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the inmate if treatment is not accepted shall also be explained to the inmate. Staff shall document their treatment efforts in the medical record of the inmate.

- (c) When, after reasonable efforts, or in an emergency preventing such efforts, a medical necessity for immediate treatment of a life or health threatening situation exists, the physician may order that treatment be administered without the consent of the inmate. Staff shall document their treatment efforts in the medical record of the inmate.
- (d) Staff shall continue clinical and laboratory monitoring as necessary until the inmate's life or permanent health is no longer threatened.
- (e) Staff shall continue medical, psychiatric and/or psychological follow-up as long as necessary.

[45 FR 23365, Apr. 4, 1980, as amended at 59 FR 31883, June 20, 1994]

§ 549.66 Release from treatment.

Only the physician may order that an inmate be released from hunger strike evaluation and treatment. This order shall be documented in the medical record of the inmate.

[59 FR 31883, June 20, 1994]

Subpart F [Reserved]

Subpart G—Authority To Conduct Autopsies

§ 549.80 Authority to conduct autopsies.

(a) The Warden may order an autopsy and related scientific or medical tests to be performed on the body of a deceased inmate of the facility in the event of homicide, suicide, fatal illness or accident, or unexplained death. The autopsy or tests may be ordered in one of these situations only when the Warden determines that the autopsy or test is necessary to detect a crime, maintain discipline, protect the health or safety of other inmates, remedy official misconduct, or defend the United States or its employees from civil liability arising from the administration of the facility.

(1) The authority of the Warden under this section may not be dele-

gated below the level of Acting Warden.

- (2) Where the Warden has the authority to order an autopsy under this provision, no non-Bureau of Prisons authorization (e.g., from either the coroner or from the inmate's next-of-kin) is required. A decision on whether to order an autopsy is ordinarily made after consultation with the attending physician, and a determination by the . Warden that the autopsy is in accordance with the statutory provision. Once it is determined that an autopsy is appropriate, the Warden shall prepare a written statement authorizing this procedure. The written statement is to include the basis for approval.
- (b) In any situation other than as described in paragraph (a) of this section, the Warden may order an autopsy or post-mortem operation, including removal of tissue for transplanting, to be performed on the body of a deceased inmate of the facility with the written consent of a person (e.g., coroner, or next-of-kin, or the decedent's consent in the case of tissue removed for transplanting) authorized to permit the autopsy or post-mortem operation under the law of the State in which the facility is located.
- (1) The authority of the Warden under this section may not be delegated below the level of Acting Warden.
- (2) When the conducting of an autopsy requires permission of the family or next-of-kin, the following message is to be included in the telegram notifying the family or next-of-kin of the death: "Permission is requested to perform a complete autopsy". Also inform the family or next-of-kin that they may telegraph the institution *collect* with their response. Where permission is not received from the person (e.g., coroner or next-of-kin) authorized to permit the autopsy or post-mortem operation, an autopsy or post-mortem operation may not be performed under the conditions of this paragraph (b).
- (c) In addition to the provisions of paragraphs (a) and (b) of this section, each institution also is expected to abide by the following procedures.
- (1) Staff shall ensure that the state laws regarding the reporting of deaths are followed.

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- (2) Time is a critical factor in arranging for an autopsy, as this ordinarily must be performed within 48 hours. While a decision on an autopsy is pending, no action should be taken that will affect the validity of the autopsy results. Therefore, while the body may be released to a funeral home, this should be done only with the written understanding from the funeral home that no preparation for burial, including embalming, should be performed until a final decision is made on the need for an autopsy.
- (3) Medical staff shall arrange for the approved autopsy to be performed.
- (4) To the extent consistent with the needs of the autopsy or of specific scientific or medical tests, provisions of state and local laws protecting religious beliefs with respect to such autopsies are to be observed.

[52 FR 48068, Dec. 17, 1987]

PART 550—DRUG PROGRAMS

Subpart A [Reserved]

Subpart B—Alcohol Testing

550.10 Purpose and scope.

Subpart C [Reserved]

Subpart D—Urine Surveillance

- 550.30 Purpose and scope.
- 550.31 Procedures.

Subpart E-Drug Services (Urine Surveillance and Counseling for Sentenced Inmates in Contract CTCs)

- 550.40 Purpose and scope.
- 550.41 Urine surveillance.
- 550.42 Procedures for urine surveillance.
- 550.43 Drug counseling.
- 550.44 Procedures for arranging drug counseling.

Subpart F—Drug Abuse Treatment **Programs**

- 550.50 Purpose and scope.
- 550.51 Institutional organization/staff roles and responsibilities.
- 550.52 Admission and Orientation program.
- 550.53 Screening and referral.
- 550.54 Requirements for drug abuse education course.
- 550.55 Non-residential drug abuse treatment program.

- 550.56 Institution residential drug abuse treatment program.
- 550.57 Incentives for residential drug abuse treatment program participation.
- 550.58 Consideration for early release. 550.59 Transitional drug treatment services. 550.60 Inmate appeals.

AUTHORITY: 5 U.S.C. 301; 18 U.S.C. 3621, 3622, 3624, 4001, 4042, 4081, 4082 (Repealed in part as to offenses committed on or after November 1, 1987), 4251-4255, 5006-5024 (repealed October 12, 1984 as to conduct occurring after that date), 5039; 28 U.S.C. 509, 510; 28 CFR 0.95-0.99.

Subpart A [Reserved]

Subpart B—Alcohol Testing

§550.10 Purpose and scope.

The Bureau of Prisons maintains a surveillance program in order to deter and to detect the illegal introduction or use of alcohol in its institutions. In an effort to reduce the introduction or use of alcohol, the Warden shall establish procedures for monitoring and testing individual inmates or groups of inmates who are known or suspected to be users of alcohol, or who are considered high risks based on behavior observed or on information received by staff.

- (a) Staff may prepare a disciplinary report on an inmate who shows a positive substantiated test result for alcohol.
- (b) Staff may initiate disciplinary action against an inmate who refuses to submit to an alcohol test.

[45 FR 33940, May 20, 1980]

Subpart C [Reserved]

Subpart D—Urine Surveillance

Source: 62 FR 45292, Aug. 26, 1997, unless otherwise noted.

§550.30 Purpose and scope.

The Warden shall establish programs of urine testing for drug use, to monitor specific groups or individual inmates who are considered as high risk for drug use, such as those involved in community activities, those with a history of drug use, and those inmates specifically suspected of drug use. Testing shall be performed with frequency determined by the Warden on