

**MISSOURI DEPARTMENT OF CORRECTIONS  
PREPARATION AND ADMINISTRATION OF CHEMICALS  
FOR LETHAL INJECTION**

**A. Execution team members**

1. The execution team consists of contracted medical personnel and department employees.
2. A physician, nurse, or pharmacist prepares the chemicals used during the lethal injection.
3. A physician, nurse, or emergency medical technician (EMT–intermediate or EMT–paramedic) inserts intravenous lines, monitors the prisoner, and supervises the injection of lethal chemicals by nonmedical members of the execution team.
4. Two department employees inject the chemicals into the prisoner.

**B. Preparation of chemicals**

1. Medical personnel prepare the lethal chemical. The quantity of the chemical may not be changed without prior approval of the department director. Ten (10) syringes are prepared and labeled in a distinctive manner as follows.
2. Syringes 1, 2, 3, and 4 each contain 50 cc of propofol (also known as Diprovan), for a total of 2 grams of propofol. Syringe 1 also contains 10 cc of Lidocaine.
3. Syringe 5 contains 30 cc of saline solution.
4. Syringes 1A, 2A, 3A, and 4A: 2 additional grams of propofol (also known as Diprovan) shall be kept available but need not be withdrawn into the labeled syringes unless the primary dose of 2 grams proves to be insufficient for the procedure. Syringe 1A will also contain 10 cc of Lidocaine.
5. Syringe 5A contains 30 cc of saline solution. (This syringe is prepared in the event that additional flush is required.)

**C. Intravenous lines**

1. Medical personnel determine the most appropriate locations for intravenous (IV) lines. They insert both a primary IV line and a secondary IV line unless the prisoner's physical condition makes it unduly difficult to insert more than one IV. Medical personnel may insert the primary IV line as a peripheral line or as a central venous line (e.g., femoral, jugular, or

subclavian) provided they have appropriate training, education, and experience for that procedure. The secondary IV line is a peripheral line.

2. A sufficient quantity of saline solution is injected to confirm that the IV lines have been properly inserted and that the lines are not obstructed.

#### **D. Monitoring of prisoner**

1. Medical personnel attach the leads from the electrocardiograph to the prisoner's chest. Medical personnel check the electrocardiograph to confirm that it is functioning properly.

2. The gurney is positioned so that medical personnel can observe the prisoner's face directly or with the aid of a mirror.

3. Medical personnel monitor the electrocardiograph and the prisoner during the execution.

#### **E. Administration of chemicals**

1. Upon order of the department director, the chemicals are injected into the prisoner by the execution team members under the observation of medical personnel. The lights in the execution support room are maintained at a sufficient level to permit proper administration of the chemicals.

2. The propofol is injected from syringes 1, 2, 3, and 4 (2 grams). The saline solution in syringe 5 (30 cc) is injected.

3. Medical personnel shall physically examine the prisoner, confirm the prisoner is unconscious, and inspect the catheter site(s). In the unlikely event the prisoner is conscious, medical personnel shall assess the situation to determine why the prisoner is conscious. Medical personnel shall communicate this information to the department director. The department director will determine how to proceed.

4. If deemed appropriate, the department director may instruct the execution team to administer an additional 2 grams of propofol, injected from syringes 1A, 2A, 3A, and 4A (2 grams) into the secondary IV line. The saline solution in syringe 5A (30 cc) is injected. Medical personnel confirm that the prisoner is unconscious as directed in paragraph E.3.

5. When all electrical activity of the heart ends as shown by the electrocardiogram, medical personnel pronounce death.

## **F. Documentation of chemicals**

1. Medical personnel properly dispose of unused chemicals.
2. Before leaving ERDCC, all members of the execution team complete and sign the “Sequence of Chemicals” form thereby verifying that the chemicals were given as specified in this protocol.
3. Before leaving ERDCC, medical personnel complete and sign the “Chemical Log” indicating the quantities of the chemicals used and the quantities of the chemicals discarded during the execution.
4. Within three days of the execution, the ERDCC warden submits the Sequence of Chemicals and the Chemical Log to the director of the Division of Adult Institutions. The DAI division director and the department director review the records. If they do not detect any irregularities, they approve the two documents. If any irregularities are noted, the DAI division director promptly determines whether there were any deviations from this protocol and reports his findings to the department director.

Missouri Department of Corrections  
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