

Continuation of Voluntary Sworn Statement of

(b)(3) (b)(6) (b)(7)(C)

On 16JUN06

spineboards and departed the clinic. I noticed the detainee's hands were bound around his torso with what I believe to be a bed sheet. (b)(3) (b)(6) then instructed me to call (b)(3) (b)(6) (b)(7)(C) the Senior Nurse of the Detainee Clinic, and to initiate the recall protocol. I departed the treatment room and used the telephone in the nurse station. After I had contacted (b)(3) (b)(6) I exited the nurse station and noticed another detainee, whom I later learned was the third detainee, being transported into the Detainee Clinic by four (4) guards. The guards placed the detainee onto the exam table in exam room ten (10). Two of the guards then departed the Detainee Clinic, while the other two (2) remained in exam room ten (10) with the detainee. I began to attempt to find the detainee's vital signs. I noticed the detainee was cyanotic and had no respirations. I was not able to detect any vital signs. (b)(3) (b)(6) (b)(7)(C) instructed me to begin performing chest compressions on the detainee. She also instructed one of the guards to perform artificial respiration. The guard and I performed Cardio Pulmonary Respiration (CPR) for approximately five to ten (5-10) minutes until (b)(3) (b)(6) relieved me and assumed performing chest compressions. I then relieved the guard and assumed administering artificial respirations. (b)(3) (b)(6) and I performed CPR on the detainee for approximately one to two (1-2) minutes when (b)(3) (b)(6) brought in a defibrillator (AED). (b)(3) (b)(6) and I discontinued conducting CPR while (b)(3) attached the AED to the detainee. The AED indicated it detected "no shockable rhythm." (b)(3) (b)(6) and I then resumed performing CPR, as is standard practice until a physician can determine the status of the patient. We continued performing CPR for approximately two (2) minutes when (b)(3) (b)(6) (b)(7)(C) entered the examination room and connected an oxygen supply line to the Bag-Valve Mask (BVM) which I was using to artificially respire the detainee. After approximately two (2) more minutes, the AED indicated to discontinue performing CPR while it took its second reading of the detainee. Again, the AED indicated "no shockable rhythm." At that time, (b)(3) (b)(6) (b)(7)(C) the Senior Medical Officer (SMO), entered examination room ten (10) and attempted to intubate the detainee. (b)(3) (b)(6) however, was unable to do so because the detainee's jaw was locked shut and he could not open it. I assisted (b)(3) (b)(6) to open the detainee's mouth. While struggling to open his mouth, we broke at least one (1) of the detainee's teeth. We eventually opened the detainee's mouth and discovered what I believe to be a white nylon sock inserted inside the back of the detainee's mouth. (b)(3) (b)(6) extracted the sock from the detainee's mouth, and again attempted to intubate the detainee. The second attempt to intubate the detainee also failed. (b)(3) (b)(6) was not able to place the intubation tube down the detainee's airway. (b)(3) (b)(6) then fitted the detainee with a nasal airway. (b)(3) (b)(6) and I then resumed performing CPR. We performed CPR for approximately two to three (2-3) minutes when (b)(3) (b)(6) entered examination room ten (10) and performed several tests on the detainee attempting to detect signs of life. (b)(3) (b)(6) detected no signs of life and called the time of death at 0116 hrs. At this time, all efforts being conducted to revive the detainee were ceased. All personnel in the examination room then exited. It was at this time that I