



**Baltimore County Sheriff's Office  
Towson, Maryland**

**Sheriff  
R. Jay Fisher**

**General Order**

<b>Subject:</b> <b>Positional Asphyxiation / Excited Delirium</b>	<b>Effective Date</b> <b>5/10/12</b>	<b>Number</b> <b>B-22</b>
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**Purpose:**

The purpose of this General Order is to reduce the possibility of in-custody deaths by increasing Deputies' awareness and establishing procedures for handling custody situations within Agency guidelines.

**Contents:**

- I. Definitions**
- II. Policy**
- III. Behaviors & Warning Signs**
- IV. Procedures**

**I. Definitions:**

- A. Sudden In-Custody Death Syndrome** – The unexpected and often sudden death of a prisoner resulting from positional asphyxiation or excited delirium.
- B. Positional Asphyxiation** – Is the result of interference with a person's ability to breath. Most generally death occurs when the subject is placed in the prone position thus restricting their breathing and confining their ability to move. The contributing factors that cause positional asphyxiation include intoxication from drugs or alcohol, physical restraint in a prone position or confined space, physical disability, obesity, and a high expenditure of violent energy. Other factors include lying across a raised object and/or kneeling on or lying across the subject's back.
- C. Excited Delirium** – Also know as cocaine psychosis. Cocaine (or other stimulant) induces a high state of anxiety, which results in rapid onset of paranoia, bizarre behavior, extraordinary strength, hallucinations, disrobing, high temperature and aggressive, violent behavior.

**II. Policy:**

It shall be the policy of the Baltimore County Sheriff's Office to reduce the possibility of the unexpected sudden death of a prisoner by increasing Deputies' awareness of "Sudden In-Custody Death Syndrome", "Positional Asphyxiation", and "Excited Delirium".

**III. Behaviors and Warning Signs:**

Subjects susceptible to either Positional Asphyxiation or Excited Delirium are typically encountered under consistent circumstances. These subjects are generally experiencing a cluster of life threatening physiological stresses, all of which put them at significant risk of death. The behaviors and warning

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**In-Custody Sudden Death**

signs may include bizarre and aggressive behavior, hyperactivity, making irrational statements, shouting, unresponsive to verbal direction, copious sweating, high body temperature and disrobing, unexpected strength often not impaired by pain, violence towards others, heavy breathing, paranoia, and foaming of the mouth.

**IV. Procedures:**

- A. Use extreme caution when encountering a subject exhibiting any of the signs or symptoms of Positional Asphyxiation, and/or Excited Delirium as explained in this order. Ensure that you request assistance when possible.
- B. Whenever possible, wait for sufficient help to arrive and develop a coordinated approach with assisting Deputies. Notify emergency medical personnel to respond.
- C. As soon as the subject is handcuffed and it is safe to do so based on the totality of the circumstances, place the subject in a seated position or place them on their left side.
- D. Avoid extreme prone restraint techniques, if the subject continues to struggle, do not sit on his/her back or neck, and never tie the handcuffs to the leg restraints of a subject displaying the signs and symptoms of Positional Asphyxiation or Excited Delirium.
- E. Do not place the subject on their stomach during transportation to a detention facility or a hospital. Closely monitor the subjects breathing and actions while in your custody.
- F. If necessary immediately seek medical attention and provide lifesaving measures in keeping with established procedures.
- G. Ensure that your supervisor is notified and complete all necessary reports as required.

**Distribution:**

All Members

By Authority of:  
  
R. Jay Fisher  
Sheriff