stay Prior to Execution

1. In the event that a pending stay results in more than a two (2) hour delay, the catheters shall be removed, if applicable, and the offender shall be returned to the holding cell until further notice.
2. The Correctional Service Log and the list of identifiers shall be submitted to the general counsel for review and storage.

K. Contingency Procedure

1. An Automated External Defibrillator (AED) shall be readily available on site in the event that the offender goes into cardiac arrest at any time prior to dispensing the chemicals. Trained medical staff shall make every effort to revive the offender should this occur.
2. Trained medical personnel and emergency transportation, neither of which is involved in the execution process, shall be available in proximity to respond should any medical emergency arise.
3. If at any point any team member determines that any part of the execution process is not going according to procedure, they shall advise the IV Team leader who shall immediately notify the director. The director may consult with persons deemed appropriate and shall determine to go forward with the procedure, start the procedure over at a later time within the twenty-four (24) hour day, or stop the execution.
4. There shall be no deviation from the procedures as set forth herein, without prior consent from the director.

L. Debrief and Policy Review

1. The IV and Special Operations Teams shall participate in an informal debriefing immediately upon completion of the event.
2. Upon an assignment to a team, team members shall review OP-040301 entitled "Execution of Offenders Sentenced to Death."
3. Periodically, and in the discretion of the director, a review of OP-040301 entitled "Execution of Offenders Sentenced to Death," along with this attachment may be reviewed to confirm it remains consistent with the law. The general counsel shall advise the director immediately upon any change that may impact these procedures.