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 a licensed pharmacist inventories the execution drugs and verifies the drugs on hand comply with the requirements of this Attachment. If the chemicals are present at OSP, verifies with a licensed pharmacist that they are properly stored and meet the requirements of this Attachment. The chemicals shall be under the direct control of the H Unit Section Chief.

B. Preparation of Chemicals

1. At the appropriate time on the day of the execution, 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 verify the identity, concentration and quantity of each chemical, consistent with this Attachment and assign a team member(s) to assist preparing each chemical and the corresponding syringe under the supervision of the IV Team leader.

3. The IV Team leader will verify the identity, concentration and quantity of each chemical, consistent with this Attachment. 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.

4. 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

<table>
<thead>
<tr>
<th>Syringe No.</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A</td>
<td>2.5 gm pentobarbital GREEN</td>
</tr>
<tr>
<td>2A</td>
<td>2.5 gm pentobarbital GREEN</td>
</tr>
<tr>
<td>3A</td>
<td>60 ml heparin/saline, BLACK</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Syringe No.</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A</td>
<td>1.25 gm sodium pentothal, GREEN</td>
</tr>
<tr>
<td>2A</td>
<td>1.25 gm sodium pentothal, GREEN</td>
</tr>
<tr>
<td>3A</td>
<td>1.25 gm sodium pentothal, GREEN</td>
</tr>
<tr>
<td>4A</td>
<td>1.25 gm sodium pentothal, GREEN</td>
</tr>
<tr>
<td>5A</td>
<td>60 ml heparin/saline, BLACK</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>CHEMICAL CHART</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syringe No.</td>
</tr>
<tr>
<td>1A</td>
</tr>
<tr>
<td>2A</td>
</tr>
<tr>
<td>3A</td>
</tr>
<tr>
<td>4A</td>
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<tr>
<td>5A</td>
</tr>
<tr>
<td>6A</td>
</tr>
<tr>
<td>7A</td>
</tr>
<tr>
<td>8A</td>
</tr>
<tr>
<td>9A</td>
</tr>
</tbody>
</table>

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 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 inmate 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.

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 inmate 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 Inmate

1. The inmate shall be positioned to enable the IV Team or the Special Operations Team leader and the H Unit Section Chief to directly observe the inmate and/or to monitor the inmate with the aid of a high resolution color camera and a high resolution color monitor.

2. After the inmate has been secured to the execution table, the Restraint Team leader shall personally check the restraints which secure the inmate to the table to ensure they are not so restrictive as to impede the inmate's circulation, yet sufficient to prevent the inmate from manipulating the catheter and IV lines.

3. A microphone shall be affixed to the inmate's shirt to enable the IV Team, or the Special Operations Team leader, to hear any utterances or noises made by the inmate throughout the procedure. The Special Operations Team leader shall confirm the microphone is functioning properly, and that the inmate can be heard in the chemical room.

4. The Restraint Team members shall attach the leads from the electrocardiograph to the inmate's chest once the inmate 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.

5. An IV Team member shall be assigned to monitor the electrocardiograph at the commencement and completion of the administration of the chemicals.

6. Throughout the procedure, the IV Team leader shall monitor the inmate'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 inmate's level of consciousness.

F. Intravenous Lines

1. The IV Team leader shall ensure the catheters are properly secured and properly connected to the IV lines and out of reach of the inmate's hands.
A flow of heparin/saline shall be started in each line and administered at a slow rate to keep the lines open.

2. 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.

3. The IV catheter in use shall remain visible to the H Unit Section Chief throughout the procedures.

4. The H Unit Section Chief shall physically remain in the room with the inmate throughout the administration of the chemicals in a position sufficient to clearly observe the inmate 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.

5. 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. 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.

2. 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.

3. When approximately 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 H Unit section chief and inmate are located to physically confirm the inmate 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.

4. If, after approximately five (5) minutes the inmate remains conscious, the IV Team leader shall communicate this information to the director, along with all IV Team leader 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.

5. If deemed appropriate, the director may instruct the Special Operations Team leader to administer additional doses of the chemical(s) followed by the heparin/saline flush.

6. Upon administering the chemical(s) and heparin/saline from a backup set, the IV Team shall confirm the inmate is unconscious by sight and sound, utilizing the audio equipment, camera and monitor. The IV Team leader shall again physically confirm the inmate is unconscious using proper medical procedures and verbally advise the director of the same.

7. When all electrical activity of the heart has ceased as shown by the electrocardiograph, the IV Team leader shall confirm the inmate is deceased and the inmate’s death shall be announced by the director or designee.

8. 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).

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

H. Administration of Chemicals – Chart D

1. 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.

2. 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.

3. When approximately 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 H Unit section chief and inmate are located to physically confirm the inmate 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.
4. If confirmed the inmate 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.

5. 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.

6. If the inmate remains conscious after approximately 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.

7. 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.

8. Upon administering the chemical(s) and heparin/saline from a backup set, the IV Team shall confirm the inmate is unconscious by sight and sound, utilizing the audio equipment, camera and monitor. The IV Team leader shall again physically confirm the inmate is unconscious using proper medical procedures and verbally advise the director of the same.

9. When all electrical activity of the heart has ceased as shown by the electrocardiograph, the IV Team leader shall confirm the inmate is deceased and the inmate’s death shall be announced by the director or designee.

10. 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).

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

(R 02/20)