NEW YORK STATE | Department of Corrections and Community Supervision

KATHY HOCHUL
Governor
DANIEL F. MARTUSCELLO III
Commissioner

MEMORANDUM

TO: All Superintendents

FROM: Michael D'Amore, Deputy Commissioner for Correctional Facilities

SUBJECT: Staff Safety – Fentanyl/Unknown Substances – Revised and Reissued

DATE: January 28, 2025

Due to recent events, it has become necessary to emphasize the Department's policies regarding Fentanyl and other unknown potentially harmful substances. This memorandum is to not only serve as a reminder, but also to update and consolidate all this vital safety information.

Through drug testing results received by the Office of Special Investigations (OSI) from NMS laboratory, trends of dangerous drugs being mixed in with other drugs has become common. Outlined below are some common combinations recovered.

- **Synthetic Cannabinoids-** Many of the green leafy substances confiscated from visitors and recovered from within the facilities contain additional components other than what would be considered typical synthetic cannabinoid formulas. These substances include Gabapentin, Pentylone, Dimethypentylone, Phencyclidine (PCP), and Methamphetamine. Additionally, new strains of synthetic cannabinoids are emerging and being introduced into our facilities. These strains are marketed as K3 and K4 and contain slightly modified indoles such as MDMB-4en-PINACA and MDMB-INACA. These new formulas create the same unpredictable effects to the body.
- **Powders-** Several powdery substances have been recovered that contain combinations of known drugs. These include Heroin mixed with Fentanyl and Cocaine, as well as Heroin mixed with Fentanyl and Methamphetamine.
- **Paper-** Containing many substances such as, Bromazolam, Flubromazepam, MDMB-4en Pinaca, Fentanyl, Protonitazene, Phencyclidine and Cocaine. Full and partial sheets of standard paper have been recovered from visitors. When recovered from incarcerated individuals it tends to be in pieces, from stamp size to small shreds. Much of the paper recovered has no odor or abnormalities and is indistinguishable from non-contaminated paper.
- **Pills and tablets-** A growing number of pills are being recovered, many of which appear to be prescription medication, but may contain an illicit drug. For example: small blue pills marked M30 appear to be Oxycodone, but when tested contain analogs of Fentanyl and Methamphetamine. Tablets that appear to be "traditional" MDMA are being found to contain Methamphetamine, Bromazolam and Flubromazepam.

All staff, with an emphasis on those who handle or process mail and packages, are reminded to remain vigilant and attentive to suspicious activities, items, packages, and/or individuals. In the event a suspicious item or package is recovered or received at a Department facility, **do not remove the item or transport it to any other location**. Staff will immediately cease all movement from the area, secure the affected area, and notify the facility Watch Commander, who will promptly notify the Communication Control Center (CCC) and reference the facility Ready Emergency Data (RED) Book, specifically Section 7 – Fire/Explosion Control/Biological Threats. Contact information for appropriate outside emergency resources is provided in Section 2 – Outside Emergency Resources, of the facility RED Book. Additionally, any such incident must be reported as an Unusual Incident in accordance with Directive #4004, "Unusual Incident Report."

Fentanyl Response Kits shall be kept in the Mail Room/Correspondence Processing Area(s), Package Room, Drug Testing Room, Watch Commanders Office, incarcerated individual housing units, and any other area deemed appropriate. Facility mail rooms/correspondence processing areas, package rooms, and drug testing areas, and any area where Fentanyl Response Kits are located, shall have form #2121B, "Hazard Assessment for Use of Personal Protective Equipment," posted in the immediate area, listing the Personal Protective Equipment (PPE) required in the Fentanyl Response Kit, as described below. These areas will also include a First Aid kit with Narcan, as well as the attached donning and doffing instructions.

- (2) Model 400 Tyvek hooded suits (Grainger Item# 5AF44)
- (2) Pair of .7 mil minimum thickness extended cuff nitrile gloves (Grainger Item# 48UN22)
- (20) P-100 disposable respirators (Grainger Item# 1AAK5) or equivalent
- (2) Pair of Condor Anti-Fog Goggles (Grainger Item# 1VT70)
- (2) Yellow 1.5-gal Hazardous Waste bags (Grainger# 3WNA3)
- (1) Blue 600 Polyester PPE bag (Grainger Item# 9G718)
- (2) Standard evidence bags (Supplied by facility)

Subject to availability, any of the above items may be substituted with an equivalent item, should they be out of stock at Grainger.

All staff assigned to process correspondence and/or packages must don a P-100 disposable respirator in accordance with Directive #4068, "Respiratory Protection Program," clear goggles (not safety glasses), and .7 mil minimum thickness extended cuff nitrile gloves while completing these tasks. Nitrile gloves with a minimum thickness of .7 mil shall be used for all area searches and where incarcerated individuals or their living quarters are searched or frisked. Any time an employee is to conduct an area search, search or frisk of an incarcerated individuals' person and/or living quarters in which dangerous drugs are suspected, or during emergency medical responses for an unresponsive individual, the correct PPE (as noted in the Fentanyl Response

Kit) will be utilized. Proper PPE should be in place in certain areas of the facility where the possibility may exist for an exposure to Fentanyl or unknown substances.

Any staff who are classified as responders or assigned to the Mail Room/Correspondence Processing Area(s) or Package Room must be fit tested for the P-100 disposable respirator in accordance with Directive #4068. Fit tests shall be documented on an RTF and entered into the KHRT system utilizing training code #41742.

PPE should be disposed of as medical waste in accordance with Directive #4929, "Controlled Drugs, Needles, Syringes & Sharps." Procedures for donning and doffing PPE are attached to this memorandum. Additionally, a training video is available on the DOCCS Training icon under Health Services, entitled "Personal Protective Equipment," which also illustrates donning, doffing, and disposal of PPE.

All facilities will be receiving, or have already received, an Air Science Fume Box, Ductless Enclosures, Low-Profile Horizontal Design air filtration system, which includes a Pre-Filter and HEPA filter, for use in their Mail Rooms/Correspondence Processing Area(s). Extra filters should always be maintained, and facilities should purchase additional filters to ensure an adequate supply of filters are on hand. Pre-Filters must be replaced every 6 months and HEPA filters replaced annually, or both replaced upon use per the manufacturer's specifications.

Please discuss this memorandum at the next Security Supervisor meeting, Department Head meeting, and read at all line-ups for 96 hours. Should you have any questions regarding this memorandum, please contact your assigned Assistant Commissioner for Correctional Facilities.

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

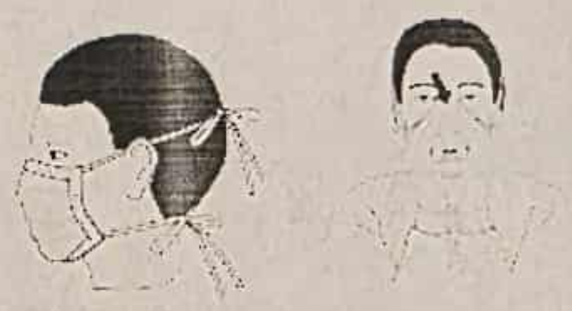
The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist

2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit

4. GLOVES

- Extend to cover wrist of isolation gown

USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

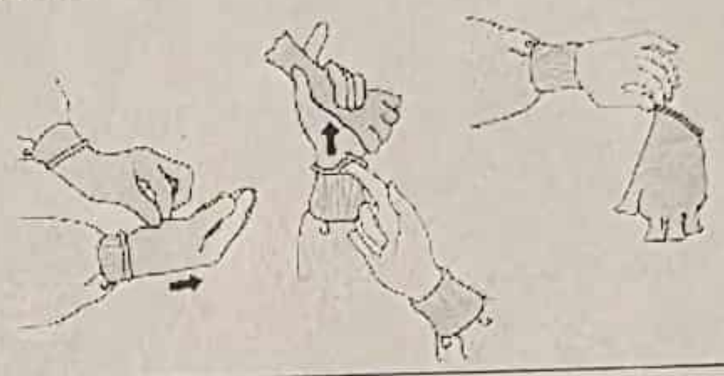
- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)
EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator after leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

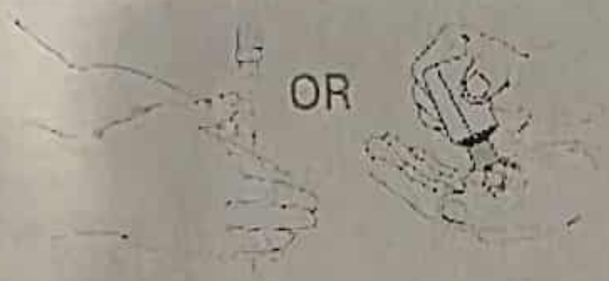
3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container

5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container

2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated —— DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container

5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE

PERFORM HAND HYGIENE BETWEEN STE
BECOME CONTAMINATED AND IMMEDIA