

on June 16, 2006

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

The detainee was pale and unresponsive. He was hooked up to the defibrillator and I could see that he did not have a pulse but I checked his carotid artery for a pulse and could not find one. The detainee felt cold to the touch. I had on gloves at the time. His eyes were partially open but his gaze was fixed. He had a face mask on and someone was "bagging" (providing assistance to breath). His mouth was shut. I noticed that area where the lower jaw meets the neck was purple and on the front right (detainee's right) half of his neck there was a pronounced bulge. His head and neck were stiff but his limbs were still pliable. I did not notice if there was any swelling in the lower portions of the detainee's extremities. I did not observe anything in the detainee's mouth, and there was nothing tied around the detainee's neck, wrists or waist. The detainee was not restrained with shackles and hand cuffs but he was strapped to the back board. We did CPR for a few minutes and never got a pulse going. The defibrillator automatically analyzing the patient's heart rhythm to determine if a shock is needed/appropriate. You can not shock on a flat line, you can only shock if a person is in ventricular tachycardia or ventricular fibrillation. (b)(3) (b)(6)

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When the paramedics arrived and we prepped him for transport. One of the things they did was put him on the AED. When they put him on the AED we all stopped touching the detainee and one of the paramedics hit the analyze button and the AED came back with the message that no shock was advised. We continued doing CPR and I was doing the chest compressions. One of the paramedic intubated the detainee. To get the tube in the paramedics had to pry open his mouth with a tongue blade (wooden tongue depressor). It looked like it took some force to get the detainee's mouth open but it was not too bad. The paramedics checked for placement of the tube and when they did that I stopped doing chest compressions. The tube was not in correctly so they pulled it out and put in a new tube which went in correctly. We then moved the detainee to the transport gurney and I switched over to bagging the detainee. We stopped doing chest compressions because we were wheeling him out the door and were just trying to get him out of there and to the hospital. We loaded him into the ambulance and I went back into the clinic. (b)(3) (b)(6)

(b)(3)

While all of this was going on I did not see anything pieces of white cloth or braided white cloth in the clinic that appeared strange or out of place like it may have come from a detainee. There were some MA's in the clinic but they did not tell us what happened they just stood by silently. I know that COL (b)(3) (b)(6) came in and talked to (b)(3) (b)(6) but the only thing I remember being said was that the doctors had been called. (b)(3) (b)(6) (b)(7)(C)

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After loading the first detainee into the ambulance I went back into the clinic and this was when I first realized that there were other detainees in the clinic being treated. I looked into the first exam room on the left and I saw that there were enough people in there treating that detainee. I did not go into this room at all. I then went into the second exam room on the left and I saw a third detainee being worked on by two Corpsmen. (b)(3) (b)(6) was bagging him and (b)(3) (b)(6) was doing chest compressions. I went and got the AED. This detainee was dressed in the regular tan pants and just the tan shirt, not t-shirt underneath. When trying to hook this detainee to the AED I found a white tube like cloth tied around the detainee's chest with a knot that I could not untie. I managed to pull it down around his waist so I could get his shirt pulled up so I could hook up the AED. This piece of cloth was tight and I struggled with it. I have no idea what the purpose of the strip of cloth was. I hit analyze on the AED and it advised not to shock the detainee. I then switched out with Presley and took over chest compressions and continued CP (b)(3) (b)(6) (b)(7)(C)

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Continuation of voluntary sworn statement of

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noticed that this detainee cold to the touch but his extremities and limbs were still pliable. His neck and head however were stiff. His eyes were open and his gaze was fixed. I checked for a pulse multiple times and never detected one. I observed that the area where the detainee's lower jaw met his neck was purple in color. I did not see any indentations in the skin. I saw that the the detainees feet appeared really big and puffy like skin was tight on his feet. I don't remember if he had on leg shackles but his hands were definitely not restrained because his arms were hanging down off the sides of the board as he was not strapped down as securely as the first detainee. There was noting else tied to the outside of the detainee that I saw. The Senior Medical Office, (b)(3) (b)(6) arrived and assessed the detainee. He ran a gauze pad across the detainee's eyes and got no response. The he tried to tube him but we could not get his jaw open. (b)(3) (b)(6) used the laryngoscope ~~scope~~ blade, which is made of metal, to pry the detainee's mouth open and in doing so broke some of the detainee's teeth. Once the mouth was open we saw that there was a big piece of cloth lodged in the back of the of the detainee's mouth. (b)(3) (b)(6) extracted it with forceps and it appeared to take a good amount of force to get it out. Once it was out I saw that it was folded repeatedly on itself and nearly as big as a wash cloth that was folded once in half. Once the cloth was out of the detainees mouth we inserted a nasal canula (tube to bypass the mouth and upper throat) because we saw that the detainees chest was not rising with the breaths so we thought there may have been something else obstructing the airway. Even with the nasal canula in we could not get the chest to rise. (b)(3) (b)(6) (b)(7)(C) then came in and did a cardiac thump which had not results. Then (b)(3) (b)(6) "called it" meaning that he was pronouncing the time of death. I looked at watch and it was 0115. Also, the AED stayed on and kept automatically analyzing but never advised a choc (b)(3) (b)(6)

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would say that the entire event took less than 30 minutes (b)(3) (b)(6)

In the aftermath of all that had happened I heard that the second detainee had something in his mouth. The cloth that we removed from the third detainee (second one that I worked on) was clamped to his shirt with the forceps and someone took a picture of it. Then we covered every body up with sheets, turned the AC down colder. The two remaining detainees were put in the same room. The guards maintained watch from the door. The admiral and some other people came in. The admiral gathered us all up and gave a little pep talk and debrief where he praised our efforts and said that the detainees had been trying to commit suicide for a long time (b)(3)

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The last time something like this happened was 18MAY06 about 0500. The night before the <sup>sing</sup> signing (b)(3) (b)(6) (b)(7)(C) was unusually loud and long singing and then the detainee tried to commit suicide by overdosing on his medication, which he had been hording instead of taking at the time of iss (b)(3) (b)(6) (b)(7)(C) the next morning

I never heard anyone describe how the detainees were found. I have not heard any of the MA's discuss events of that night (b)(3) (b)(6)

This time the guards brought the patients to us where as usually we go out to the cellblocks at (b)(3):5 USC 5574(i)

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