Beyond Agitated Delirium: Dealing with the Issue of In-Custody Deaths

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In Custody Death

- In custody
  - Police hold
    - Field
    - Hospital
    - Holding cell
  - Jail
  - Prison
Case # 1

- 34 year old male
- Screaming naked in the front yard
- 911 called
  - Law enforcement
- 8 officers
  - Tased
  - IV valium
- Unresponsive
- Pronounced in the ED
Case # 2

- 24 year old female
- Moderate mechanism MVA
- Evaluated in the ED
- Sent to jail
- Complained of weakness and abdominal pain in jail over an 8 hour period
- Found in cardiac arrest the next morning
Causes

- Excited delirium
  - “Medical emergency that presents as a law enforcement problem”
- Positional asphyxia
- Less lethal methods
- Missed injuries
- Other
Challenges – Excited Delirium

- Violent irrational individual
- High risk situation
- Life-threatening medical emergency
- Resistant to standard control measures
- Increased struggle = increased problems
- Safety of others
- Intense public scrutiny afterwards
Team Approach

- EMS
  - Dispatch
- Medical oversight
- Emergency Medicine
- Law enforcement
  - Police
  - Sheriffs
- Medical examiner
  - Coroner
- City attorney
Issues

- Multi-disciplinary approach
  - Multi-factorial problem

- Sedation protocols
  - Well defined
    - IV, IN, IM
  - Well understood

- Less lethal methods
  - Taser
  - Others
Issues

- Policies/procedures
  - Watch in jail?
    - Can they “return”?
  - Impact on others
- Excited delirium
  - Hypoglycemia?
  - Post-ictal?
  - Protocol?
- Media
  - Who will speak?
    - For whom?
Three Cs

- Communicate
- Cooperate
- Commitment
Conclusions

- Think about this now
- Have the right people at the table
- Ultimate goal is prevention