



OPIOIDS AS EVIDENCE: Courtroom Best Practices

NORTH CAROLINA DEPARTMENT OF JUSTICE

But first, what is an ombudsman?

- “Government official appointed to investigate citizens’ complaints against government officials, large public and private corporations, and/or print and broadcast media. While, in general, ombudsmen have wide investigative powers, they have only a few punitive powers.” – BusinessDictionary.com
- [N.C. Gen. Stat. § 114-62](#)



N.C. Gen. Stat. § 114-62

§ 114-62. North Carolina State Crime Laboratory Ombudsman.

The position of ombudsman is created in the North Carolina State Crime Laboratory within the North Carolina Department of Justice. The primary purpose of this position shall be to work with defense counsel, prosecutorial agencies, criminal justice system stakeholders, law enforcement officials, and the general public to ensure all processes, procedures, practices, and protocols at the State Crime Laboratory are consistent with State and federal law, best forensic law practices, and in the best interests of justice in this State. The ombudsman shall mediate complaints brought to the attention of the ombudsman between the Crime Laboratory and defense counsel, prosecutorial agencies, law enforcement agencies, and the general public. The ombudsman shall ensure all criminal justice stakeholders and the general public are aware of the availability, responsibilities, and role of the ombudsman and shall regularly attend meetings of the Conferences of the District Attorneys, District and Superior Court Judges, Public Defenders, the Advocates for Justice, and Bar Criminal Law Sections. The ombudsman shall make recommendations on a regular basis to the Director of the State Crime Laboratory and the Attorney General of North Carolina as to policies, procedures, practices, and training of employees needed at the Laboratory to ensure compliance with State and federal law, best forensic law practices, and to resolve any meritorious systemic complaints received by the ombudsman. (2011-19, s. 6(a); 2013-360, s. 17.6(d), (n).)



Heroin, Fentanyl, & Opioids: Oh My

OVERPOWERING NC'S OPIOID EPIDEMIC



Misuse. Addiction. Double the overdoses in the past ten years alone. Opioids—including prescription pain medication, heroin, and fentanyl—are devastating lives in North Carolina. It's time for all of us to take the first step in solving the problem, because together, we are more powerful than opioids—and together, we can take back our communities.



Heroin, Fentanyl, & Opioids: Oh My

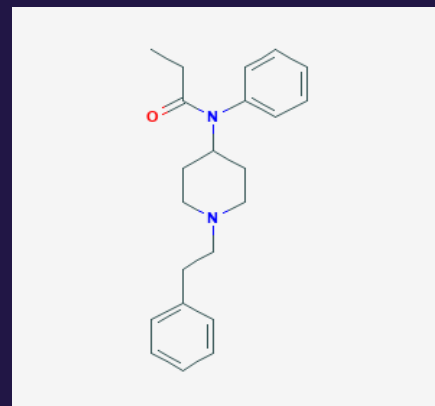
- Opioids are drugs that act upon the opioid receptors on nerve cells in our bodies. As a medicine, they were developed for relieving intense pain. They have been used recreationally for longer than they have been used as a medicine. Either use is susceptible to dependence; misuse can lead to addiction, overdose, and death.

Prescription	Street Drugs	Synthetic Drugs (can be Illicit or Prescription)
<ul style="list-style-type: none"> Hydrocodone (Vicodin) Oxycodone (Oxycontin, Percocet) Oxymorphone (Opana) Morphine (Kadian, Avinza) Tylenol with Codeine 	<ul style="list-style-type: none"> Heroin 	<ul style="list-style-type: none"> Fentanyl Carfentanyl Countless versions of the above from overseas



Chemical Makeup

- $C_{22}H_{28}N_2O$
- Fentanyl is a synthetic, lipophilic phenylpiperidine opioid agonist with analgesic and anesthetic properties.
- Fentanyl selectively binds to the mu-receptor in the central nervous system (CNS) thereby mimicking the effects of endogenous opiates.



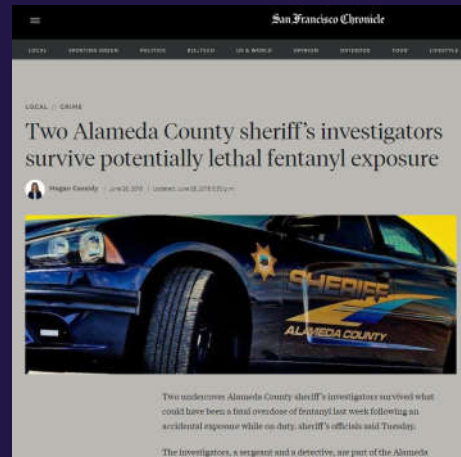
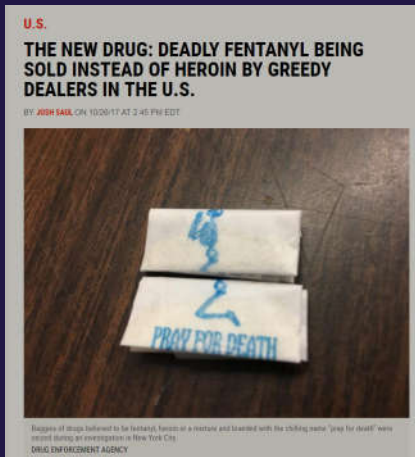
Drugs in the Field



Drugs in the Field



Opioids in the Media



Really? Inhaling microscopic amounts?

Two undercover Alameda County sheriff's investigators survived what could have been a fatal overdose of fentanyl last week following an accidental exposure while on duty, sheriff's officials said Tuesday.

The investigators, a sergeant and a detective, are part of the Alameda County Narcotics Task Force. The pair on Friday entered a motel room in Hayward, where officials said the detective immediately began to feel ill.

A preliminary review of the incident suggested that the detective was exposed to a microscopic dust cloud of the opioid, according to a statement from the Alameda County Sheriff's Office.

Officials said the detective was immediately pulled out of the room, lost consciousness and went into respiratory distress, the statement said.

San Francisco Chronicle

Fear of accidental poisonings to first responders has prompted several agencies across the country to keep naloxone on hand for themselves as well as the victims they treat.

To date though, reports of the drug's exposure to police or paramedics have been rare. Though similar incidents have made headlines in [Ohio](#) and [Toronto](#), Kelly said he didn't know of another incident in the Bay Area.



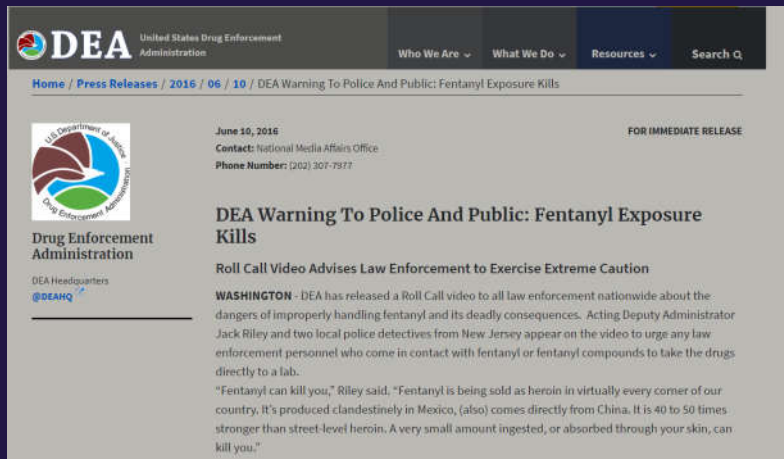
Opioids in the Media



Opioids in the Media



Federal Guidance



The screenshot shows the DEA website header with navigation links: 'Who We Are', 'What We Do', 'Resources', and 'Search Q'. The breadcrumb trail reads: 'Home / Press Releases / 2016 / 06 / 10 / DEA Warning To Police And Public: Fentanyl Exposure Kills'. The main content area includes the DEA logo, the date 'June 10, 2016', contact information for the National Media Affairs Office, and the text of the press release. The press release title is 'DEA Warning To Police And Public: Fentanyl Exposure Kills' and the sub-headline is 'Roll Call Video Advises Law Enforcement to Exercise Extreme Caution'. The body text begins with 'WASHINGTON - DEA has released a Roll Call video to all law enforcement nationwide about the dangers of improperly handling fentanyl and its deadly consequences.'



Federal Guidance

DEA Report: Counterfeit Pills Fueling U.S. Fentanyl And Opioid Crisis

Problems resulting from abuse of opioid drugs continue to grow

WASHINGTON - Hundreds of thousands of counterfeit prescription pills, many containing deadly amounts of [fentanyl](#) and fentanyl-related compounds, have made their way into the U.S. drug market, according to a [DEA intelligence report](#) released today. Law enforcement nationwide report higher fentanyl availability, seizures, and known overdose deaths than at any other time since the drug's creation in 1959.

In addition to being deadly to users, fentanyl poses a grave threat to law enforcement officials and first responders, as a lethal dose of fentanyl can be accidentally inhaled or absorbed through the skin. DEA recently released a [Police Roll Call video](#) nationwide to warn law enforcement about this danger. The video can be accessed at www.DEA.gov.



Federal Guidance



Officer Safety Alert

Drug Enforcement Administration

Carfentanil: A Dangerous New Factor in the U.S. Opioid Crisis

Carfentanil is a synthetic opioid approximately 10,000 times more potent than morphine and 100 times more potent than fentanyl. The presence of carfentanil in illicit U.S. drug markets is cause for concern, as the relative strength of this drug could lead to an increase in overdoses and overdose-related deaths, even among opioid-tolerant users. The presence of carfentanil poses a significant threat to first responders and law enforcement personnel who may come in contact with this substance. **In any situation where any fentanyl-related substance, such as carfentanil, might be present, law enforcement should carefully follow safety protocols to avoid accidental exposure.**

Officer & Public Safety Information

Carfentanil and other fentanyl analogues present a serious risk to public safety, first responder, medical, treatment, and laboratory personnel. These substances can come in several forms, including powder, blotter paper, tablets, patch, and spray. Some forms can be absorbed through the skin or accidentally inhaled. If encountered, responding personnel should do the following based on the specific situation:

- **Exercise extreme caution.** Only properly trained and outfitted law enforcement professionals should handle any substance suspected to contain fentanyl or a fentanyl-related compound. If encountered, contact the appropriate officials within your agency.
- **Be aware of any sign of exposure.** Symptoms include: respiratory depression or arrest.



Federal Guidance - Better

Fentanyl

New video for first responders just released!



Illicit Drugs, Including Fentanyl: Preventing Occupational Exposure to Emergency Responders

Fentanyl
Heroin
Synthetic cannabinoids
Methamphetamine
Cocaine
Carfentanil
Morphine
Spice, K2

Low Resolution Video



More from the CDC

Preventing Occupational Exposure to Emergency Responders

Fentanyl and its analogues pose a potential hazard to a variety of responders who could come into contact with these drugs in the course of their work. Possible exposure routes to fentanyl and its analogues can vary based on the source and form of the drug. Responders are most likely to encounter illicitly manufactured fentanyl and its analogues in powder, tablet, and liquid form. Potential exposure routes of greatest concern include inhalation, mucous membrane contact, ingestion, and percutaneous exposure (e.g., needlestick). Any of these exposure routes can potentially result in a variety of symptoms that can include the rapid onset of life-threatening respiratory depression. Skin contact is also a potential exposure route, but is not likely to lead to overdose unless large volumes of highly concentrated powder are encountered over an extended period of time. Brief skin contact with fentanyl or its analogues is not expected to lead to toxic effects if any visible contamination is promptly removed. There are no established federal or consensus occupational exposure limits for fentanyl or its analogues.



More from the CDC

Standard Safe Operating Procedures

With all first responder operations involving hazardous materials, **standard safe work practices** must be followed when fentanyl or its analogues are known or suspected to be present. When arriving at a scene, all responders should analyze the incident, assess the risk for hazards, and determine whether fentanyl or other drugs are suspected to be present. Responders should follow established work practices as well as these recommendations when fentanyl or its analogues are known or suspected to be present.

- Do not eat, drink, smoke, or use the bathroom while working in an area with known or suspected fentanyl.
- Do not touch the eyes, mouth, and nose after touching any surface potentially contaminated with fentanyl.
- Field testing of fentanyl or its analogues is not recommended due to an increased risk of exposure to responders performing field testing. However, if detection and identification of fentanyl is critical to the incident response, develop an incident specific plan to perform the field testing in accordance with agency policies and procedures. Personnel specifically trained to perform the field testing should perform the field testing in the appropriate personal protective equipment (PPE). Never handle fentanyl or its analogues without the appropriate PPE.
- Avoid performing tasks or operations that may aerosolize fentanyl due to increased exposure risks. Activities that aerosolize fentanyl require higher levels of PPE and should be conducted by appropriately trained personnel and in accordance with agency policies and procedures.
- Wash hands with soap and water immediately after a potential exposure and after leaving a scene where fentanyl is known or suspected to be present to avoid potential exposure and to avoid cross contamination. Do not use hand sanitizers or bleach solutions to clean contaminated skin.



Initial Court Responses



ADVISORY

Trial Court safety advisory and protocols for fentanyl and carfentanil



Oops.

VICE News

**THE COP WHO SAID HE
OD'D BY TOUCHING
FENTANYL IS
PROBABLY WRONG**

But earlier this week, the CDC and NIOSH updated the [fentanyl page](#) on their website to remove the statement "skin absorption can be deadly." It now says that "while dermal absorption of fentanyl commonly occurs through prescribed use of the drug, inhalation of powder is the most likely exposure route for illicitly manufactured fentanyl."

Stephanie Stevens, a spokesperson for the CDC and NIOSH, said the change was made after the agency's staff determined "there was not enough evidence to validate the statement that dermal exposure to fentanyl is deadly." Stevens noted that there is "limited research" on the subject, and said the CDC is "actively looking to study and better understand" the health risks of skin exposure to fentanyl.



Facts

EMS Topics > Opioids > Articles

Email Print



On Fire and EMS
with Sarah Calams

Fact or fiction: Transdermal fentanyl exposure

For opioid toxicity to occur the drug must enter the blood and brain from the environment

Jul 26, 2017

SCIENCE SAYS 'NO'

The American College of Medical Toxicology and American Academy of Clinical Toxicology released a position statement on transdermal fentanyl exposure. The position, based on the opinion and clinical experience of ACMT and AACT task force members, states "the risk of clinically significant exposure to emergency responders is extremely low."

Furthermore, the ACMT and AACT said they have not seen reports of responders developing symptoms consistent with opioid toxicity from brief, incidental contact with opioids. Responders have reported exposure symptoms that include dizziness, feeling like their body was shutting down and as if they were dying. The symptoms, however, did not point to signs of opioid toxicity, which include respiratory depression, according to the ACMT and AACT.

"Incidental dermal absorption is unlikely to cause opioid toxicity," the position says.



Symptoms of Anxiety or Panic

- Dizziness
- Rapid heartbeat
- Sweating
- Fainting

Symptoms of Fentanyl Overdose

- Dizziness
- Profoundly slow heartbeat
- Respiratory distress, depression or arrest
- Pinpoint pupils
- Confusion
- Loss of Consciousness
- Extreme sleepiness
- Nausea or vomiting
- Limp Body



Good news.

- “Opioid toxicity (overdose) from transdermal and airborne exposure to Illicitly Manufactured Fentanyl (IMF) is a near scientific impossibility.” [Source.](#)
- Courtroom actors have less exposure than first responders do to illicitly manufactured fentanyl.
- First responders do not need to treat a suspected fentanyl or carfentanil incident the same way they would a clandestine methamphetamine laboratory. Instead, universal precautions are adequate.
- Likewise, universal precautions are adequate for courtroom actors.

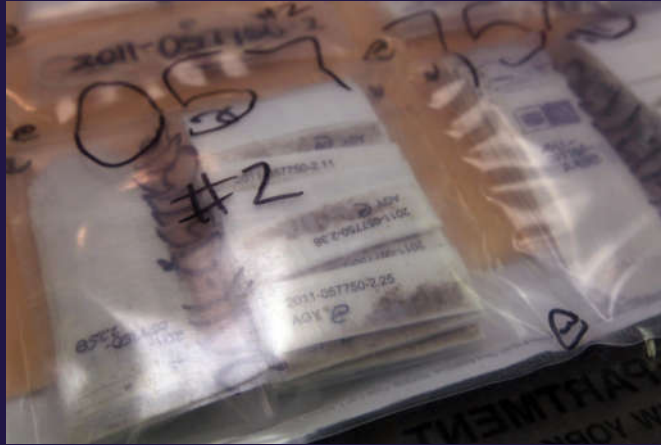


Good news.

- “The fentanyl (and carfentanil) in the illicit drug supply comes in powder or solid (pill) form.
- It must have direct contact with the **mucous membranes** or the **bloodstream** via snorting (inhalation), smoking, or injection.
- Illicit fentanyl passes through the bare hands of many persons on its way from creation to use, and there is no adverse reaction until the drug is ingested as listed above.
 - And even then, overdose is not inevitable. People use them routinely, albeit with risks.



When this evidence gets to the State Crime Lab



When this evidence leaves the State Crime Lab

- It will be packaged back as it was received
- EXCEPT THAT anything identified as Fentanyl or a Fentanyl analog will be DOUBLE BAGGED as well as sealed
- It will have a WARNING label



Suggested Best Practices

- Educate courthouse personnel on how fentanyl exposure works.
- Absent direct contact with mucous membranes or blood, folks are OK.
- Explain that safety precautions are taken by the State Crime Lab.



Suggested Best Practices

- Exercise your discretion to limit the minimal existing risks:
 - Ensure you have gloves available and that they are used for anyone who touches the evidence (any evidence – you just don't ever know)
 - Do not allow witnesses to open the seals and remove the substance at issue from the packaging
 - Do not allow jurors to pass this evidence around or to examine it
- Should someone have skin contact with a substance identified as fentanyl or a fentanyl analog, they should promptly wash their hands.
 - DO NOT USE HAND SANITIZER.



Questions?

- Please feel free to call or email anytime.

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