

NO. 23-6912

EXHIBIT A

MEDICAL RECORDS BY
GENIE CHISHOLM

(PAGE 1-3)

RECEIVED

APR 01 2024

S.C. SUPREME COURT

LEGAL

LITTLE-385407

EXHIBIT A

Patient Name: LITTLE, DAVID
Date of Birth: 4/4/1990

MRN: 001230454
FIN: 1001366179

* Other MR Documents - Auth (Verified) *



Southern Health Partners
Your Partner in Affordable Service Healthcare

Corporate Office: 2030 Hamilton Place Blvd., #140, Chattanooga TN 37402
Corporate Phone: (423) 553-5635 Fax: (423) 553-5645

PATIENT OUTSIDE REFERRAL INFORMATION FORM

This patient is currently incarcerated at the jail facility listed below. Patient has been referred to your ER/facility in regarding to his symptoms/conditions listed below. All subsequent tests, procedures, and outpatient services other than requested service must be communicated and approved by the medical contact person at the jail facility to ensure justification. Failure to notify the medical contact person may result in reduced benefits and/or possible denial of payment. If hospital admission is necessary, please communicate any and all medical information as well as an estimated length of stay to our Utilization Review Department at our corporate office (423) 553-5635 x927 or Fax this completed form to 423-551-3018. Certification, justification, and/or treatment plan of continued services must be obtained to guarantee payment of the claim. Thank you for your cooperation.

TO BE COMPLETED BY THE MEDICAL STAFF AT THE JAIL:

DATE: 2/11/21 PATIENT'S NAME (LAST/FIRST): David Antonio Little

D.O.B.: [REDACTED] SEX: M F S.S.#: [REDACTED] I.D.#: 10050278

Jail Status: COUNTY STATE FEDERAL OTHER: _____

SENT TO: McLeod Health Charms APPT DATE: 2/11/21

HOUSING FACILITY/SITE/STATE: Chesterfield County Detention Center

SITE PHYSICIAN: Kendra Fling MD SITE MEDICAL CONTACT (RN/LPN): Genie Chisholm MT/LLPN

SITE MEDICAL UNIT PHONE #: (843) 623-5064 SITE MEDICAL UNIT FAX #: (843) 623-2088

REASON FOR REFERRAL: (INCLUDE HX OF ILLNESS/INJURY, PRESENT & PAST TREATMENT WITH PATIENT RESULTS, LAB AND/OR X-RAY RESULTS, FINDINGS FROM PHYSICAL EXAM, PATIENT LIMITATIONS, ETC.):
Unknown ingested substance prior to incarceration. Unable to complete assessment R/T AMS.

SERVICE REQUESTED: Evaluation and Treatment

PATIENT INSURANCE INFO: unknown POLICY #: N/A

TO BE COMPLETED BY THE REFERRAL STAFF AND RETURNED WITH THE INMATE PATIENT BACK TO THE FACILITY:

****HOSPITAL / PHYSICIAN OFFICE: PLEASE RETURN THIS FORM WITH THE CORRECTIONAL STAFF UPON DISCHARGE OF THE PATIENT OR FAX DIRECTLY TO THE SITE FAX NO. NOTED ABOVE. IF INPATIENT HOSPITALIZATION IS REQUIRED, JAIL MEDICAL STAFF MUST BE NOTIFIED IMMEDIATELY AND FAX THIS COMPLETED FORM TO 423-551-3018.**

FINDINGS: _____

PLANNED TREATMENT: _____

ER/HOSPITAL PHYSICIAN ORDERS: _____

ER/HOSPITAL CONTACT (INCLUDE PHONE NUMBER): _____

NOTE(S): _____

SEND ALL BILLING NOTICES TO THE CORPORATE OFFICE ADDRESS AT 2030 HAMILTON PLACE BLVD., #140, CHATTANOOGA, TN 37402. PHONE: 423-553-5635; FAX: 423-553-5645. THANK YOU.

Authorization for payment of service is only guaranteed during the time of actual confinement of the inmate under the custody of the above listed jail/prison; or under the terms of our County contract, or by any other insurance coverage deemed primary coverage. This process is not a guarantee of payment.


NO ASSESSMENT WAS MADE, NEITHER AN ATTEMPT. JAILER AND NURSE ASSUMED THE INMATE WAS ON DRUGS AND ACTED WITH NEGLIGENCE AND WANTON CARE. SEE EXHIBIT E

PRESUMPTIONS →

Patient Name: LITTLE, DAVID
Date of Birth: [REDACTED]

MRN: 001230454
FIN: 1001366179

* Other MR Documents - Auth (Verified) *

 Southern Health Partners
Your Partner in Affordable Personalized Care

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TO BE COMPLETED BY THE MEDICAL STAFF AT THE JAIL:

DATE: 2/16/21 PATIENT'S NAME (LAST/FIRST): David Antonio Little
SEX: M F S.S.#: [REDACTED] I.D.#: 10050278
Jail Status: COUNTY STATE FEDERAL OTHER _____
SENT TO: McLeod Health Care APPT DATE: 2/16/21
HOUSING FACILITY/SITE/STATE: Chesterfield County Detention Center
SITE PHYSICIAN: Heather Flinn MD SITE MEDICAL CONTACT (RN/LPN): Genie Chisholm RN/ALPN
SITE MEDICAL UNIT PHONE #: (883) 623-5064 SITE MEDICAL UNIT FAX #: (883) 623-2088

REASON FOR REFERRAL: (INCLUDE HX OF ILLNESS/INJURY, PRESENT & PAST TREATMENT WITH PATIENT RESULTS, LAB AND/OR X-RAY RESULTS, FINDINGS FROM PHYSICAL EXAM, PATIENT LIMITATIONS, ETC.):
Unknown ingested substance prior to incarceration. Unable to complete movement pt Ams.

SERVICE REQUESTED: Evaluation and Treatment
PATIENT INSURANCE INFO: UNKNOWN POLICY #: N/A

TO BE COMPLETED BY THE REFERRAL STAFF AND RETURNED WITH THE INMATE PATIENT BACK TO THE FACILITY:

****HOSPITAL / PHYSICIAN OFFICE: PLEASE RETURN THIS FORM WITH THE CORRECTIONAL STAFF UPON DISCHARGE OF THE PATIENT OR FAX DIRECTLY TO THE SITE FAX NO. NOTED ABOVE. IF INPATIENT HOSPITALIZATION IS REQUIRED, JAIL MEDICAL STAFF MUST BE NOTIFIED IMMEDIATELY AND FAX THIS COMPLETED FORM TO 423-551-3018.**

FINDINGS: _____
PLANNED TREATMENT: _____
ER/HOSPITAL PHYSICIAN ORDERS: _____
ER/HOSPITAL CONTACT (INCLUDE PHONE NUMBER): _____
NOTE(S): _____

ATTN: [REDACTED] 30 Y M 11-24
FIN: 1001366179

SEND ALL BILLING NOTICES TO THE CORPORATE OFFICE ADDRESS AT 2030 HAMILTON PLACE BLVD., #140, CHATTANOOGA, TN 37402. PHONE: 423-553-5635; FAX: 423-553-5645. THANK YOU.

Authorization for payment of service is only guaranteed during the time of actual confinement of the inmate under the custody of the above listed jail/prison or under the terms of our County contract, or by any other insurance coverage deemed primary coverage. This process is not a guarantee of payment.
Form: January 2016

Facility: MHCW

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2 OF 3



NO ENTRY FOR 02/14/21 OR 02/15/21

NO ATTEMPT WAS MADE! SEE EXHIBIT E NEVER SAW YM ON 02/16/21

JAIL LOG

NO. 23-6912

PROGRESS NOTES

List Date/Time	Inmate's Name: (Last, First)	D.O.B.:	Allergies:
	Little David Antonio	190	NKDA
2/16/21 11:29 Am	attempted to complete assessment on pt. was unable to complete related to altered Mental status. Pt. was referred to McLeod Health Chiropractic Evaluation and treatment Pt Ams. Report called to McLeod Health Chiropractic transport here for pt. <i>Almie Chickston Lpn</i>		
2/16/21 5:45 pm	Becky Harvey from McLeod Health Chiropractic called and said that they recommend pt being seen @ Tri-county Mental Health. She stated she had spoken with Vivian @ Tri-county and she would see pt as a walk-in. <i>Almie Chickston Lpn</i>		
2/17/21 9:00 Am	Called and spoke with Vivian @ Tri-county and arranged for transportation for appt. @ Vivian @ 12pm. <i>Almie Chickston Lpn</i>		
2/17/21 1:30 pm	Vivian called and said pt was in extreme psychosis but he refused all services and would not consent to treatment. <i>Almie Chickston Lpn</i>		
2/22/21 4:00	Pt was calm and was able to carry on a conversation. Pt consented to have H&P completed. Pt met @ MH on 2/21/21 and pt was released from suicide watch and placed on medical observation @ Flu in 7 days. <i>Almie Chickston Lpn</i>		
3/10/21 10:51 Am	Pt was in altercation @ 3 police officers on 3/9/21. Pt called this nurse to med cell and stated that during altercation his @ knee was hurt and it is painful to move, swelling noted. XRay ordered for @ knee with 2 views @ XRay technician here @ facility for another patient @ this time and is going to do XRay today on 3/10/21. <i>Almie Chickston Lpn</i>		
3/15/21 1:30	Pt yelling out of lap from med cell threatening to throw urine and feces on officers and workers. Pt has thrown meal trays several times. <i>Almie Chickston Lpn</i>		
List Date/Time	Inmate's Name: (Last, First)	D.O.B.:	Allergies:
2/16/21	Little David Antonio	190	NKDA

EXHIBIT B

(4)

DESCRIPTION OF DRUGS

ATIVAN AND DROPERIDOL (INJECTION)

(PAGE 1-16)

Ativan[®] C-IV
(lorazepam)
Tablets
Rx only

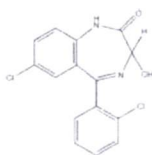
WARNING: RISKS FROM CONCOMITANT USE WITH OPIOIDS

Concomitant use of benzodiazepines and opioids may result in profound sedation, respiratory depression, coma, and death (see **WARNINGS; PRECAUTIONS, Clinically Significant Drug Interactions**).

- Reserve concomitant prescribing of these drugs for use in patients for whom alternative treatment options are inadequate.
- Limit dosages and durations to the minimum required.
- Follow patients for signs and symptoms of respiratory depression and sedation.

DESCRIPTION

Ativan (lorazepam), an antianxiety agent, has the chemical formula, 7-chloro-5-(*o*-chlorophenyl)-1,3-dihydro-3-hydroxy-2*H*-1,4-benzodiazepin-2-one:



It is a nearly white powder almost insoluble in water. Each Ativan (lorazepam) tablet, to be taken orally, contains 0.5 mg, 1 mg, or 2 mg of lorazepam. The inactive ingredients present are lactose monohydrate, magnesium stearate, microcrystalline cellulose, and polacrillin potassium.

CLINICAL PHARMACOLOGY

Studies in healthy volunteers show that in single high doses Ativan (lorazepam) has a tranquilizing action on the central nervous system with no appreciable effect on the respiratory or cardiovascular systems.

Ativan (lorazepam) is readily absorbed with an absolute bioavailability of 90 percent. Peak concentrations in plasma occur approximately 2 hours following administration. The peak plasma level of lorazepam from a 2 mg dose is approximately 20 ng/mL.

The mean half-life of unconjugated lorazepam in human plasma is about 12 hours and for its major metabolite, lorazepam glucuronide, about 18 hours. At clinically relevant concentrations, lorazepam is approximately 85% bound to plasma proteins. Ativan (lorazepam) is rapidly conjugated at its 3-hydroxy group into lorazepam glucuronide which is then excreted in the urine. Lorazepam glucuronide has no demonstrable CNS activity in animals.

The plasma levels of lorazepam are proportional to the dose given. There is no evidence of accumulation of lorazepam on administration up to six months.

Studies comparing young and elderly subjects have shown that advancing age does not have a significant effect on the pharmacokinetics of lorazepam. However, in one study involving single intravenous doses of 1.5 to 3 mg of Ativan Injection, mean total body clearance of lorazepam decreased by 20% in 15 elderly subjects of 60 to 84 years of age compared to that in 15 younger subjects of 19 to 38 years of age.

INDICATIONS AND USAGE

Ativan (lorazepam) is indicated for the management of anxiety disorders or for the short-term relief of the symptoms of anxiety or anxiety associated with depressive symptoms. Anxiety or tension associated with the stress of everyday life usually does not require treatment with an anxiolytic.

The effectiveness of Ativan (lorazepam) in long-term use, that is, more than 4 months, has not been assessed by systematic clinical studies. The physician should periodically reassess the usefulness of the drug for the individual patient.

CONTRAINDICATIONS

Ativan (lorazepam) is contraindicated in patients with

- hypersensitivity to benzodiazepines or to any components of the formulation.
- acute narrow-angle glaucoma.

WARNINGS

Concomitant use of benzodiazepines, including Ativan, and opioids may result in profound sedation, respiratory depression, coma, and death. Because of these risks, reserve concomitant prescribing of these drugs for use in patients for whom alternative treatment options are inadequate.

Observational studies have demonstrated that concomitant use of opioid analgesics and benzodiazepines increases the risk of drug-related mortality compared to use of opioids alone. If a decision is made to prescribe Ativan concomitantly with opioids, prescribe the lowest effective dosages and minimum durations of concomitant use, and follow patients closely for signs and symptoms of respiratory depression and sedation. In patients already receiving an opioid analgesic, prescribe a lower initial dose of Ativan than indicated in the absence of an opioid and titrate based on clinical response. If an opioid is initiated in a patient already taking Ativan, prescribe a lower initial dose of the opioid and titrate based upon clinical response.

Advise both patients and caregivers about the risks of respiratory depression and sedation when Ativan is used with opioids. Advise patients not to drive or operate heavy machinery until the effects of concomitant use with the opioid have been determined (see **PRECAUTIONS, Clinically Significant Drug Interactions**).

Pre-existing depression may emerge or worsen during use of benzodiazepines including lorazepam. Ativan (lorazepam) is not recommended for use in patients with a primary depressive disorder or psychosis.

Use of benzodiazepines, including lorazepam, both used alone and in combination with other CNS depressants, may lead to potentially fatal respiratory depression. (See **PRECAUTIONS, Clinically Significant Drug Interactions.**)

Use of benzodiazepines, including lorazepam, may lead to physical and psychological dependence.

As with all patients on CNS-depressant drugs, patients receiving lorazepam should be warned not to operate dangerous machinery or motor vehicles and that their tolerance for alcohol and other CNS depressants will be diminished.

Physical and Psychological Dependence

The use of benzodiazepines, including lorazepam, may lead to physical and psychological dependence. The risk of dependence increases with higher doses and longer term use and is further increased in patients with a history of alcoholism or drug abuse or in patients with significant personality disorders. The dependence potential is reduced when lorazepam is used at the appropriate dose for short-term treatment. Addiction-prone individuals (such as drug addicts or alcoholics) should be under careful surveillance when receiving lorazepam or other psychotropic agents.

In general, benzodiazepines should be prescribed for short periods only (e.g., 2 to 4 weeks). Extension of the treatment period should not take place without reevaluation of the need for continued therapy. Continuous long-term use of product is not recommended. Withdrawal symptoms (e.g., rebound insomnia) can appear following cessation of recommended doses after as little as one week of therapy. Abrupt discontinuation of product should be avoided and a gradual dosage-tapering schedule followed after extended therapy.

Abrupt termination of treatment may be accompanied by withdrawal symptoms. Symptoms reported following discontinuation of benzodiazepines include headache, anxiety, tension, depression, insomnia, restlessness, confusion, irritability, sweating, rebound phenomena, dysphoria, dizziness, derealization, depersonalization, hyperacusis, numbness/tingling of extremities, hypersensitivity to light, noise, and physical contact/perceptual changes, involuntary movements, nausea, vomiting, diarrhea, loss of appetite, hallucinations/delirium, convulsions/seizures, tremor, abdominal cramps, myalgia, agitation, palpitations, tachycardia, panic attacks, vertigo, hyperreflexia, short-term memory loss, and hyperthermia. Convulsions/seizures may be more common in patients with pre-existing seizure disorders or who are taking other drugs that lower the convulsive threshold such as antidepressants.

There is evidence that tolerance develops to the sedative effects of benzodiazepines.

Lorazepam may have abuse potential, especially in patients with a history of drug and/or alcohol abuse.

PRECAUTIONS

In patients with depression, a possibility for suicide should be borne in mind; benzodiazepines should not be used in such patients without adequate antidepressant therapy.

Lorazepam should be used with caution in patients with compromised respiratory function (e.g., COPD, sleep apnea syndrome).

Elderly or debilitated patients may be more susceptible to the sedative effects of lorazepam. Therefore, these patients should be monitored frequently and have their dosage adjusted carefully according to patient response; the initial dosage should not exceed 2 mg.

Paradoxical reactions have been occasionally reported during benzodiazepine use. Such reactions may be more likely to occur in children and the elderly. Should these occur, use of the drug should be discontinued.

The usual precautions for treating patients with impaired renal or hepatic function should be observed. As with all benzodiazepines, the use of lorazepam may worsen hepatic encephalopathy; therefore, lorazepam should be used with caution in patients with severe hepatic insufficiency and/or encephalopathy. Dosage for patients with severe hepatic insufficiency should be adjusted carefully according to patient response; lower doses may be sufficient in such patients.

In patients where gastrointestinal or cardiovascular disorders coexist with anxiety, it should be noted that lorazepam has not been shown to be of significant benefit in treating the gastrointestinal or cardiovascular component.

Esophageal dilation occurred in rats treated with lorazepam for more than one year at 6 mg/kg/day. The no-effect dose was 1.25 mg/kg/day (approximately 6 times the maximum human therapeutic dose of 10 mg per day). The effect was reversible only when the treatment was withdrawn within two months of first observation of the phenomenon. The clinical significance of this is unknown. However, use of lorazepam for prolonged periods and in geriatric patients requires caution, and there should be frequent monitoring for symptoms of upper GI disease.

Safety and effectiveness of Ativan (lorazepam) in children of less than 12 years have not been established.

Information for Patients

To assure the safe and effective use of Ativan (lorazepam), patients should be informed that, since benzodiazepines may produce psychological and physical dependence, it is advisable that they consult with their physician before either increasing the dose or abruptly discontinuing this drug.

Essential Laboratory Tests

Some patients on Ativan (lorazepam) have developed leukopenia, and some have had elevations of LDH. As with other benzodiazepines, periodic blood counts and liver function tests are recommended for patients on long-term therapy.

Clinically Significant Drug Interactions

The concomitant use of benzodiazepines and opioids increases the risk of respiratory depression because of actions at different receptor sites in the CNS that control respiration. Benzodiazepines interact at GABA_A sites and opioids interact primarily at mu receptors. When benzodiazepines and opioids are combined, the potential for benzodiazepines to significantly worsen opioid-related respiratory depression

exists. Limit dosage and duration of concomitant use of benzodiazepines and opioids, and monitor patients closely for respiratory depression and sedation.

The benzodiazepines, including Ativan (lorazepam), produce increased CNS-depressant effects when administered with other CNS depressants such as alcohol, barbiturates, antipsychotics, sedative/hypnotics, anxiolytics, antidepressants, narcotic analgesics, sedative antihistamines, anticonvulsants, and anesthetics.

Concomitant use of clozapine and lorazepam may produce marked sedation, excessive salivation, hypotension, ataxia, delirium, and respiratory arrest.

Concurrent administration of lorazepam with valproate results in increased plasma concentrations and reduced clearance of lorazepam. Lorazepam dosage should be reduced to approximately 50% when coadministered with valproate.

Concurrent administration of lorazepam with probenecid may result in a more rapid onset or prolonged effect of lorazepam due to increased half-life and decreased total clearance. Lorazepam dosage needs to be reduced by approximately 50% when coadministered with probenecid.

The effects of probenecid and valproate on lorazepam may be due to inhibition of glucuronidation.

Administration of theophylline or aminophylline may reduce the sedative effects of benzodiazepines, including lorazepam.

Carcinogenesis and Mutagenesis

No evidence of carcinogenic potential emerged in rats during an 18-month study with Ativan (lorazepam). No studies regarding mutagenesis have been performed.

Pregnancy

Reproductive studies in animals were performed in mice, rats, and two strains of rabbits. Occasional anomalies (reduction of tarsals, tibia, metatarsals, malrotated limbs, gastroschisis, malformed skull, and microphthalmia) were seen in drug-treated rabbits without relationship to dosage. Although all of these anomalies were not present in the concurrent control group, they have been reported to occur randomly in historical controls. At doses of 40 mg/kg and higher, there was evidence of fetal resorption and increased fetal loss in rabbits which was not seen at lower doses.

The clinical significance of the above findings is not known. However, an increased risk of congenital malformations associated with the use of minor tranquilizers (chlordiazepoxide, diazepam, and meprobamate) during the first trimester of pregnancy has been suggested in several studies. Because the use of these drugs is rarely a matter of urgency, the use of lorazepam during this period should be avoided. The possibility that a woman of childbearing potential may be pregnant at the time of institution of therapy should be considered. Patients should be advised that if they become pregnant, they should communicate with their physician about the desirability of discontinuing the drug.

In humans, blood levels obtained from umbilical cord blood indicate placental transfer of lorazepam and lorazepam glucuronide. Infants of mothers who ingested benzodiazepines for several weeks or more preceding delivery have been reported to have withdrawal symptoms during the postnatal period.

Symptoms such as hypoactivity, hypotonia, hypothermia, respiratory depression, apnea, feeding problems, and impaired metabolic response to cold stress have been reported in neonates born of mothers who have received benzodiazepines during the late phase of pregnancy or at delivery.

Nursing Mothers

Lorazepam has been detected in human breast milk; therefore, it should not be administered to breast-feeding women, unless the expected benefit to the woman outweighs the potential risk to the infant.

Sedation and inability to suckle have occurred in neonates of lactating mothers taking benzodiazepines. Infants of lactating mothers should be observed for pharmacological effects (including sedation and irritability).

Geriatric Use

Clinical studies of Ativan generally were not adequate to determine whether subjects aged 65 and over respond differently than younger subjects; however, the incidence of sedation and unsteadiness was observed to increase with age (see **ADVERSE REACTIONS**).

Age does not appear to have a significant effect on lorazepam kinetics (see **CLINICAL PHARMACOLOGY**).

Clinical circumstances, some of which may be more common in the elderly, such as hepatic or renal impairment, should be considered. Greater sensitivity (e.g., sedation) of some older individuals cannot be ruled out. In general, dose selection for an elderly patient should be cautious, and lower doses may be sufficient in these patients (see **DOSAGE AND ADMINISTRATION**).

ADVERSE REACTIONS

Most adverse reactions to benzodiazepines, including CNS effects and respiratory depression, are dose dependent, with more severe effects occurring with high doses.

In a sample of about 3500 patients treated for anxiety, the most frequent adverse reaction to Ativan (lorazepam) was sedation (15.9%), followed by dizziness (6.9%), weakness (4.2%), and unsteadiness (3.4%). The incidence of sedation and unsteadiness increased with age.

Other adverse reactions to benzodiazepines, including lorazepam are fatigue, drowsiness, amnesia, memory impairment, confusion, disorientation, depression, unmasking of depression, disinhibition, euphoria, suicidal ideation/attempt, ataxia, asthenia, extrapyramidal symptoms, convulsions/seizures, tremor, vertigo, eye function/visual disturbance (including diplopia and blurred vision), dysarthria/slurred speech, change in libido, impotence, decreased orgasm; headache, coma; respiratory depression, apnea, worsening of sleep apnea, worsening of obstructive pulmonary disease; gastrointestinal symptoms including nausea, change in appetite, constipation, jaundice, increase in bilirubin, increase in liver transaminases, increase in alkaline phosphatase; hypersensitivity reactions, anaphylactoid reactions; dermatological symptoms, allergic skin reactions, alopecia; SIADH, hyponatremia; thrombocytopenia, agranulocytosis, pancytopenia; hypothermia; and autonomic manifestations.

Paradoxical reactions, including anxiety, excitation, agitation, hostility, aggression, rage, sleep disturbances/insomnia, sexual arousal, and hallucinations may occur. Small decreases in blood pressure and hypotension may occur but are usually not clinically significant, probably being related to the relief of anxiety produced by Ativan (lorazepam).

To report SUSPECTED ADVERSE REACTIONS, contact Valeant Pharmaceuticals North America LLC at 1-800-321-4576 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

OVERDOSAGE

In postmarketing experience, overdose with lorazepam has occurred predominantly in combination with alcohol and/or other drugs. Therefore, in the management of overdose, it should be borne in mind that multiple agents may have been taken.

Symptoms

Overdosage of benzodiazepines is usually manifested by varying degrees of central nervous system depression ranging from drowsiness to coma. In mild cases, symptoms include drowsiness, mental confusion, paradoxical reactions, dysarthria and lethargy. In more serious cases, and especially when other drugs or alcohol were ingested, symptoms may include ataxia, hypotonia, hypotension, cardiovascular depression, respiratory depression, hypnotic state, coma, and death.

Management

General supportive and symptomatic measures are recommended; vital signs must be monitored and the patient closely observed. When there is a risk of aspiration, induction of emesis is not recommended. Gastric lavage may be indicated if performed soon after ingestion or in symptomatic patients. Administration of activated charcoal may also limit drug absorption. Hypotension, though unlikely, usually may be controlled with norepinephrine bitartrate injection. Lorazepam is poorly dialyzable. Lorazepam glucuronide, the inactive metabolite, may be highly dialyzable.

The benzodiazepine antagonist flumazenil may be used in hospitalized patients as an adjunct to, not as a substitute for, proper management of benzodiazepine overdose. **The prescriber should be aware of a risk of seizure in association with flumazenil treatment, particularly in long-term benzodiazepine users and in cyclic antidepressant overdose.** The complete flumazenil package insert including **Contraindications, Warnings, and Precautions** should be consulted prior to use.

DOSAGE AND ADMINISTRATION

Ativan (lorazepam) is administered orally. For optimal results, dose, frequency of administration, and duration of therapy should be individualized according to patient response. To facilitate this, 0.5 mg, 1 mg, and 2 mg tablets are available.

The usual range is 2 to 6 mg/day given in divided doses, the largest dose being taken before bedtime, but the daily dosage may vary from 1 to 10 mg/day.

For anxiety, most patients require an initial dose of 2 to 3 mg/day given two times a day or three times a day.

For insomnia due to anxiety or transient situational stress, a single daily dose of 2 to 4 mg may be given, usually at bedtime.

For elderly or debilitated patients, an initial dosage of 1 to 2 mg/day in divided doses is recommended, to be adjusted as needed and tolerated.

The dosage of Ativan (lorazepam) should be increased gradually when needed to help avoid adverse effects. When higher dosage is indicated, the evening dose should be increased before the daytime doses.

HOW SUPPLIED

Ativan[®] (lorazepam) Tablets are available in the following dosage strengths:

0.5 mg, white, five-sided (shield shape) tablet with a raised "A" on one side and "BPI" and "63" impressed on reverse side. NDC 0187-0063-01 - Bottles of 100 tablets; NDC 0187-0063-50 – Bottles of 500 tablets; NDC 0187-0063-10 – Bottles of 1000 tablets.

1 mg, white, five-sided (shield shape) tablet with a raised "A" on one side and "BPI" and "64" impressed on scored reverse side. NDC 0187-0064-01 - Bottles of 100 tablets; NDC 0187-0064-50 – Bottles of 500 tablets; NDC 0187-0064-10 - Bottles of 1000 tablets.

2 mg, white, five-sided (rectangular pentagon) tablet with a raised "A" and impressed "2" on one side and "BPI" and "65" impressed on scored reverse side. NDC 0187-0065-01 - Bottles of 100 tablets; NDC 0187-0065-50 – Bottles of 500 tablets; NDC 0187-0065-10 – Bottles of 1000 tablets.

BOTTLES:

Keep tightly closed.

Store at 25°C (77°F); excursions permitted to 15° to 30°C (59° to 86°F) [see USP Controlled Room Temperature].

Dispense in a tight container.

Manufactured by:

MEDA Manufacturing GmbH
Cologne, Germany 51063

For:

Valeant Pharmaceuticals North America LLC
Bridgewater, NJ 08807 USA



Ativan is a trademark of Valeant Pharmaceuticals International, Inc. or its affiliates.

update p/n
Rev. 9/16

INAPSINE- droperidol injection
Taylor Pharmaceuticals

INAPSINE® (DROPERIDOL) INJECTION

FOR INTRAVENOUS OR INTRAMUSCULAR USE ONLY

Rx only

WARNING

Cases of QT prolongation and/or torsade de pointes have been reported in patients receiving INAPSINE at doses at or below recommended doses. Some cases have occurred in patients with no known risk factors for QT prolongation and some cases have been fatal.

Due to its potential for serious proarrhythmic effects and death, INAPSINE should be reserved for use in the treatment of patients who fail to show an acceptable response to other adequate treatments, either because of insufficient effectiveness or the inability to achieve an effective dose due to intolerable adverse effects from those drugs (see Warnings, Adverse Reactions, Contraindications, and Precautions).

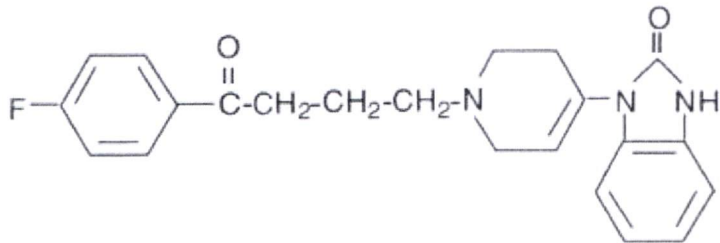
Cases of QT prolongation and serious arrhythmias (e.g., torsade de pointes) have been reported in patients treated with INAPSINE. Based on these reports, all patients should undergo a 12-lead ECG prior to administration of INAPSINE to determine if a prolonged QT interval (i.e., QTc greater than 440 msec for males or 450 msec for females) is present. If there is a prolonged QT interval, INAPSINE should **NOT** be administered. For patients in whom the potential benefit of INAPSINE treatment is felt to outweigh the risks of potentially serious arrhythmias, ECG monitoring should be performed prior to treatment and continued for 2 to 3 hours after completing treatment to monitor for arrhythmias.

INAPSINE is contraindicated in patients with known or suspected QT prolongation, including patients with congenital long QT syndrome.

INAPSINE should be administered with extreme caution to patients who may be at risk for development of prolonged QT syndrome (e.g., congestive heart failure, bradycardia, use of a diuretic, cardiac hypertrophy, hypokalemia, hypomagnesemia, or administration of other drugs known to increase the QT interval). Other risk factors may include age over 65 years, alcohol abuse, and use of agents such as benzodiazepines, volatile anesthetics, and IV opiates. Droperidol should be initiated at a low dose and adjusted upward, with caution, as needed to achieve the desired effect.

DESCRIPTION

INAPSINE contains droperidol, a neuroleptic (tranquilizer) agent. INAPSINE® (droperidol) Injection is available in ampules and vials. Each milliliter contains 2.5 mg of droperidol in an aqueous solution adjusted to pH 3.4 ± 0.4 with lactic acid. Droperidol is chemically identified as 1-(1-[3-(p-fluorobenzoyl) propyl]-1,2,3,6-tetrahydro-4-pyridyl)-2-benzimidazolinone with a molecular weight of 379.43. The structural formula of droperidol is:



Molecular formula: C₂₂H₂₂FN₃O₂, partition coefficient in n-octanol: water: 3.46, pKa: 7.46

INAPSINE is a sterile, non-pyrogenic, aqueous solution for intravenous or intramuscular injection.

CLINICAL PHARMACOLOGY

INAPSINE (droperidol) produces marked tranquilization and sedation. It allays apprehension and provides a state of mental detachment and indifference while maintaining a state of reflex alertness.

INAPSINE produces an antiemetic effect as evidenced by the antagonism of apomorphine in dogs. It lowers the incidence of nausea and vomiting during surgical procedures and provides antiemetic protection in the postoperative period.

INAPSINE potentiates other CNS depressants. It produces mild alpha-adrenergic blockade, peripheral vascular dilatation and reduction of the pressor effect of epinephrine. It can produce hypotension and decreased peripheral vascular resistance and may decrease pulmonary arterial pressure (particularly if it is abnormally high). It may reduce the incidence of epinephrine-induced arrhythmias, but it does not prevent other cardiac arrhythmias.

The onset of action of single intramuscular and intravenous doses is from three to ten minutes following administration, although the peak effect may not be apparent for up to thirty minutes. The duration of the tranquilizing and sedative effects generally is two to four hours, although alteration of alertness may persist for as long as twelve hours.

INDICATIONS AND USAGE

INAPSINE (droperidol) is indicated to reduce the incidence of nausea and vomiting associated with surgical and diagnostic procedures.

CONTRAINDICATIONS

INAPSINE is contraindicated in patients with known or suspected QT prolongation (i.e., QTc interval greater than 440 msec for males or 450 msec for females). This would include patients with congenital long QT syndrome.

INAPSINE (droperidol) is contraindicated in patients with known hypersensitivity to the drug.

INAPSINE is not recommended for any use other than for the treatment of perioperative nausea and vomiting in patients for whom other treatments are ineffective or inappropriate (see WARNINGS).

WARNINGS

INAPSINE should be administered with extreme caution in the presence of risk factors for development of prolonged QT syndrome, such as: 1) clinically significant bradycardia (less than 50 bpm), 2) any clinically significant cardiac disease, 3) treatment with Class I and Class III antiarrhythmics, 4) treatment with monoamine oxidase inhibitors (MAOI's), 5) concomitant treatment with other drug products known to prolong the QT interval (see PRECAUTIONS, Drug Interactions), and 6) electrolyte imbalance, in

particular hypokalemia and hypomagnesemia, or concomitant treatment with drugs (e.g., diuretics) that may cause electrolyte imbalance.

Effects on Cardiac Conduction

A dose-dependent prolongation of the QT interval was observed within 10 minutes of droperidol administration in a study of 40 patients without known cardiac disease who underwent extracranial head and neck surgery. Significant QT prolongation was observed at all three dose levels evaluated, with 0.1, 0.175, and 0.25 mg/kg associated with prolongation of median QTc by 37, 44, and 59 msec, respectively.

Cases of QT prolongation and serious arrhythmias (e.g. torsade de pointes, ventricular arrhythmias, cardiac arrest, and death) have been observed during post-marketing treatment with INAPSINE. Some cases have occurred in patients with no known risk factors and at doses at or below recommended doses. There has been at least one case of nonfatal torsade de pointes confirmed by rechallenge.

Based on these reports, all patients should undergo a 12-lead ECG prior to administration of INAPSINE to determine if a prolonged QT interval (i.e., QTc greater than 440 msec for males or 450 msec for females) is present. If there is a prolonged QT interval, INAPSINE should **NOT** be administered. For patients in whom the potential benefit of INAPSINE treatment is felt to outweigh the risks of potentially serious arrhythmias, ECG monitoring should be performed prior to treatment and continued for 2 to 3 hours after completing treatment to monitor for arrhythmias.

FLUIDS AND OTHER COUNTERMEASURES TO MANAGE HYPOTENSION SHOULD BE READILY AVAILABLE.

As with other CNS depressant drugs, patients who have received INAPSINE (droperidol) should have appropriate surveillance.

It is recommended that opioids, when required, initially be used in reduced doses.

As with other neuroleptic agents, very rare reports of neuroleptic malignant syndrome (altered consciousness, muscle rigidity and autonomic instability) have occurred in patients who have received INAPSINE (droperidol).

Since it may be difficult to distinguish neuroleptic malignant syndrome from malignant hyperpyrexia in the perioperative period, prompt treatment with dantrolene should be considered if increases in temperature, heart rate or carbon dioxide production occur.

PRECAUTIONS

General

The initial dose of INAPSINE (droperidol) should be appropriately reduced in elderly, debilitated and other poor-risk patients. The effect of the initial dose should be considered in determining incremental doses.

Certain forms of conduction anesthesia, such as spinal anesthesia and some peridural anesthetics, can alter respiration by blocking intercostal nerves and can cause peripheral vasodilatation and hypotension because of sympathetic blockade. Through other mechanisms (see CLINICAL PHARMACOLOGY), INAPSINE can also alter circulation. Therefore, when INAPSINE is used to supplement these forms of anesthesia, the anesthetist should be familiar with the physiological alterations involved, and be prepared to manage them in the patients elected for these forms of anesthesia.

If hypotension occurs, the possibility of hypovolemia should be considered and managed with appropriate parenteral fluid therapy. Repositioning the patient to improve venous return to the heart should be considered when operative conditions permit. It should be noted that in spinal and peridural anesthesia, tilting the patient into a head-down position may result in a higher level of anesthesia than is desirable, as well as impair venous return to the heart. Care should be exercised in moving and

positioning of patients because of a possibility of orthostatic hypotension. If volume expansion with fluids plus these other countermeasures do not correct the hypotension, then the administration of pressor agents other than epinephrine should be considered. Epinephrine may paradoxically decrease the blood pressure in patients treated with INAPSINE due to the alpha-adrenergic blocking action of INAPSINE.

Since INAPSINE may decrease pulmonary arterial pressure, this fact should be considered by those who conduct diagnostic or surgical procedures where interpretation of pulmonary arterial pressure measurements might determine final management of the patient.

Vital signs and ECG should be monitored routinely.

When the EEG is used for postoperative monitoring, it may be found that the EEG pattern returns to normal slowly.

Impaired Hepatic or Renal Function

INAPSINE should be administered with caution to patients with liver and kidney dysfunction because of the importance of these organs in the metabolism and excretion of drugs.

Pheochromocytoma

In patients with diagnosed/suspected pheochromocytoma, severe hypertension and tachycardia have been observed after the administration of INAPSINE (droperidol).

Drug Interactions

Potentially Arrhythmogenic Agents

Any drug known to have the potential to prolong the QT interval should not be used together with INAPSINE. Possible pharmacodynamic interactions can occur between INAPSINE and potentially arrhythmogenic agents such as class I or III antiarrhythmics, antihistamines that prolong the QT interval, antimalarials, calcium channel blockers, neuroleptics that prolong the QT interval, and antidepressants.

Caution should be used when patients are taking concomitant drugs known to induce hypokalemia or hypomagnesemia as they may precipitate QT prolongation and interact with INAPSINE. These would include diuretics, laxatives and supraphysiological use of steroid hormones with mineralocorticoid potential.

CNS Depressant Drugs

Other CNS depressant drugs (e.g., barbiturates, tranquilizers, opioids and general anesthetics) have additive or potentiating effects with INAPSINE. Following the administration of INAPSINE, the dose of other CNS depressant drugs should be reduced.

Carcinogenesis, Mutagenesis, Impairment of Fertility

No carcinogenicity studies have been carried out with INAPSINE. The micronucleus test in female rats revealed no mutagenic effects in single oral doses as high as 160 mg/kg. An oral study in rats (Segment I) revealed no impairment of fertility in either male or females at 0.63, 2.5 and 10 mg/kg doses (approximately 2.9 and 36 times maximum recommended human iv/im dosage).

Pregnancy

Category C

INAPSINE administered intravenously has been shown to cause a slight increase in mortality of the newborn rat at 4.4 times the upper human dose. At 44 times the upper human dose, mortality rate was comparable to that for control animals. Following intramuscular administration, increased mortality of the offspring at 1.8 times the upper human dose is attributed to CNS depression in the dams who

neglected to remove placentae from their offspring. INAPSINE has not been shown to be teratogenic in animals. There are no adequate and well-controlled studies in pregnant women. INAPSINE should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.

Labor and Delivery

There are insufficient data to support the use of INAPSINE in labor and delivery. Therefore, such use is not recommended.

Nursing Mothers

It is not known whether INAPSINE is excreted in human milk. Because many drugs are excreted in human milk, caution should be exercised when INAPSINE is administered to a nursing mother.

Pediatric Use

The safety of INAPSINE in children younger than two years of age has not been established.

ADVERSE REACTIONS

QT interval prolongation, torsade de pointes, cardiac arrest, and ventricular tachycardia have been reported in patients treated with INAPSINE. Some of these cases were associated with death. Some cases occurred in patients with no known risk factors, and some were associated with droperidol doses at or below recommended doses.

Physicians should be alert to palpitations, syncope, or other symptoms suggestive of episodes of irregular cardiac rhythm in patients taking INAPSINE and promptly evaluate such cases (see WARNINGS, Effects on Cardiac Conduction).

The most common somatic adverse reactions reported to occur with INAPSINE (droperidol) are mild to moderate hypotension and tachycardia, but these effects usually subside without treatment. If hypotension occurs and is severe or persists, the possibility of hypovolemia should be considered and managed with appropriate parenteral fluid therapy.

The most common behavioral adverse effects of INAPSINE (droperidol) include dysphoria, postoperative drowsiness, restlessness, hyperactivity and anxiety, which can either be the result of an inadequate dosage (lack of adequate treatment effect) or of an adverse drug reaction (part of the symptom complex of akathisia).

Care should be taken to search for extrapyramidal signs and symptoms (dystonia, akathisia, oculogyric crisis) to differentiate these different clinical conditions. When extrapyramidal symptoms are the cause, they can usually be controlled with anticholinergic agents.

Postoperative hallucinatory episodes (sometimes associated with transient periods of mental depression) have also been reported.

Other less common reported adverse reactions include anaphylaxis, dizziness, chills and/or shivering, laryngospasm, and bronchospasm.

Elevated blood pressure, with or without pre-existing hypertension, has been reported following administration of INAPSINE combined with SUBLIMAZE (fentanyl citrate) or other parenteral analgesics. This might be due to unexplained alterations in sympathetic activity following large doses; however, it is also frequently attributed to anesthetic or surgical stimulation during light anesthesia.

OVERDOSAGE

Manifestations

The manifestations of INAPSINE (droperidol) overdose are an extension of its pharmacologic

actions and may include QT prolongation and serious arrhythmias (e.g., torsade de pointes) (see BOX WARNING, WARNINGS, and PRECAUTIONS).

Treatment

In the presence of hypoventilation or apnea, oxygen should be administered and respiration should be assisted or controlled as indicated. A patent airway must be maintained; an oropharyngeal airway or endotracheal tube might be indicated. The patient should be carefully observed for 24 hours; body warmth and adequate fluid intake should be maintained. If hypotension occurs and is severe or persists, the possibility of hypovolemia should be considered and managed with appropriate parenteral fluid therapy (see PRECAUTIONS).

If significant extrapyramidal reactions occur in the context of an overdose, an anticholinergic should be administered.

The intravenous Median Lethal Dose of INAPSINE is 20 to 43 mg/kg in mice; 30 mg/kg in rats; 25 mg/kg in dogs and 11 to 13 mg/kg in rabbits. The intramuscular Median Lethal Dose of INAPSINE is 195 mg/kg in mice; 104 to 110 mg/kg in rats; 97 mg/kg in rabbits and 200 mg/kg in guinea pigs.

DOSAGE AND ADMINISTRATION

Dosage should be individualized. Some of the factors to be considered in determining the dose are age, body weight, physical status, underlying pathological condition, use of other drugs, type of anesthesia to be used and the surgical procedure involved.

Vital signs and ECG should be monitored routinely.

Adult dosage

The maximum recommended initial dose of INAPSINE is 2.5 mg IM or slow IV. Additional 1.25 mg doses of INAPSINE may be administered to achieve the desired effect. However, additional doses should be administered with caution, and only if the potential benefit outweighs the potential risk.

Children's dosage

For children two to 12 years of age, the maximum recommended initial dose is 0.1 mg/kg, taking into account the patient's age and other clinical factors. However, additional doses should be administered with caution, and only if the potential benefit outweighs the potential risk.

See WARNINGS and PRECAUTIONS for use of INAPSINE with other CNS depressants and in patients with altered response.

Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit. If such abnormalities are observed, the drug should not be administered.

HOW SUPPLIED

INAPSINE® (droperidol) Injection is available as:

NDC 11098-010-01, 2.5 mg/mL, 1 mL ampules in packages of 10

NDC 11098-010-02, 2.5 mg/mL, 2 mL ampules in packages of 10

NDC 11098-531-01, 2.5 mg/mL, 1 mL vials in packages of 25

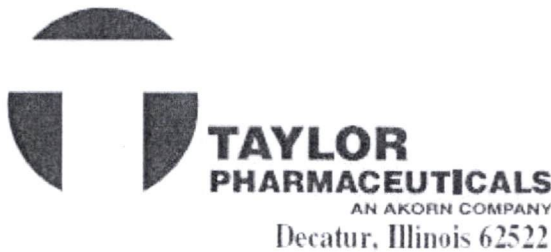
NDC 11098-531-02, 2.5 mg/mL, 2 mL vials in packages of 25

STORAGE

Store at 20° to 25°C (68° to 77°F). [See USP Controlled Room Temperature]. Protect from light.

REFERENCES

1. Saarnivarra L, Klemola UM, Lindgren L, et al. QT interval of the ECG, heart rate and arterial pressure using propofol, methohexital or midazolam for induction of anesthesia. Acta Anaesthesiol Scand 1990; 34: 276-81.
2. Schmeling WT, Warltier DC, McDonald DJ, et al. Prolongation of the QT interval by enflurane, isoflurane and halothane in humans. Anesth Analg 1991; 72: 137-44.
3. Spath G. Torsade des pointe oder die andere Ursache des plotz-lichen Herztodes. Wien: Ueberreuter, 1998.
4. Riley DC, Schmeling WT, Al-Wathiqui MH, et al. Prolongation of the QT-interval by volatile anesthetics in chronically instrumented dogs. Anesth Analg 1988; 67: 741-9.
5. McConachie I, Keaventy JP, Healy TF, et al. Effects of anaesthesia on the QT-interval. Br J Anaesth 1989; 63: 558-60.
6. Lawrence KR, Nasraway SA. Conduction disturbances associated with administration of butyrophenone antipsychotic in the critically ill: a review of the literature. Pharmacother 1997; 17(3): 531-7.
7. Lischke V, Behne M, Doelken P, et al. Droperidol causes a dose-dependent prolongation of the QT interval. Anesth Analg 1994; 79: 983-6.



DPA0N Rev. 04/06

INAPSINE			
droperidol injection			
Product Information			
Product Type	HUMAN PRESCRIPTION DRUG	Item Code (Source)	NDC:11098-010
Route of Administration	INTRAVENOUS, INTRAMUSCULAR		
Active Ingredient/Active Moiety			
	Ingredient Name	Basis of Strength	Strength
	droperidol (UNII: O9U0F09D5X) (droperidol - UNII:O9U0F09D5X)		2.5 mg in 1 mL
Inactive Ingredients			
	Ingredient Name	Strength	
	lactic acid (UNII: 33X04XA5AT)		

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:11098-010-01	10 in 1 PACKAGE		
1		1 mL in 1 AMPULE		
2	NDC:11098-010-02	10 in 1 PACKAGE		
2		2 mL in 1 AMPULE		

INAPSINE

droperidol injection

Product Information

Product Type	HUMAN PRESCRIPTION DRUG	Item Code (Source)	NDC:11098-531
Route of Administration	INTRAVENOUS, INTRAMUSCULAR		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
droperidol (UNII: O9U0F09D5X) (droperidol - UNII:O9U0F09D5X)		2.5 mg in 1 mL

Inactive Ingredients

Ingredient Name	Strength
lactic acid (UNII: 33X04XA5AT)	

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:11098-531-01	25 in 1 PACKAGE		
1		1 mL in 1 VIAL		
2	NDC:11098-531-02	25 in 1 PACKAGE		
2		2 mL in 1 VIAL		

Labeler - Taylor Pharmaceuticals

Revised: 8/2007

Taylor Pharmaceuticals

NO. 23-6912

EXHIBIT C

DEFECTIVE WARRANT

(PAGE 1-4)

LEGAL

LITTLE-385407

No. 23-6912

STATE OF SOUTH CAROLINA

County of: CHESTERFIELD

OFFICERS PRESUMED I WAS COPE
ON DRUGS

DEFFECTIVE WARRANT

CHESTERFIELD CO. SHERIFF'S OFFICE
203 WATSON STREET
CHESTERFIELD, S.C. 29709

S.C. CODE ANN. § 17-13-140 (2003)
STATE V. BACCLIS, 367 S.C. 41, 53, 625
STATE V. VIARD, 276 S.C. 147, 276 S.E. 2D 531
(1981)

SEARCH WARRANT

McLeod Health Cheraw
711 Chesterfield Hwy
Cheraw SC 29520

}

STATE OF SOUTH CAROLINA

AFFIDAVIT

COUNTY OF CHESTERFIELD

Personally appeared before me, one Capt Wayne Jordan, who, being duly sworn, say that there is probable cause to believe that certain property subject to seizure under provisions of Section 17-13-140, 1976 Code of Laws of South Carolina, as amended, is located on the following premises in this County:

DESCRIPTION OF PROPERTY SOUGHT

Any and all medical records regarding David Antonio Little Jr Date of Birth [REDACTED], Social Security Number of [REDACTED] but not limited to labs, xray's, doctors notes, nurses notes ect for the date of February 16th, 2021

DESCRIPTION OF PREMISES (PERSON, PLACE OR THING) TO BE SEARCHED

David Antonio Little Jr Date of Birth [REDACTED], Social Security Number of [REDACTED]

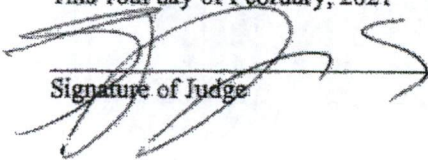
REASON FOR AFFIANT'S BELIEF THAT THE PROPERTY SOUGHT IS ON THE SUBJECT PREMISES

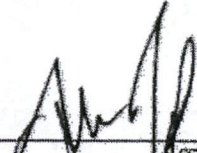
[REDACTED]

That on February 14th, 2021 David A Little Jr did stab and kill his grandmother, Geraldine Sellers Marshall mutiple times about her body. Little contuined confession that he was Jesus and he was the ruler of all. Little was taken to McLeod Health Cheraw for a metal evaluation.

Sworn to and Subscribed before me

This 16th day of February, 2021


Signature of Judge


Affiant
Address 203 Watson ST
CHESTERFIELD SC 29709

Phone 843-623-2101

STATE OF SOUTH CAROLINA

}

SEARCH WARRANT

COUNTY OF CHESTERFIELD

TO ANY BONDED LAW ENFORCEMENT OFFICER OF THIS STATE OR COUNTY OR OF THE MUNICIPALITY OF CHESTERFIELD

It appears from the attached affidavit that there are reasonable grounds to believe that certain property subject to seizure under provisions of Section 17-13-140, 1976 Code of Laws of South Carolina, as amended, is located on the following premises in this county:

**DESCRIPTION OF PREMISES (PERSON, PLACE, OR THING)
TO BE SEARCHED**

David Antonio Little Jr Date of Birth ~~3-10-1980~~, Social Security Number of ~~██████████~~

DESCRIPTION OF PROPERTY

Any and all medical records regarding David Antonio Little Jr Date of Birth ~~3-10-1980~~, Social Security Number of ~~██████████~~ but not limited to labs, xray's, doctors notes, nurses notes ect for the date of February 16th, 2021

~~██████████~~

RETURN

I received the attached Search Warrant February 14, 2021 and have executed it as follows:

On February 12 2021 at 1800 o'clock M, I searched (the person) described in the warrant and (the premises)

I left a copy of the warrant with McLeod Health Cheraw
Name of person searched or "at the place of search" with.
Together with a receipt for the items seized.

The following is an inventory of property taken pursuant to the warrant:

- 1. David Little Medical Records
- from McLeod Health Cheraw

This inventory was made in the presence of _____

AND _____

I swear that this Inventory is a true and detailed account of all the property taken by me on the warrant.

}
SWORN to before me this 13

← MAY 2021?

Day of May, 2021.

[Signature] (L.S.)
Signature of Judge

(Signature of Officer Executing Warrant)

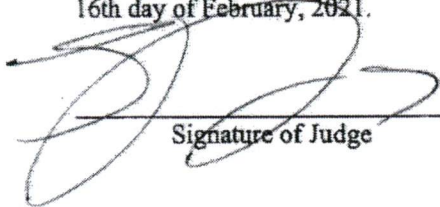


This Search warrant shall not be valid for more than ten days from the date of issuance.

A written inventory of all property seized pursuant to this Search Warrant shall be made to Magistrate of issue within ten days from the date of this warrant, such inventory to be signed by the officer executing this warrant, and a copy of such inventory shall be furnished to the person whose premises are searched if demand for such copy is made.

A copy of this Search Warrant shall be delivered to the person in charge of the premises searched at the time of such search if practicable, and, if not, to such person as soon thereafter as is practicable; in the event the identity of the person in charge is not known or if such person cannot be found after reasonable diligence in attempting to locate the person, a copy shall be attached to a prominent place on such premises.

CHESTERFIELD, S.C.
16th day of February, 2021.



Signature of Judge (L.S.)



NO. 23-6912

EXHIBIT E

OFFICER SHIFT LOG REPORT

(PAGE 1-20)

LEGAL

LITTLE-385407

23-6912

1 OF 20

CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/14/2021 00:25	MARINE, MARCIA	Other Code		SGT MARINE CONDUCTED PIPE CHECK IN OLD JAIL/WORKCAMP-ALL APPEARS SECURE OFC WILLIAMS/ROBINSON CONDUCTING WALK THROUGH IN NEW JAIL
02/14/2021 01:36	MARINE, MARCIA	Other Code		SGT MARINE CONDUCT PIPE CHECK IN OLD/NEW JAIL AND WORKCAMP INMATE A. RIGGINS ASKED TO BE PLACED ON PC-HE WAS MOVE HE E5
02/14/2021 02:44	MARINE, MARCIA	Other Code		SGT MARINE CONDUCT PIPE CHECK IN OLD JAIL/WORKCAMP OFC ROBINSON CONDUCTED WALK THROUGH IN NEW JAIL
02/14/2021 03:31	MARINE, MARCIA	Other Code		OFC ROBINSON CONDUCTING WALK THROUGH IN NEW JAIL SGT MARINE CONDUCTING PIPE CHECK IN OLD JAIL/WORKCAMP
02/14/2021 04:03	MARINE, MARCIA	Other Code		TRINITY WORKER HAMILTON REPORT FOR KITCHEN DUTY
02/14/2021 04:24	MARINE, MARCIA	Other Code		OFC ROBINSON CONDUCTING WALK THROUGH IN NEW JAIL , WORKCAMP, F AND E POD
02/14/2021 04:56	MARINE, MARCIA	Other Code		LIGHTS TURN ON IN JAIL
02/14/2021 05:44	MARINE, MARCIA	Other Code		BRIEFING PASS ON TO SGT FREEMAN ENDING HEAD COUNT: 74 INMATES
02/14/2021 06:00	MCQUEEN, TAYLER	Reporting for Duty		OFC MCQUEEN STARTS DUTY IN CONTROL
02/14/2021 06:00	FREEMAN, PATRICIA	Feeding Begins		CPL FREEMAN FEEDS OLD JAIL/WORK CAMP OFC TADLOCK AND OFC CARTER FEED NEW JAIL
02/14/2021 06:30	MCQUEEN, TAYLER	Feeding Begins		OFC CARTER AND OFC TADLOCK FEED NEW JAIL
02/14/2021 07:00	MCQUEEN, TAYLER	Other Code		NURSE SHARON ENTERS THROUGH THE LOBBY
02/14/2021 07:00	FREEMAN, PATRICIA	Feeding Ends trays collected		FEEDING ENDS IN WHOLE JAIL
02/14/2021 08:00	FREEMAN, PATRICIA	Other Code		CPL FREEMAN SENDS PAPER WORK TO JUDGE PATRICK FOR BOND HEARINGS
02/14/2021 09:00	FREEMAN, PATRICIA	Feeding Begins		CPL
02/14/2021 09:04	MCQUEEN, TAYLER	Other Code		111 ENTERS THROUGH FRONT LOBBY WITH 67*1
02/14/2021 09:10	FREEMAN, PATRICIA	Other Code		OFC TADLOCK GETS I/M BURNS OUT TO CLEAN BOOKING/HOLDING AREA
02/14/2021 18:58	MARINE, MARCIA	Other Code		CHARLIE SHIFT ON DUTY-BEGINNING HEAD COUNT:72 INMATES-OFFICERS ON DUTY (SGT MARINE, OFC WILLIAMS, DEP KERNS AND N1 ROBINSON) MEDICATIONS DISPENSE IN JAIL-SGT MARINE AND CPL FREEMAN CONDUCT WALK THROUGH IN NEW JAIL WHILE CONDUCTING HEAD COUNT
02/14/2021 19:00	MARINE, MARCIA	Other Code		DEP POLSON AND PHILLIPS ENTER BOOKING WITH 67*1 B/M

~~10002-1-001~~

CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

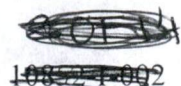
2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/14/2021 19:27	MARINE, MARCIA	Other Code		INMATE D.LITTLE SITTING DOWN
02/14/2021 19:58	MARINE, MARCIA	Other Code		OFC WILLIAMS ENTER B POD TO PUT REC UP AND CONDUCT WALK THROUGH IN NEW JAIL
02/14/2021 20:00	MARINE, MARCIA	Other Code		SGT MARINE CONDUCTED PIPE CHECK IN OLD JAIL AND WALK THROUGH IN WORKCAMP
02/14/2021 21:59	MARINE, MARCIA	Other Code		INMATE DAVID LITTLE WAS PLACED IN RESTRAINT CHAIR BECAUSE HE ATTEMPTED TO BREAK LIGHT FIXER INSIDE HOLDING CELL 2
02/14/2021 22:28	MARINE, MARCIA	Other Code		WALK THROUGH WAS CONDUCTED WHILE TURNING OFF LIGHT OLD JAIL AND WORKCAMP
02/14/2021 23:08	MARINE, MARCIA	Other Code		SEWAGE CHECK SGT MARINE CONDUCTING PIPE CHECK IN OLD JAIL/WORKCAMP
02/15/2021 00:40	MARINE, MARCIA	Other Code		SGT MARINE CONDUCTED WALK THROUGH IN NEW JAIL AND CONDUCT PIPE CHECK IN OLD JAIL AND WORKCAMP
02/15/2021 01:45	MARINE, MARCIA	Other Code		SGT MARINE CONDUCTED PIPE CHECK IN OLD JAIL/WORKCAMP AND NEW JAIL
02/15/2021 01:59	MARINE, MARCIA	Other Code		DEP PHILLIP ENTER BOOKING WITH 6*1 W/F
02/15/2021 02:06	MARINE, MARCIA	Other Code		DEP PHILLIP EXIT BOOKING/SSP
02/15/2021 03:45	MARINE, MARCIA	Other Code		TRINITY WORKER HAMILTON REPORT FOR KITCHEN DUTY
02/15/2021 04:35	MARINE, MARCIA	Other Code		INMATE DAVID LITTLE CAME OUT OF RESTRAINT CHAIR TO USE THE TOILET AND PLACED BACK IN CHAIR
02/15/2021 05:08	MARINE, MARCIA	Other Code		LIGHTS TURN ON IN JAIL-
02/15/2021 05:45	STUDEBAKER, ERIN	Reporting for Duty		CPL STUDEBAKER 10-41 CONTROL
02/15/2021 05:46	MARINE, MARCIA	Other Code		SGT MARINE PASS ON BRIEFING TO SGT JACKSON ENDING HEAD COUNT:74 INMATES
02/15/2021 06:24	STUDEBAKER, ERIN	Feeding Begins		OFC DIXON FEEDS A POD & SETS OUT THEIR CLEANING SUPPLIES
02/15/2021 06:35	STUDEBAKER, ERIN	Feeding Begins		OFC DIXON & SGT JACKSON FEED B POD CLEANING SUPPLIES ALSO SET OUT
02/15/2021 06:51	STUDEBAKER, ERIN	Feeding Ends trays collected		BREAKFAST TRAYS & WHITES COLLECTED FROM NEW JAIL
02/15/2021 06:53	JACKSON, BRITTNI	Reporting for Duty		BRAVO SHIFT IS PRESENT FOR DUTY: SGT JACKSON, CPL STUDEBAKER, OFC PRIVETTE, OFC DIXON
02/15/2021 06:53	JACKSON, BRITTNI	Shift Change		BRIEFING WAS PASSED ON FROM SGT MARINE: BEGINNING HEAD COUNT: 74
02/15/2021 06:54	JACKSON, BRITTNI	Feeding Begins		FEEDING BEGINS IN OLD AND NEW JAIL
02/15/2021 06:54	JACKSON, BRITTNI	Feeding Ends trays collected		FEEDING ENDS IN OLD AND NEW JAIL
02/15/2021 06:58	STUDEBAKER, ERIN	Inmates to Exercise		REC BEGINS B POD/11-16

*FALSE
Ym WAS ALREADY ASLEEP IN CHAIR AND NEVER ATTEMPTED TO BREAK A LIGHT TO BE PLACED IN CHAIR*

FALSE

?



23-6912

3 OF 20

CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/15/2021 07:00	JACKSON, BRITTON	Collected for laundry		LATE ENTRY: WHITES WERE COLLECTED IN OLD AND NEW JAIL TO BE WASHED.
02/15/2021 08:16	JACKSON, BRITTON	Medicine to Inmates		NURSE CALLED AND STATED THAT SHE WILL NOT BE IN TODAY: I WAS INSTRUCTED TO GO IN THE OFFICE AND COLLECT MEDICATION TO BE GIVEN OUT THIS MORNING.
02/15/2021 08:45	JACKSON, BRITTON	Medicine to Inmates		MED PASS WAS CONDUCTED IN OLD AND NEW JAIL
02/15/2021 08:45	JACKSON, BRITTON	Other Code		ALL KIOSKS HAVE BEEN RESET IN THE FACILITY
02/15/2021 08:56	JACKSON, BRITTON	Bond Hearings		JUDGE MELTON ENTERS THE FACILITY
02/15/2021 09:00	STUDEBAKER, ERIN	Inmates to Exercise		11-16 B POD REC OVER
02/15/2021 09:02	STUDEBAKER, ERIN	Other Code		JUDGE MELTON ENTERS FACILITY
02/15/2021 09:13	JACKSON, BRITTON	NORTH SALLY PORT		NC ENTERS THROUGH NSP
02/15/2021 09:21	STUDEBAKER, ERIN	NORTH SALLY PORT		NC ENTERS NSP
02/15/2021 09:42	JACKSON, BRITTON	SOUTH SALLY PORT		NC EXITS THROUGH SSP WITH I/M(S) BRYANT, CHARLES AND PRICE, JAMES
02/15/2021 09:42	JACKSON, BRITTON	Inmate Released		I/M ROBBINS, CANDACE WAS RELEASED FROM THE FACILITY
02/15/2021 09:48	STUDEBAKER, ERIN	SOUTH SALLY PORT		NC EXITS SSP WITH 67*2
02/15/2021 10:12	JACKSON, BRITTON	Inmate Released		KENDALL, THERON AND DIXON, ERIC WAS RELEASED FROM THE FACILITY.
02/15/2021 10:51	JACKSON, BRITTON	Other Code		LATE ENTRY: I/M DIXON, CURTIS WAS BROUGHT OVER FOR PHONE CALL WITH FEDERAL PROBATION OFFICER
02/15/2021 10:51	JACKSON, BRITTON	Other Code		LATE ENTRY: I/M DIXON, CURTIS WAS ESCORTED BACK TO B POD NEW JAIL
02/15/2021 10:52	JACKSON, BRITTON	Other Code		I/M AVERETT, BRIAN WAS MOVED TO WORK CAMP HOLDING DUE TO AN ALTERCATION WITH THE OTHER INMATES IN AWC.
02/15/2021 10:54	JACKSON, BRITTON	Feeding Begins		TRAYS ENTER BOOKING FOR OLD AND NEW JAIL FEEDING BEGINS
02/15/2021 10:58	JACKSON, BRITTON	Feeding Begins		I/M LITTLE, DAVID REFUSED HIS BREAKFAST AND LUNCH TRAY
02/15/2021 11:04	STUDEBAKER, ERIN	Feeding Begins		OFC DIXON FEEDS A POD
02/15/2021 11:26	STUDEBAKER, ERIN	Feeding Begins		OFC DIXON & SGT JACKSON FEED B POD
02/15/2021 11:40	JACKSON, BRITTON	Feeding Ends trays collected		FEEDING ENDS IN OLD AND NEW JAIL ALL TRAYS ARE COLLECTED.
02/15/2021 11:40	JACKSON, BRITTON	Inmate visitation		OFC PRIVETTE ESCORTS I/M FUNDERBURK, RENEE UP TO BOOKING FOR VISITATION.
02/15/2021 11:45	STUDEBAKER, ERIN	Feeding Ends trays collected		LUNCH TRAYS COLLECTED FROM NEW JAIL WHITES RETURNED
02/15/2021 11:55	STUDEBAKER, ERIN	Inmates to Exercise		1-4 B POD REC BEGINS
02/15/2021 12:45	JACKSON, BRITTON	NORTH SALLY PORT		LANCASTER COUNTY ENTERS THROUGH NSP

WHY WAS LITTLE NOT FEED FOR BREAKFAST

FALSE

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~~10852-1003~~
10852-1003

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/15/2021 12:46	JACKSON, BRITNI	Inmate Released		I/M HARGETT, CHAD WAS RELEASED FROM THE FACILITY TO LANCASTER COUNTY
02/15/2021 12:46	DIXON, CRAIG LEMONT	Other Code		LANCASTER ENTERS NORTH SALLY PORT TO PICK UP INMATE HAGGART CHAD
02/15/2021 14:32	DIXON, CRAIG LEMONT	Other Code		CCSO ENTERS NORTH SALLY PORT 67X1(B/M)
02/15/2021 14:50	JACKSON, BRITNI	Booking		I/M GAINEY, SHAVONNE WAS BOOKED AND FINGERPRINTED, HE IS WAITING ON CHARGES
02/15/2021 15:08	PRIVETTE, KATHY BENEFIEL	Ending Tour of Duty		PRIVETTE 10-41 AND DIXON 10-42
02/15/2021 15:33	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		THREE CCCSO EXITS SOUTH GATE

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23-6912

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/15/2021 15:34	JACKSON, BRITNI	NORTH SALLY PORT		THREE CCSO EXITS SOUTH GATE CHERAW PD ENTERS THROUGH NSP WITH 67*1 B/M
02/15/2021 15:53	PRIVETTE, KATHY BENEFIEL	Feeding Begins		CPL STUDEBAKER ENTERS A POD WITH TRAYS
02/15/2021 15:54	PRIVETTE, KATHY BENEFIEL	Feeding Begins		CPL STUDEBAKER EXITS A POD
02/15/2021 16:18	PRIVETTE, KATHY BENEFIEL	Feeding Begins		CPL STUDEBAKER AND DIXON ENTERS B POD WITH TRAYS
02/15/2021 16:36	PRIVETTE, KATHY BENEFIEL	Feeding Ends trays collected		DIXON AND STUDEBAKER EXITS B POD WITH TRAYS ENTERS A POD FOR RETURNED TRAYS
02/15/2021 16:57	JACKSON, BRITNI	Other Code		INVEST. SCOTT ENTERS THE FACILITY TO SPEAK WITH I/M LITTLE, DAVID
02/15/2021 17:10	JACKSON, BRITNI	NORTH SALLY PORT		INVEST. SHIELDS ENTERS NSP

FALSE *

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LITTLE "NEVER" LEFT THE JAIL ON
02/15/21. HE WAS NOT LET OUT THE
CHAIR "ANY" THIS DAY AND DID NOT
LEAVE WITH D. SCOTT AND D. SHIELDS
UNTIL 02/17/21 AROUND 6:00 PM OR 7:00 PM

~~008~~
10852-1008

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
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23-6912

7 OF 20

CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

FALSE *

Date/Time	Officer	Event Type	Area	Event Notes
02/15/2021 17:18	JACKSON, BRITNI	SOUTH SALLY PORT		CCSO/ INVEST. SCOTT AND SHIELDS EXIT THROUGH NSP WITH 67*1 LITTLE, DAVID IN ROUTE TO THE SHERIFFS OFFICE.
02/15/2021 17:22	PRIVETTE, KATHY BENEFIEL	NORTH SALLY PORT		BLK TRUCK ENTERS NORTH GATE
02/15/2021 17:24	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		RUSSICIA BLK TRUCK EXITS SOUTH
02/15/2021 17:30	PRIVETTE, KATHY BENEFIEL	NORTH SALLY PORT		CCSO ENTERS NORTH GATE FOR PAPERWORK
02/15/2021 17:40	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		CCSO 122 EXITS SOUTH GATE
02/15/2021 17:43	PRIVETTE, KATHY BENEFIEL	Other Code		DIXON ENTERS A POD THEN EXITS TO CONTROL
02/15/2021 17:59	PRIVETTE, KATHY BENEFIEL	Other Code		11-16 REC ON TIME
02/15/2021 18:00	PATE, CANDIS	Reporting for Duty		DELTA SHIFT BEGINS WITH SGT. QUICK, CPL. COHEN, OFC. EDENS, AND OFC.PATE
02/15/2021 18:10	PATE, CANDIS	Medicine to Inmates	NEW JAIL	CPL.COHEN PASS OUT MEDS IN NEW JAIL A POD AND B POD
02/15/2021 18:11	PATE, CANDIS	Medicine to Inmates	OLD JAIL/WORK CAMP	OFC.EDENS PASS OUT MEDS IN OLD JAIL/WORK CAMP
02/15/2021 18:22	PATE, CANDIS	NORTH SALLY PORT	SALLY PORT	CCSO ENTERS NORTH GATE WITH 67*1
02/15/2021 19:00	PATE, CANDIS	SOUTH SALLY PORT	SALLY PORT	INV.BURNS AND INV.SCOTT EXITS BOOKING AND SOUTH GATE AFTER PLACING LITTLE,DAVID IN HOLDING CELL 2 IN THE RESTRAINT CHAIR.
02/15/2021 19:05	PATE, CANDIS	Other Code	NEW JAIL	CPL. COHEN ENTERS B POD TO PUT UP REC B11-14 AND ROOMS B15-16
02/15/2021 21:40	PATE, CANDIS	Other Code		LIGHTS WENT OUT IN NEW JAIL AND COMPUTERS OUT IN CONTROL ROOM.
02/16/2021 00:02	QUICK, SHEVONNE	Other Code	NEW JAIL	CPL. COHEN AND OFC. PATE CONDUCT A WALK THROUGH IN NEW JAIL
02/16/2021 00:35	QUICK, SHEVONNE	Other Code	OLD JAIL	SGT. QUICK CONDUCTING A WALK THROUGH IN OLD JAIL
02/16/2021 00:43	EDENS, YLANA	Other Code	NEW JAIL	CPL COHEN ALONG WITH OFC PATE CONDUCTS A SECURITY CHECK IN A&B POD NEW JAIL
02/16/2021 01:52	QUICK, SHEVONNE	Other Code	HOLDING CELL #2	SGT. QUICK, CPL. COHEN, AND OFC. PATE GOT INMATE LITTLE, DAVID UP TO STRETCH AND USE THE RESTROOM
02/16/2021 02:08	QUICK, SHEVONNE	Other Code	OLD JAIL	SGT. QUICK CONDUCTED A WALK THROUGH IN OLD JAIL
02/16/2021 02:09	QUICK, SHEVONNE	Other Code	NEW JAIL	CPL. COHEN CONDUCTED A WALK THROUGH IN NEW JAIL
02/16/2021 02:17	EDENS, YLANA	Other Code	NEW JAIL	CPL COHEN ENTERS A&B POD NEW JAIL TO CONDUCT A SECURITY CHECK
02/16/2021 03:05	QUICK, SHEVONNE	Other Code	OLD JAIL	OFC. PATE CONDUCTING A WALK THROUGH IN OLD JAIL
02/16/2021 03:49	QUICK, SHEVONNE	Other Code		TRINITY KITCHEN WORKER HAMILTON ENTERS THE FACILITY

FALSE *

NOT SURE IF THIS IS TRUE OR FALSE ONLY ONCE WAS I ALLOWED TO STRETCH AND USE RESTROOM



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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/16/2021 03:49	QUICK, SHEVONNE	Other Code	NEW JAIL	OFC. PATE AND EDENS CONDUCTING A WALK THROUGH IN NEW JAIL
02/16/2021 04:06	COHEN, JAMES	Other Code		OFC EDENS AND OFC PATE CONDUCTED WALK THROUGH FOR A & B PODS
02/16/2021 05:58	JACKSON, BRITTNI	Reporting for Duty		BRAVO SHIFT IS PRESENT FOR DUTY: SGT JACKSON, CPL STUDEBAKER, OFC PRIVETTE, AND OFC DIXON
02/16/2021 05:59	JACKSON, BRITTNI	Shift Change		BRIEFING WAS PASSED ON FROM SGT QUICK: BEGINNING HEAD COUNT: 70
02/16/2021 06:00	JACKSON, BRITTNI	Feeding Begins		FEEDING BEGINS IN OLD AND NEW JAIL
02/16/2021 06:14	PRIVETTE, KATHY BENEFIEL	Feeding Begins		CPL STUDEBAKER ENTERS A POD WITH TRAYS
02/16/2021 06:16	PRIVETTE, KATHY BENEFIEL	Feeding Begins		CPL STUDEBAKER EXITS A POD
02/16/2021 06:18	PRIVETTE, KATHY BENEFIEL	Feeding Begins		CPL STUDEBAKER AND DIXON ENTER B POD WITH TRAYS
02/16/2021 06:27	PRIVETTE, KATHY BENEFIEL	Feeding Begins		DIXON EXITS B POD
02/16/2021 06:30	PRIVETTE, KATHY BENEFIEL	Feeding Begins		DIXON ENTERS B POD
02/16/2021 06:34	JACKSON, BRITTNI	Feeding Ends trays collected		FEEDING ENDS IN OLD AND NEW JAIL ALL TRAYS ARE COLLECTED: I/M LITTLE, DAVID REFUSED HIS BREAKFAST TRAY
02/16/2021 06:36	PRIVETTE, KATHY BENEFIEL	Feeding Ends trays collected		DIXON EXITS B POD WITH TRAYS AND ENTERS A POD
02/16/2021 06:37	JACKSON, BRITTNI	Clean Up of Jail		CLEANING SUPPLIES WERE GIVEN IN OLD AND NEW JAIL
02/16/2021 06:39	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER EXITS B POD TO A POD
02/16/2021 06:41	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER EXITS A POD
02/16/2021 06:47	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER ENTERS A POD WITH REMOTE THEN EXITS A POD TO B POD THEN TO CONTROL THEN TO BOOKING
02/16/2021 06:48	JACKSON, BRITTNI	Inmates to Exercise		D POD REC BEGINS
02/16/2021 06:53	PRIVETTE, KATHY BENEFIEL	Other Code		15-20 GHOST REC BEGINS
02/16/2021 06:59	JACKSON, BRITTNI	Feeding Begins		I/M LITTLE, DAVID REFUSED HIS BREAKFAST TRAY
02/16/2021 07:10	JACKSON, BRITTNI	Other Code		CPL STUDEBAKER GIVES OUT RAZORS IN A POD NEW JAIL
02/16/2021 07:18	JACKSON, BRITTNI	Other Code	HOLDING CELL #2	SGT JACKSON AND OFC DIXON LET I/M LITTLE, DAVID UP TO STRETCH OUT
02/16/2021 07:20	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER ENTERS A POD WITH RAZORS
02/16/2021 07:24	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEKER EXITS A POD
02/16/2021 08:30	JACKSON, BRITTNI	Other Code		MAINTENANCE ENTERS THE FACILITY
02/16/2021 08:30	JACKSON, BRITTNI	Other Code		LT. ELLERBE ENTERS THE FACILITY

FALSE *

FEEDING ENDS IN OLD AND NEW JAIL ALL TRAYS ARE COLLECTED: I/M LITTLE, DAVID REFUSED HIS BREAKFAST TRAY

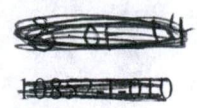
FALSE *

SGT JACKSON AND OFC DIXON LET I/M LITTLE, DAVID UP TO STRETCH OUT

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23-6912 * DOCUMENTS ARE FALSIFIED

NO GENIE SEEING AT 11:00

8:30 - 11
NOLLINCH?

CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

NO ENTRY THAT PLAINTIFF WAS SEEN BY MEDICAL STAFF

Date/Time	Officer	Event Type	Area	Event Notes
02/16/2021 11:13	PRIVETTE, KATHY BENEFIEL	Feeding Begins		DIXON ENTERS A POD WITH TRAYS MAJOR TEAL TALKS TO INMATE DAVIS ERIC IN B POD HALL
02/16/2021 11:21	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		CCSO EXITS SOUTH GATE
02/16/2021 11:30	PRIVETTE, KATHY BENEFIEL	NORTH SALLY PORT		CCSO ENTERS NORTH GATE 67 X 1 FROM INVESTIGATORS OFFICE
02/16/2021 11:35	PRIVETTE, KATHY BENEFIEL	Feeding Begins		DIXON AND BURCH ESCORT INMATE BACK FROM BOOKING AND ENTERS BPOD WITH TRAYS
02/16/2021 11:40	PRIVETTE, KATHY BENEFIEL	Serving Meals		SGT JACKSON ENTERS AND EXITS B POD
02/16/2021 15:33	PRIVETTE, KATHY BENEFIEL	Reporting for Duty		RESUMING DUTY IN CONTROL
02/16/2021 15:55	PRIVETTE, KATHY BENEFIEL	NORTH SALLY PORT		CCSO ENTERS NORTH GATE 67 X 1
02/16/2021 16:00	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		CCSO EXITS SOUTH GATE
02/16/2021 16:00	PRIVETTE, KATHY BENEFIEL	Feeding Begins		OFC BURCH AND DIXON ENTERS B POD WITH TRAYS
02/16/2021 16:02	PRIVETTE, KATHY BENEFIEL	Other Code		DIXON AND BURCH ESCORT B-5 AND B-8 TO B POD THEN EXITS
02/16/2021 16:47	PRIVETTE, KATHY BENEFIEL	Feeding Ends trays collected		BURCH EXITS WITH TRAYS AND ENTERS A POD TO GET RETURN TRAYS TO KITCHEN
02/16/2021 16:58	PRIVETTE, KATHY BENEFIEL	Other Code		BURCH AND DIXON ESCORTS INMATES TO A AND B PODS
02/16/2021 17:15	PRIVETTE, KATHY BENEFIEL	Other Code		CL DIXON ESCORTS 1 INMATE TO B POD AND 1 TO A POD
02/16/2021 17:31	PRIVETTE, KATHY BENEFIEL	Other Code		CCSO ESCORTS KNOLLES . LEMURER BACK TO MED CELL
02/16/2021 17:35	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER ESCORTS INMATE BACK TO A POD
02/16/2021 17:48	PRIVETTE, KATHY BENEFIEL	NORTH SALLY PORT		CCSO ENTERS NORTH 67 X 1 W MALE
02/16/2021 17:59	PRIVETTE, KATHY BENEFIEL	Other Code		DARRIUS ISAAC VISIT BEGINS
02/16/2021 18:00	PATE, CANDIS	Phone Call Made		DELTA SHIFT BEGINS WITH SGT. QUICK, CPL. COHEN, OFC. EDENS, OFC. PATE, AND OFC. ROBINSON
02/16/2021 18:12	PRIVETTE, KATHY BENEFIEL	Ending Tour of Duty		OFC PETERSON USING PRIVETTE LOG IN BEGINS CONTROL AND PRIVETTE ENDS DUTY
02/16/2021 18:15	PATE, CANDIS	Medicine to Inmates	NEW JAIL, OLD JAIL, WORK CAMP	CPL. COHEN PASS OUT MEDS IN NEW JAIL. OFC. EDENS PASS OUT MEDS IN OLD JAIL AND WORK CAMP
02/16/2021 18:40	PATE, CANDIS	Other Code		CCSO KERNS ENTERS THE FACILITY TO SPEAK WITH WATKINS, HEATHER
02/16/2021 18:40	PATE, CANDIS	Other Code		CCSO ROBINSON AND NEWSOME EXITS THE FACILITY
02/16/2021 19:00	PATE, CANDIS	Other Code	NEW JAIL	CPL. COHEN ENTERS B POD NEW JAIL PASS OUT UNIFORMS

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/16/2021 08:31	JACKSON, BRITTNI	Reporting for Duty		OFC BURCH REPORTING FOR DUTY
02/16/2021 08:44	JACKSON, BRITTNI	Medicine to Inmates		MED PASSES IS CONDUCTED IN OLD JAIL
02/16/2021 08:57	PRIVETTE, KATHY BENEFIEL	Other Code		REC 1-4 BEGINS AND NORTH SALLY JUDGE ENTERS B POD MAINTENENCE AND LT TROY ENTERS B POD
02/16/2021 09:02	PRIVETTE, KATHY BENEFIEL	Other Code		DIXON ENTERS A POD AND ESCORTS INMATE GRIFFEN TO BOOKING
02/16/2021 09:12	PRIVETTE, KATHY BENEFIEL	Other Code		MAINTENENCE EXITS B POD
02/16/2021 09:15	PRIVETTE, KATHY BENEFIEL	Other Code		LT TROY ELLERBEE AND OFC BURCH EXITS B POD
02/16/2021 09:16	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		JUDGE EXITS SOUTH
02/16/2021 09:18	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER ESCORTS AVERTE BRIAN TO A POD AND MAJOR TEAL ENTERS B POD
02/16/2021 09:33	PRIVETTE, KATHY BENEFIEL	Other Code		CL DIXON AND CPL STUDEBAKER ESCORT INMATES TO BOOKING CCSO ENTERS NORTH GATE 67 X 1
02/16/2021 09:37	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER ENTERS B POD ESCORTING 7 INMATES ASSISTED BY OFC CL DIXON AND BURCH TO BOOKING
02/16/2021 09:57	JACKSON, BRITTNI	Other Code		GENERAL SESSIONS BEGINS
02/16/2021 09:58	JACKSON, BRITTNI	Medicine to Inmates		MED PASS IS CONDUCTED IN WORK CAMP AND NEW JAIL
02/16/2021 10:00	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		CCSO EXITS SOUTH GATE
02/16/2021 10:08	PRIVETTE, KATHY BENEFIEL	Medicine to Inmates		NURSE JENNY AND OFC BURCH CONDUCT A MED PASS IN A POD
02/16/2021 10:12	PRIVETTE, KATHY BENEFIEL	Medicine to Inmates		OFC BURCH AND NURSE JENNY ENTER B POD FOR MED PASS
02/16/2021 10:24	PRIVETTE, KATHY BENEFIEL	Medicine to Inmates		MED PASS COMPLETE IN NEW JAIL
02/16/2021 10:29	PRIVETTE, KATHY BENEFIEL	Other Code		OFC DIXON AND BURCH ENTERS B POD
02/16/2021 10:30	PRIVETTE, KATHY BENEFIEL	Other Code		OFC BURCH AND DIXON EXITS B POD MAINTENECE ENTERS B POD WITH OFC BURCH CCSO ENTERS NORTH GATE 67 X 1 W MALE
02/16/2021 10:32	PRIVETTE, KATHY BENEFIEL	Other Code		LT ELLERBEE ENTERS B POD
02/16/2021 10:37	PRIVETTE, KATHY BENEFIEL	Other Code		MAINTENENCE ENTERS B POD
02/16/2021 10:40	PRIVETTE, KATHY BENEFIEL	SOUTH SALLY PORT		CCSO 122 EXITS SOUTH GATE CL DIXON ENTERS B POD
02/16/2021 10:42	PRIVETTE, KATHY BENEFIEL	Other Code		CL DIXON EXITS B POD TO BOOKING
02/16/2021 10:49	PRIVETTE, KATHY BENEFIEL	Other Code		
02/16/2021 11:08	PRIVETTE, KATHY BENEFIEL	NORTH SALLY PORT		CCSO ENTERS 67X1 W MALE



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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/16/2021 20:15	PATE, CANDIS	Other Code	NEW JAIL	CPL. COHEN ENTERS B POD NEW JAIL PASS OUT UNIFORMS
02/16/2021 21:15	PATE, CANDIS	Other Code	NEW JAIL	CPL. COHEN ENTERS B POD NEW JAIL AND PASS OUT UNIFORMS
02/16/2021 21:30	PATE, CANDIS	Other Code		JUDGE MELTON ENTERS THE FACILITY TO DO WATKINS, HEATHER BOND
02/16/2021 21:44	PATE, CANDIS	Other Code		JUDGE MELTON EXITS THE FACILITY
02/16/2021 21:44	PATE, CANDIS	Other Code	OLD JAIL	GAINNEY, SHAVONNE GETS DRESSED OUT AND PLACED BACK IN HOLDING CELL
02/16/2021 22:35	PATE, CANDIS	Other Code		JUDGE MELTON ENTERS THE FACILITY.
02/16/2021 22:46	PATE, CANDIS	Other Code		WATKINS, HEATHER IS RELEASED AND EXITS THE FACILITY WITH CCSO KERNS
02/17/2021 00:10	PATE, CANDIS	NORTH SALLY PORT	SALLYPORT	CCSO REICHARD ENTERS NORTH GATE WITH 67X3 REIFF, MARTIN-WATFORD, LACEY- AND PARKS, AMANDA
02/17/2021 00:30	PATE, CANDIS	SOUTH SALLY PORT	SALLY PORT	CCSO REICHARD EXIT BOOKING AND SOUTH GATE
02/17/2021 01:20	PATE, CANDIS	Other Code	WORK CAMP	OFC. EDENS CONDUCTS PIPE CHECK IN WORK CAMP
02/17/2021 01:25	PATE, CANDIS	Other Code	OLD JAIL	OFC. EDENS CONDUCTS PIPE CHECK IN OLD JAIL
02/17/2021 01:33	PATE, CANDIS	Other Code	NEW JAIL	OFC. ROBINSON CONDUCTS WALK THROUGH IN NEW JAIL A POD AND B POD
02/17/2021 01:41	EDENS, YLANA	Other Code	CONTROL ROOM	OFC ROBINSON CONDUCTS A SECURITY CHECK IN A&B POD NEW JAIL, I OFC EDENS IS NOW ON DUTY IN THE CONTROL ROOM ACCEPTING ALL DUTIES
02/17/2021 03:10	PATE, CANDIS	Other Code	OLD JAIL	OFC. PATE AND OFC. ROBINSON CONDUCTS WALK THROUGH IN OLD JAIL.
02/17/2021 03:40	PATE, CANDIS	NORTH SALLY PORT	SALLY PORT	SCHP LEE ENTERS NORTH GATE WITH 67X1
02/17/2021 04:00	PATE, CANDIS	SOUTH SALLY PORT	SOUTH GATE	SCHP LEE EXITS BOOKING AND SOUTH GATE WITH 67X1
02/17/2021 04:08	PATE, CANDIS	Other Code	NEW JAIL	OFC. ROBINSON CONDUCTS WALK THROUGH IN NEW JAIL
02/17/2021 04:12	PATE, CANDIS	Other Code	OLD JAIL	OFC. ROBINSON CONDUCTS WALK THROUGH IN OLD JAIL
02/17/2021 04:16	EDENS, YLANA	Other Code	NEW JAIL	OFC ROBINSON CONDUCTS A SECURITY CHECK IN A&B POD NEW JAIL
02/17/2021 06:25	DIXON, CRAIG LEMONT	Other Code	A POD	OFC TADLOCK FEEDS A POD
02/17/2021 06:42	DIXON, CRAIG LEMONT	Other Code	B POD	TADLOCK AND PETERSON FEEDS B POD
02/17/2021 06:58	DIXON, CRAIG LEMONT	Other Code	B POD	REC STARTED IN B POD 1-4
02/17/2021 07:02	DIXON, CRAIG LEMONT	Other Code	A AND B POD	TRAYS COLLECTED FROM A AND B POD

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

LITTLE WAS DENIED EVERY MEAL

Date/Time	Officer	Event Type	Area	Event Notes
02/17/2021 09:17	DIXON, CRAIG LEMONT	Other Code	A AND B POD	PETERSON AND THE NURSE PASSES OUT MEDICATION
02/17/2021 09:22	DIXON, CRAIG LEMONT	Other Code	SALLYPORT	CCSO ENTERS NORTH SALLY PORT
02/17/2021 09:31	DIXON, CRAIG LEMONT	Other Code	A POD	CCSO CONDUCTS A SEARCH IN A POD
02/17/2021 10:00	DIXON, CRAIG LEMONT	Other Code		CCSO CONDUCTS A SEARCH IN B POD
02/17/2021 11:08	DIXON, CRAIG LEMONT	Other Code		MAJOR TEAL ESCORTS INMATE ISSAC BACK TO B-2
02/17/2021 11:18	DIXON, CRAIG LEMONT	Other Code		A ND B POD FEEDING STARTED WITH TADLOCK AND PETERSON
02/17/2021 11:37	DIXON, CRAIG LEMONT	Other Code		PROBATION AND CCSO ENTERS NORTH SALLY PORT
02/17/2021 11:51	DIXON, CRAIG LEMONT	Other Code		CCSO EXITS SOUTH SALLY PORT 67X1 TO TRI-COUNTY
02/17/2021 16:08	DIXON, CRAIG LEMONT	Other Code		LOUALLEN TRANSPORTS INMATE DRAKE TO COURT HOUSE
02/17/2021 16:09	DIXON, CRAIG LEMONT	Other Code		TADLOCK FEEDS A POD
02/17/2021 16:25	DIXON, CRAIG LEMONT	Other Code		LOUALLEN RETURNS WITH INMATE DRAKE FROM THE COURT HOUSE
02/17/2021 16:25	DIXON, CRAIG LEMONT	Other Code		TADLOCK FEEDS B POD
02/17/2021 17:00	DIXON, CRAIG LEMONT	Other Code		ALL TRAYS COLLECTED FROM A AND B POD
02/17/2021 17:15	DIXON, CRAIG LEMONT	Other Code		TADLOCK MOVES INMATE LEWIS TO A POD
02/17/2021 17:40	DIXON, CRAIG LEMONT	Other Code		CCSO ENTERS NSP
02/17/2021 17:55	DIXON, CRAIG LEMONT	Other Code		WALKTHROUGH IN A AND B POD
02/17/2021 17:56	DIXON, CRAIG LEMONT	Other Code		INMATE DRAKE ESCORTED OVER TO BOOKING AREA
02/17/2021 17:58	DIXON, CRAIG LEMONT	Other Code		REC STARTED IN B POD 1-4
02/17/2021 18:07	JACKSON, BRITTNI	Other Code		OFC MCQUEEN ENTERS A POD NEW JAIL TO CONDUCT MED PASS
02/17/2021 18:09	JACKSON, BRITTNI	Other Code		OFC MCQUEEN EXITS A POD NEW JAIL INTO CONTROL
02/17/2021 18:10	JACKSON, BRITTNI	Medicine to Inmates		OFC MCQUEEN EXITS CONTROL OVER INTO B POD NEW JAIL TO GIVE OUT MEDS
02/17/2021 18:10	MARINE, MARCIA	Other Code		CHARLIE SHIFT ON DUTY-BEGINNING HEAD COUNT:73 INMATES-OFFICERS ON DUTY (SGT MARINE, OFC WILLIAMS, SGT JACKSON AND OFC MCQUEEN) MEDICATIONS DISPENSE IN JAIL-SGT MARINE AND OFC PETERSON CONDUCTED HEAD COUNT WHILE CONDUCTING WALK THROUGH IN JAIL-KEYS ACCOUNTED FOR-A&B UTILITY AND PROPERTY KEY MISSING

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/17/2021 18:23	JACKSON, BRITTNI	Other Code		OFC MCQUEEN EXITS B POD NEW JAIL HEADING BACK TO BOOKING
02/17/2021 18:26	JACKSON, BRITTNI	Other Code		OFC MCQUEEN ENTERS A POD NEW JAIL BRIEFLY EXITING BACK TO BOOKING
02/17/2021 18:43	JACKSON, BRITTNI	Other Code		OFC MCQUEEN ENTERS CONTROL
02/17/2021 19:02	JACKSON, BRITTNI	Other Code		OFC MCQUEEN AND SGT MARINE ENTER B POD NEW JAIL TO PUT UP REC
02/17/2021 19:07	JACKSON, BRITTNI	Other Code		SGT MARINE EXITS B POD NEW JAIL OVER INTO A POD NEW JAIL
02/17/2021 22:00	MARINE, MARCIA	Other Code		LIGHTS TURN OFF IN JAIL WHILE CONDUCTING WALK THROUGH
02/17/2021 23:28	MARINE, MARCIA	Other Code		OFC MCQUEEN CONDUCTING PIPE CHECK IN NEW JAIL
02/17/2021 23:38	JACKSON, BRITTNI	Other Code		OFC MCQUEEN CONDUCTS A WALK THROUGH IN NEW JAIL
02/18/2021 00:20	MARINE, MARCIA	Other Code		SGT MARINE CONDUCTING WALK THROUGH IN OLD JAIL/WORKCAMP
02/18/2021 00:25	MARINE, MARCIA	Other Code		SGT MARINE CONDUCT WALK THROUGH IN OLD JAIL/WORKCAMP
02/18/2021 00:37	JACKSON, BRITTNI	Other Code		SGT MARINE ENTERS B POD TO CONDUCT A WALK THROUGH
02/18/2021 00:44	JACKSON, BRITTNI	Other Code		SGT MARINE EXITS B POD NEW JAIL OVER INTO A POD NEW JAIL
02/18/2021 01:00	JACKSON, BRITTNI	Other Code		SGT MARINE EXITS A POD NEW JAIL HEADING BACK OVER TO BOOKING
02/18/2021 01:20	MARINE, MARCIA	Other Code		OFC WILLIAMS CONDUCTED WALK THROUGH IN OLD JAIL/WORKCAMP
02/18/2021 01:39	JACKSON, BRITTNI	Other Code		OFC MCQUEEN ENTERS B POD NEW JAIL TO CONDUCT A WALK THROUGH
02/18/2021 01:45	JACKSON, BRITTNI	Other Code		OFC MCQUEEN EXITS B POD NEW JAIL HEADING INTO A POD NEW JAIL TO CONDUCT A WALK THROUGH
02/18/2021 01:45	JACKSON, BRITTNI	Other Code		OFC MCQUEEN EXITS A POD INTO CONTROL
02/18/2021 01:48	JACKSON, BRITTNI	Other Code		OFC MCQUEEN EXITS CONTROL HEADING OVER TO BOOKING
02/18/2021 02:13	MARINE, MARCIA	Other Code		OFC WILLIAMS CONDUCTED WALK THROUGH IN OLD JAIL/WORKCAMP
02/18/2021 02:40	MARINE, MARCIA	Other Code		SGT MARINE CONDUCTED WALK THROUGH IN NEW JAIL
02/18/2021 02:43	MCQUEEN, TAYLER	Other Code		SGT MARINE CONDUCTS A WALK THROUGH IN NEW JAIL
02/18/2021 03:54	MARINE, MARCIA	Other Code		OFC MCQUEEN CONDUCT WALK THROUGH IN NEW JAIL
02/18/2021 03:57	MARINE, MARCIA	Other Code		DEPUTY RILEY ENTER BOOKING TO PICK UP NCIC PACKAGES
02/18/2021 04:03	MARINE, MARCIA	Other Code		DEP RILEY EXIT BOOKING
02/18/2021 04:53	MARINE, MARCIA	Other Code		LIGHTS TURN ON IN JAIL TO DISPENSE MEDICATIONS
02/18/2021 05:37	JACKSON, BRITTNI	Other Code		LIGHTS WERE TURNED ON IN NEW JAIL
02/18/2021 05:39	MARINE, MARCIA	Other Code		BRIEFING PASS ON TO CPL FREEMAN

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1032-1015

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/18/2021 05:59	JACKSON, BRITNI	Ending Tour of Duty		ENDING HEAD COUNT 70 INMATES SGT JACKSON 10-42 CONTROL
02/18/2021 06:41	PETERSON, KEYSHAWN	Other Code		OFC TADLOCK AND OFC CARTER FEEDS NEW JAIL
02/18/2021 07:17	PETERSON, KEYSHAWN	Other Code		CPL FREEMAN ENTERS B POD
02/18/2021 18:00	MARINE, MARCIA	Other Code		CHARLIE SHIFT ON DUTY-BEGINNING HEAD COUNT 70 INMATES-OFFICERS REPORT ON DUTY (SGT MARINE, OFC WILLIAMS, MCQUEEN, AND C. ROBINSON)-MEDICATIONS DISPENSE IN JAIL-KEYS ACCOUNTED FOR-SGT MARINE AND OFC LOUALLEN CONDUCTED HEAD COUNT IN JAIL WHILE CONDUCTING WALK THROUGH.
02/18/2021 18:00	WILLIAMS, VERDIA	Inmates to Exercise	CONTROL	REC IS 10-8 FOR B POD CELLS 5-10 AT THIS TIME
02/18/2021 18:00	WILLIAMS, VERDIA	Reporting for Duty	CONTROL	OFFICER WILLIAMS IS ON DUTY IN CENTRAL CONTROL RELIEVING OFFICER PETERSON ALL INFORMATION AND EQUIPMENT WAS PASSED ALONG TO ME AT THIS TIME
02/18/2021 18:15	WILLIAMS, VERDIA	Medicine to Inmates	CONTROL	MEDICATION WAS GIVEN OUT IN NEW JAIL BY SGT. MARINE AT THIS TIME FOR A POD AND B POD
02/18/2021 19:10	WILLIAMS, VERDIA	Inmates to Exercise	CONTROL	REC IS 10-8 FOR B POD CELLS 11-16 AT THIS TIME BY SGT. MARINE
02/18/2021 19:19	MARINE, MARCIA	Other Code		SGT MARINE CONDUCT UP REC UP IN B POD NEW JAIL AND CONDUCTED WALK THROUGH
02/18/2021 19:20	WILLIAMS, VERDIA	Other Code	CONTROL	INMATE IN CELL B-10 MCBRIDE PER SGT. MARINE TO TAKE 1 HOUR OF REC DUE TO HIM COMING OUT THE SHOWER LATE HOLDING UP THE NEXT REC
02/18/2021 19:27	MARINE, MARCIA	Other Code		N1 ROBINSON RETURN INMATE AMANDA PARKS BACK TO JAIL
02/18/2021 19:30	WILLIAMS, VERDIA	NORTH SALLY PORT	CONTROL	CCSO N-1 ROBINSON ENTERS CHESTERFIELD COUNTY DETENTION AT THIS TIME 10-17 TO BOOKING DEPARTMENT
02/18/2021 19:38	MARINE, MARCIA	Other Code		OFC MCQUEEN CONDUCTED PIPE CHECK IN OLD JAIL N1-ROBINSON EXIT BOOKING/SSP
02/18/2021 19:45	WILLIAMS, VERDIA	SOUTH SALLY PORT	CONTROL	N-1 ROBINSON EXITS CHESTERFIELD COUNTY DETENTION CENTER AT THIS TIME
02/18/2021 19:50	WILLIAMS, VERDIA	Other Code	CONTROL	INMATE KENNEDY IN CELL B 6 WAS HIDING IN THE SHOWER AND DID NOT RETURN TO THE CELL WHEN HIS REC ENDED. SO INMATE WILL BE PLACED ON LOCKDOWN PER SGT. MARINE
02/18/2021 20:25	MARINE, MARCIA	Other Code		SGT MARINE AND OFC C.ROBINSON PUT REC UP IN B POD AND CONDUCTED WALK THROUGH
02/18/2021 20:55	WILLIAMS, VERDIA	Inmates to Exercise	CONTROL	REC IS 10-8 FOR B POD CELLS 1-4 AT THIS TIME

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10852-1-016

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/19/2021 16:34	PRIVETTE, KATHY BENEFIEL	Other Code		DIXON ENTERS B POD
02/19/2021 16:36	PRIVETTE, KATHY BENEFIEL	Other Code		CPL STUDEBAKER ENTERS A POD THEN EXITS
02/19/2021 16:39	JACKSON, BRITTON	Feeding Ends trays collected		FEEDING ENDS IN NEW JAIL ALL TRAYS ARE COLLECTED.
02/19/2021 16:39	JACKSON, BRITTON	Other Code		I/M LITTLE, DAVID WAS STRAPPED IN THE RESTRAINT CHAIR DURING DINNER
02/19/2021 16:42	PRIVETTE, KATHY BENEFIEL	Feeding Ends trays collected		OFC BURCH EXITS B POD WITH RETURN TRAYS
02/19/2021 16:44	PRIVETTE, KATHY BENEFIEL	Other Code		STUDEBAKER AND DIXON EXITS B POD
02/19/2021 16:53	JACKSON, BRITTON	Other Code		SEWAGE TRAP WAS CHECKED AND TRASH WAS TAKEN OUT.
02/19/2021 16:54	JACKSON, BRITTON	Feeding Begins		FEEDING ENDS IN OLD JAIL
02/19/2021 16:55	JACKSON, BRITTON	Other Code		MAINTENANCE ENTERS BOOKING TO FIX THE LIGHT IN THE MED CELL
02/19/2021 18:00	PATE, CANDIS	Reporting for Duty		DELTA SHIFT BEGINS WITH SGT. QUICK, CPL. COHEN, OFC. EDENS, AND OFC. PATE
02/19/2021 18:01	PRIVETTE, KATHY BENEFIEL	Other Code		REC BEGINS 11-14
02/19/2021 18:05	PATE, CANDIS	Other Code	OLD JAIL	LATE ENTRY: SGT. JACKSON, SGT. QUICK, CPL. COHEN, OFC. DIXON AND OFC. PATE PUTS LITTLE, DAVID IN RESTRAINT CHAIR IN HOLDING CELL 2. LITTLE, DAVID STATED THAT HE IS GOING TO CONTINUE TO TEAR STUFF UP.
<p><i>FALSE !! WHAT WAS THERE IN THE CELL TO TEAR UP? Y/M WAS NOT EVEN IN RESTRAINT CHAIR ON 02/19/21. HE WAS LET OUT 02/18/21</i></p>				
02/19/2021 18:16	PATE, CANDIS	Other Code	CONTROL ROOM	OFC. PATE BEGINS CONTROL ROOM DUTIES
02/19/2021 18:22	PATE, CANDIS	Other Code	NEW JAIL	CPL. COHEN PASS OUT MEDS IN A AND B PODS NEW JAIL
02/19/2021 18:26	PATE, CANDIS	Other Code	OLD JAIL AND WORK CAMP	OFC. EDENS PASS OUT MEDS IN OLD JAIL AND WORK CAMP
02/19/2021 18:58	PATE, CANDIS	NORTH SALLY PORT	SALLY PORT	INV. ROBINSON ENTERS NORTH GATE
02/19/2021 21:12	QUICK, SHEVONNE	Other Code	BOOKING	INMATE LITTLE, DAVID WAS GIVEN A SHOWER AND HOUSED BACK IN MED CELL #2
02/19/2021 23:00	QUICK, SHEVONNE	Other Code	NEW JAIL	SGT. QUICK AND OFC. PATE CONDUCTED A WALK THROUGH IN NEW JAIL
02/19/2021 23:47	QUICK, SHEVONNE	Other Code	NEW JAIL	CPL. COHEN CONDUCTING A WALK THROUGH IN NEW JAIL
02/19/2021 23:52	QUICK, SHEVONNE	Other Code	OLD JAIL	OFC. EDENS CONDUCTING A PIPE CHECK IN OLD JAIL
02/20/2021 00:00	QUICK, SHEVONNE	Other Code	WORK CAMP	OFC. EDENS CONDUCTING A PIPE CHECK IN WORK CAMP
02/20/2021 00:37	QUICK, SHEVONNE	Other Code	NEW JAIL	CPL. COHEN CONDUCTING A WALK THROUGH IN THE NEW JAIL

CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/20/2021 00:51	QUICK, SHEVONNE	Other Code	NEW JAIL	OFC. EDENS CONDUCTING A PIPE CHECK IN OLD JAIL
02/20/2021 00:57	QUICK, SHEVONNE	Other Code	WORK CAMP	OFC. EDENS CONDUCTING A PIPE CHECK IN WORK CAMP
02/20/2021 01:56	PATE, CANDIS	Other Code	NEW JAIL	CPL.COHEN CONDUCTS WALK THROUGH IN NEW JAIL
02/20/2021 02:45	PATE, CANDIS	Other Code	OLD JAIL	SGT.QUICK CONDUCTS WALK THROUGH IN OLD JAIL
02/20/2021 05:23	COHEN, JAMES	Other Code		OFC PRIVETTE REPORTS FOR DUTY
02/20/2021 05:37	COHEN, JAMES	Other Code		CPL STUDEBAKER REPORTS FOR DUTY
02/20/2021 05:48	COHEN, JAMES	Other Code		OFC DIXON REPORTS FOR DUTY
02/20/2021 05:59	COHEN, JAMES	Other Code		SGT. JACKSON REPORTS FOR DUTY
02/20/2021 06:05	JACKSON, BRITTON	Reporting for Duty		BRAVO SHIFT IS PRESENT FOR DUTY: SGT JACKSON, CPL STUDEBAKER, OFC PRIVETTE, OFC DIXON
02/20/2021 06:06	JACKSON, BRITTON	Shift Change		BRIEFING WAS PASSED ON FROM SGT QUICK: BEGINNING HEAD COUNT: 71
02/20/2021 06:06	JACKSON, BRITTON	Feeding Begins		FEEDING BEGINS IN OLD AND NEW JAIL
02/20/2021 06:16	DIXON, CRAIG LEMONT	Other Code		STUDEBAKER FEEDS A POD
02/20/2021 06:23	DIXON, CRAIG LEMONT	Other Code		JACKSON AND STUDEBAKER FEEDS B POD
02/20/2021 06:37	JACKSON, BRITTON	Feeding Begins		FEEDING ENDS IN NEW JAIL ALL TRAYS ARE COLLECTED.
02/20/2021 07:00	JACKSON, BRITTON	Inmates to Exercise		D POD REC BEGINS
02/20/2021 07:57	JACKSON, BRITTON	Reporting for Duty		NURSE ENTERS THE FACILITY
02/20/2021 07:58	JACKSON, BRITTON	NORTH SALLY PORT		SCHP ENTERS THROUGH NSP WITH 67*1
02/20/2021 08:10	JACKSON, BRITTON	Medicine to Inmates		OFC PRIVETTE ESCORTS THE NURSE TO DO MED PASS IN OLD JAIL AND WORK CAMP
02/20/2021 08:14	JACKSON, BRITTON	Medicine to Inmates		OFC PRIVETTE ESCORTS THE NURSE TO A/B NEW JAIL FOR MED PASS
02/20/2021 08:14	JACKSON, BRITTON	Other Code		CPL STUDEBAKER ESCORTS THE KITCHEN GUYS BACK TO BWC
02/20/2021 08:50	JACKSON, BRITTON	SOUTH SALLY PORT		SCHP RHYNE EXITS THROUGH SSP
02/20/2021 08:56	DIXON, CRAIG LEMONT	Other Code		REC STARTED IN B-POD 1-4
02/20/2021 08:57	JACKSON, BRITTON	Booking		I/M WILLIAMS, JUSTIN WAS BOOKED AND FINGERPRINTED. PHONE CALL WAS MADE AND CONTACT WAS MADE.
02/20/2021 09:04	JACKSON, BRITTON	NORTH SALLY PORT		CCSO/LEWIS ENTERS THROUGH NSP WITH 67*1 B/M
02/20/2021 09:49	JACKSON, BRITTON	Booking		I/M LESTER, JAHREL WAS BOOKED AND FINGERPRINTED HE IS WAITING ON HIS WARRANTS TO BE SIGNED
02/20/2021 09:50	JACKSON, BRITTON	Bond Hearings		BOND HEARINGS BEGIN
02/20/2021 09:50	JACKSON, BRITTON	Other Code		OFC PRIVETTE ESCORTS THE KITCHEN GUYS TO THE KITCHEN

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/21/2021 01:08	COHEN, JAMES	Other Code		CONDUCT A WALK THROUGH OFC PATE EXITS A POD AND ENTERS B POD TO CONDUCT WALK THROUGH IN B POD
02/21/2021 01:15	QUICK, SHEVONNE	Other Code	OLD JAIL	OFC. EDENS CONDUCTING A WALK THROUGH IN OLD JAIL AND WORK CAMP
02/21/2021 01:55	QUICK, SHEVONNE	Other Code	NEW JAIL	OFC. EDENS CONDUCTING A WALK THROUGH IN NEW JAIL
02/21/2021 02:09	COHEN, JAMES	Other Code		OFC EDENS CONDUCTED A WALK THROUGH FOR A AND B POD
02/21/2021 02:30	QUICK, SHEVONNE	Other Code	OLD JAIL	SGT. QUICK CONDUCTED A WALK THROUGH IN OLD JAIL
02/21/2021 03:28	QUICK, SHEVONNE	NORTH SALLY PORT	NORTH SALLYPORT	CCSO REICHARD ENTERS NORTH SALLYPORT WITH 67X1 BM
02/21/2021 04:00	PATE, CANDIS	Reporting for Duty		LATE ENTRY TRINITY SUPERVISOR MS. HAMLITON ENTERS THE FACILITY
02/21/2021 04:25	PATE, CANDIS	SOUTH SALLY PORT	SALLY PORT	REICHARD EXIT BOOKING AND SOUTH GATE
02/21/2021 04:40	PATE, CANDIS	Other Code		CPL. COHEN CLEANS SEWAGE TRAP AND TAKES OUT TRASH
02/21/2021 05:00	PATE, CANDIS	Other Code	WORK CAMP	KITCHEN WORKERS GOES TO KITCHEN AND LIGHTS ARE CUT ON IN WORK CAMP
02/21/2021 05:58	JACKSON, BRITTNI	Reporting for Duty		BRAVO SHIFT IS PRESENT FOR DUTY: SGT JACKSON, CPL STUDEBAKER, OFC PRIVETTE, OFC DIXON
02/21/2021 05:58	JACKSON, BRITTNI	Shift Change		BRIEFING WAS PASSED ON FROM SGT QUICK: BEGINNING HEAD COUNT: 71
02/21/2021 06:00	DIXON, CRAIG LEMONT	Other Code		CL DIXON ON DUTY
02/21/2021 06:03	JACKSON, BRITTNI	Feeding Begins		KITCHEN CREW ENTER BOOKING WITH TRAYS FOR OLD/NEW JAIL
02/21/2021 06:16	DIXON, CRAIG LEMONT	Other Code		STUDEBAKER FEEDS A POD
02/21/2021 06:21	DIXON, CRAIG LEMONT	Other Code		JACKSON AND STUDEBAKER FEEDS B POD
02/21/2021 06:35	JACKSON, BRITTNI	Feeding Ends trays collected		FEEDING ENDS IN NEW JAIL ALL TRAYS ARE COLLECTED.
02/21/2021 06:43	JACKSON, BRITTNI	Feeding Ends trays collected		FEEDING ENDS IN OLD JAIL ALL TRAYS ARE COLLECTED.
02/21/2021 06:43	JACKSON, BRITTNI	Clean Up of Jail		CLEANING SUPPLIES WERE GIVEN IN OLD/NEW JAIL
02/21/2021 06:56	DIXON, CRAIG LEMONT	Other Code		STUDEBAKER PUTS CLEANING SUPPLIES IN A AND B POD
02/21/2021 06:57	DIXON, CRAIG LEMONT	Other Code		REC STARTED IN B POD 1- 4
02/21/2021 07:46	STUDEBAKER, ERIN	Reporting for Duty		NURSE ENTERS FACILITY
02/21/2021 08:07	JACKSON, BRITTNI	Medicine to Inmates		CPL STUDEBAKER CONDUCTS MED PASS WITH THE NURSE IN NEW JAIL
02/21/2021 08:12	JACKSON, BRITTNI	Medicine to Inmates		OFC PRIVETTE CONDUCTS MED PASS IN OLD JAIL WITH THE NURSE.
02/21/2021 08:23	JACKSON, BRITTNI	Medicine to Inmates		OFC PRIVETTE ESCORTS THE NURSE TO WORK CAMP FOR MED PASS

CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
02/21/2021 08:23	JACKSON, BRITTNI	NORTH SALLY PORT		CCSO/ LEWIS ENTERS THROUGH NSP WITH 67*1 W/F
02/21/2021 08:28	JACKSON, BRITTNI	SOUTH SALLY PORT		CCSO/LEWIS EXITS THROUGH SSP
02/21/2021 08:46	JACKSON, BRITTNI	Booking		I/M SHAW, DONNA WAS BOOKED AND FINGERPRINTED. PHONE CALL WAS MADE, SHE WILL SEE THE JUDGE THIS MORNING.
02/21/2021 09:00	DIXON, CRAIG LEMONT	Other Code		REC STARTS IN B POD 5-10
02/21/2021 09:24	JACKSON, BRITTNI	Nurses Visit		MENTAL HEALTH NURSE VISITS BEGIN
02/21/2021 09:24	JACKSON, BRITTNI	Nurses Visit		OFC PRIVETTE ESCORTS I/M FORTENBERRY, RACHEL TO SEE THE MENTAL HEALTH NURSE
02/21/2021 09:25	JACKSON, BRITTNI	Nurses Visit		OFC PRIVETTE ESCORTS I/M FORTENBERRY BACK TO D POD AND ESCORTS I/M KNIGHT, DESIREE TO SEE THE NURSE
02/21/2021 09:33	JACKSON, BRITTNI	Other Code		I/M LITTLE, DAVID WAS GIVEN HIS SHOWER
02/21/2021 09:35	STUDEBAKER, ERIN	Other Code		JUDGE MELTON ENTERS FACILITY
02/21/2021 09:36	JACKSON, BRITTNI	Other Code		I/M CLANTON, BILLY REFUSED TO SEE MENTAL HEALTH
02/21/2021 09:42	JACKSON, BRITTNI	Other Code		OFC PRIVETTE ESCORTS I/M BROWN, JERRY BACK TO AWC.
02/21/2021 09:52	JACKSON, BRITTNI	Bond Hearings		BOND HEARINGS BEGIN
02/21/2021 10:04	JACKSON, BRITTNI	Inmate Released		I/M ROBINSON, DEUNTAY WAS RELEASED FROM THE FACILITY
02/21/2021 10:31	STUDEBAKER, ERIN	Other Code		BOND HEARINS OVER/JUDGE MELTON LEAVES FACILITY
02/21/2021 10:39	JACKSON, BRITTNI	Bond Hearings		BOND HEARINGS END
02/21/2021 10:39	JACKSON, BRITTNI	Other Code		MENTAL HEALTH VISITS ARE COMPLETE
02/21/2021 10:39	JACKSON, BRITTNI	Inmate Released		I/M SHAW, DONNA WAS RELEASED FROM THE FACILITY
02/21/2021 10:40	JACKSON, BRITTNI	Other Code		I/M LITTLE, DAVID WAS RELEASED OFF OF SUICIDE WATCH. HE IS NOW ON OBSERVATION, HE WAS GIVEN UNIFORM, BLANKET, TOWL, AND WASH CLOTH.
02/21/2021 10:40	JACKSON, BRITTNI	Other Code		I/M ALLEN, RASHAE WAS PLACED ON SUICIDE WATCH BY THE MENTAL HEALTH NURSE HE WAS MOVED TO MED CELL #1
02/21/2021 11:13	STUDEBAKER, ERIN	Other Code		5-10 B POD REC OVER
02/21/2021 11:16	JACKSON, BRITTNI	Feeding Begins		FEEDING BEGINS IN OLD AND NEW JAIL
02/21/2021 11:18	STUDEBAKER, ERIN	Feeding Begins		SGT JACKSON FEEDS A POD
02/21/2021 11:35	DIXON, CRAIG LEMONT	Other Code		JACKSON AND STUDEBAKER FEEDS B POD
02/21/2021 11:45	JACKSON, BRITTNI	Feeding Ends trays collected		FEEDING ENDS IN NEW JAIL ALL TRAYS ARE COLLECTED.
02/21/2021 13:11	PRIVETTE, KATHY BENEFIEL	Ending Tour of Duty		OFC PRIVETTE BEGINS CONTROL DUTY CI DIXON ENDS DUTY

FALSE
I/M WAS IN
CELL WITH
* SHOWER *

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23-6912

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
03/08/2021 05:33	QUICK, SHEVONNE	Other Code	LOBBY	OFC. ROBINSON ENTERS THE FACILITY
03/08/2021 06:05	MARINE, MARCIA	Other Code		CHARLIE SHIFT ON DUTY-BEGINNING HEAD COUNT 62 INMATES-OFFICERS REPORT ON DUTY (SGT MARINE, MAJOR TEAL, OFC ROBINSON) KEYS ACCOUNTED FOR -SGT MARINE AND OFC PATE CONDUCT HEAD COUNT WHILE CONDUCTING WALK THROUGH IN NEW JAIL
03/08/2021 06:23	JACOBS, CHRISTY SHOEMAKE	Feeding Begins		CPL COHEN BEGINS FEEDING A POD - EXITS @ 06:25. OFC ROBINSON BEGINS FEEDING B POD
03/08/2021 06:25	JACOBS, CHRISTY SHOEMAKE	Other Code		CPL COHEN ENTERS B POD TO ASSIST WITH BREAKFAST. EXITS @ 06:35
03/08/2021 06:39	JACOBS, CHRISTY SHOEMAKE	Other Code		CPL COHEN ENTERS B POD - EXITS @ 06:41
03/08/2021 06:41	JACOBS, CHRISTY SHOEMAKE	Feeding Ends trays collected		CPL COHEN ENTERS A POD TO COLLECT TRAYS - EXITS @ 06:42
03/08/2021 06:49	JACOBS, CHRISTY SHOEMAKE	Feeding Ends trays collected		OFC ROBINSON COLLECTS TRAYS & EXITS POD.
03/08/2021 06:50	JACOBS, CHRISTY SHOEMAKE	Other Code		OFC ROBINSON ENTERS B POD TO TURN ON TV
03/08/2021 06:53	MARINE, MARCIA	Feeding Begins		CPL COHEN AND OFC ROBINSON FED IN NEW JAIL SGT MARINE FED IN OLD JAIL WHITES COLLECTED
03/08/2021 07:07	JACOBS, CHRISTY SHOEMAKE	Clean Up of Jail		OFC ROBINSON ENTERS B POD TO PUT OUT CLEANING SUPPLIES
03/08/2021 07:26	JACOBS, CHRISTY SHOEMAKE	Other Code		OFC ROBINSON ENTERS B POD TO ESCORT I/M LEAIRD TO BOOKING
03/08/2021 07:40	JACOBS, CHRISTY SHOEMAKE	Other Code		DIRECTOR BUCKMAN ENTERS THE FACILITY
03/08/2021 08:06	JACOBS, CHRISTY SHOEMAKE	Other Code		OFC ROBINSON ESCORTS I/M LEAIRD BACK INTO B POD
03/08/2021 08:22	JACOBS, CHRISTY SHOEMAKE	Reporting for Duty		NURSE GENIE ENTERS THE FACILITY
03/08/2021 08:24	MARINE, MARCIA	Other Code		SGT MARINE CONDUCTED PIPE CHECK IN OLD JAIL/WORKCAMP
03/08/2021 08:57	JACOBS, CHRISTY SHOEMAKE	Other Code	B POD	REC BEGINS FOR 1 - 4 (08:57 - 10:57)
03/08/2021 09:01	JACOBS, CHRISTY SHOEMAKE	Medicine to Inmates		OFC ROBINSON ESCORTS NURSE GENIE INTO A POD TO GIVE MEDICATIONS - EXITS @ 09:09
03/08/2021 09:09	JACOBS, CHRISTY SHOEMAKE	Medicine to Inmates		OFC ROBINSON ESCORTS NURSE GENIE INTO B POD TO PASS OUT MEDICATIONS - EXITS @ 09:20
03/08/2021 09:12	MARINE, MARCIA	Medicine to Inmates		NURSE AND OFC ROBINSON DISPENSED MEDICATIONS IN NEW JAIL
03/08/2021 09:38	JACOBS, CHRISTY SHOEMAKE	Clean Up of Jail		OFC ROBINSON ENTERS A POD TO PUT OUT CLEANING SUPPLIES & TURN TV ON
03/08/2021 09:41	MARINE, MARCIA	Medicine to Inmates		SGT MARINE ESCORT NURSE GENIE TO DISPENSE MEDICATIONS IN OLD

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CHESTERFIELD COUNTY DETENTION CENTER

Officer Shift Log Report

2/14/2021 00:00 to 3/22/2021 23:59

Date/Time	Officer	Event Type	Area	Event Notes
				JAIL/WORKCAMP-ALONG WITH CONDUCTING WALK THROUGH
03/08/2021 10:03	JACOBS, CHRISTY SHOEMAKE	Other Code		OFC ROBINSON ENTERS A POD TO HAVE I/M FEDORCHUK SIGN PAPER FOR NURSE - EXITS @ 10:05
03/08/2021 10:05	JACOBS, CHRISTY SHOEMAKE	Other Code		MAJOR TEAL & OFC ROBINSON ENTER B POD TO MOVE I/M VANEGAS FROM ROOM 10 TO ROOM 14 - EXIT @ 10:12
* 03/08/2021 10:06	MARINE, MARCIA	Other Code		INMATE LITTLE MOVED TO B 10 NEW JAIL
03/08/2021 10:08	MARINE, MARCIA	Other Code		OFC ROBINSON CONDUCTED WALK THROUGH IN NEW JAIL
03/08/2021 10:09	JACOBS, CHRISTY SHOEMAKE	Other Code		SGT MARINE ENTERS B POD TO RETURN WHITES - EXITS @ 10:10
03/08/2021 10:15	MARINE, MARCIA	Other Code		SICK CALL COMPLETE
* 03/08/2021 10:16	JACOBS, CHRISTY SHOEMAKE	Other Code		MAJOR TEAL & OFC ROBINSON ESCORTS I/M LITTLE, DAVID TO B10 - EXITS @ 10:17
03/08/2021 11:02	DIXON, CRAIG LEMONT	Other Code		JACOBS FEEDS A POD
03/08/2021 11:07	DIXON, CRAIG LEMONT	Other Code		JACOBS AND ROBINSON FEEDS B POD
03/08/2021 11:07	KERNS, RANDALL	Feeding Begins		SGT MARINE FED IN OLD JAIL
03/08/2021 11:10	MARINE, MARCIA	Other Code		PPP ELIZA FREEMAN ENTER BOOKING TO PICK UP INMATE BRIAR GAINNEY
03/08/2021 11:16	DIXON, CRAIG LEMONT	Other Code		PROBATION AND PAROLE ENTERS NORTH SALLY PORT
03/08/2021 11:20	MARINE, MARCIA	Other Code		PPP EXIT BOOKING/SSP
03/08/2021 13:24	MARINE, MARCIA	Other Code		N1 ENTER BOOKING AND SIGN OUT INMATE DAVID WILLIAMS
03/08/2021 14:07	DIXON, CRAIG LEMONT	Other Code		REC STARTED IN B POD 11-14
03/08/2021 14:30	MARINE, MARCIA	Other Code		SEWAGE CHECK
03/08/2021 14:31	DIXON, CRAIG LEMONT	Other Code		MARINE ENTERS B POD
03/08/2021 14:31	DIXON, CRAIG LEMONT	Other Code		ROBINSON CONDUCTS SICK CALL IN NEW JAIL
03/08/2021 15:27	DIXON, CRAIG LEMONT	Other Code		CCSO ENTERS NORTH SALLY PORT
03/08/2021 15:53	DIXON, CRAIG LEMONT	Other Code		CCSO ENTERS NORTH SALLY PORT 67X1 (B/M)
03/08/2021 16:14	DIXON, CRAIG LEMONT	Other Code		CCSO ENTERS NORTH SALLY PORT 67X1 (W/M)
03/08/2021 16:36	DIXON, CRAIG LEMONT	Other Code		PRIVETTE FEEDS A POD
03/08/2021 16:37	MARINE, MARCIA	Other Code		OFC PRIVETTE FED IN OLDJAIL MAJOR TEAL FED IN NEW JAIL
03/08/2021 16:47	DIXON, CRAIG LEMONT	Other Code		MAJOR TEAL FEEDS B POD
03/08/2021 17:38	MARINE, MARCIA	Other Code		BRIEFING PASS ON TO SGT FREEMAN/SHIFT ENDING HEAD COUNT:64 INMATES