

ESCORT BRIEFING

PRISONER NAME

STATUS

1. _____
2. _____

A. GENERAL

1. PRISONER(S) WILL NOT USE THE TELEPHONE, CONSUME FOOD OR BEVERAGES, OR BE TRANSFERED BY POV.
2. PRISONER(S) WILL SPEAK ONLY WITH PERSONNEL ASSOCIATED WITH THEIR SITUATION (COMMANDERS, 1SG, LAWYERS, MEDICAL PERSONNEL).
3. PRISONER(S) WILL BE KEPT UNDER YOUR SUPERVISION AT ALL TIMES. YOU WILL NOT SURRENDER YOUR PRISONER(S) TO ANOTHER PERSON WITHOUT APPROVAL FROM THE CONFINEMENT LIAISON SECTION.
4. TO BE A PRISONER ESCORT/GUARD YOU MUST RECEIVE A BRIEFING AND SIGN ACKNOWLEDGEMENT OF SUCH GIVEN BY THE CONFINEMENT LIAISON SECTION.
5. IF A PRISONER ATTEMPTS TO ESCAPE, YOU WILL MAKE EVERY EFFORT WITHIN THE BELOW LISTED LEVELS OF FORCE TO RESTRAIN HIM/HER. YOU WILL IMMEDIATELY NOTIFY

THE PMO AT 287-1075/1076/5986/1077, IN AN EMERGENCY SITUATION OR WHEN THERE IS

LEVELS OF FORCE AR 190-47

- *SHOW OF FORCE
 - *USE OF HIGH PRESSURE WATER
 - *USE OF RIOT CONTROL AGENT
 - *USE OF PHYSICAL FORCE OTHER THAN WEAPONS FIRE
 - *DEADLY FORCE
6. ENSURE THAT THE PRISONER(S) HEALTH AND WELFARE ARE LOOKED AFTER, WATCH FOR, AND TAKE NECESSARY ACTION TO PREVENT INJURY AND/OR HARM TO THE PRISONER(S).

B. OUTSIDE APPOINTMENTS

1. PRE-TRAIL PRISONERS TEMPORARILY RELEASED ON DD FORM 629 WILL HAVE BOTH HAND AND LEG RESTRAINS APPLIED. BOTH RESTRAINTS MAY BE REMOVED ONLY WHEN DIRECTED BY A JUDGE DURING OFFICIAL JUDICIAL PROCEEDING OR WHEN REQUESTED BY A PHYSICIAN TO FACILITATE MEDICAL TREATMENT. HAND RESTRAINTS MAY BE REMOVED THAT OTHER TIMES WHEN APPROVED BY THE DEPUTY PROVOST MARSHAL TO ALLOW THE PRISONER TO COMPLETE ESSENTIAL ADMINISTRATIVE REQUIREMENTS (AR 190-47)
2. WHEN YOU UNABLE TO ACCOMPANY THE PRISONER(S) INTO A ROOM (LAWYER OR DOCTORS' OFFICE), YOU WILL POSITION YOURSELF WHERE THE BEST SUPERVISION CAN BE MAINTINED (OUTSIDE THE DOOR) AND YOU WILL ENSURE THAT THE DOCTOR OR

4. YOU WILL NOT ALLOW THE PRISONER TO HANDLE ANY MONEY OR CHECKS. YOU WILL ACCEPT AND TURN IN ANY PRISONER(S) FUNDS TO THE PMO CONFINEMENT LIAISON SECTION.
5. YOU WILL ENSURE THAT THE PRISONER(S) PROCEEDS DIRECTLY TO THE PLACE OF APPOINTMENT AND THEN RETURNS DIRECTLY TO THE PMO.
6. PRISONER(S) WILL BE SECORTED TO THEIR UNIT, QUARTERS, OR OFF-POST UNLESS AUTHORIZED BY THE DEPUTY PROVOST MARSHAL.
7. THE PRISONER ESCORT/GUARD WILL NOT BE THE DRIVER OF THE VEHICLE.

****NOTE**** ESCORT/GUARD FAILING TO ADHERE TO THESE SPECIAL ORDERS MAY BE SUBJECT TO DISCIPLINARY ACTION UNDER THE PROVISIONS OF THE UCMJ OR AS DETERMINED BY THE UNIT COMMANDER.

I, _____, HAVE READ AND FULLY UNDERSTAND ALL OF THE ABOVE ORDERS.

I, _____ ACKNOWLEDGE RECEIPT OF AND RESPONSIBILITY FOR THE EQUIPMENT LISTED BELOW:

- 1 SET OF LEG IRONS
- 1 SET OF HAND IRONS
- 1 CUFF KEY
- _____
- _____
- _____

NAME _____

SIGNATURE _____

DATE _____