

ORIGINAL

1239 Kipke Drive Ann Arbor, MI 48109-2036

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THE UNIVERSITY OF MICHIGAN
GENERAL INCIDENT REPORT

		CASE STATUS	RELATED UM INCIDENT	INCIDENT YEAR	INCIDENT NUMBER	
		<i>Open Closed msp</i>		2006	4592	
OFFENSE 1	NATURE OF OFFENSE			ATTEMPT/COMPLETE	BIAS MOTIVATION	WEAPON
	Larceny - Theft from Building			Completed	None	None
	OFFENDER SUSPECTED OF USING		PREMISES ENTERED	GANG INVOLVED	JUVENILE	OTHER
		ALCOHOL	DRUGS	COMPUTER		No
CRIMINAL ACTIVITY		OPERATING/PROMOTING/ ASSISTING	CULTIVATING/MANUFACTURING/ PUBLISHING	EXPLOITING CHILDREN DISTRIBUTING/SELLING	BUYING/RECEIVING POSSESSING/CONCEALING	USING/CONSUMING TRANSPORTING/TRANSMITTING/IMPORTING

OFFENSE 2	NATURE OF OFFENSE			ATTEMPT/COMPLETE	BIAS MOTIVATION	WEAPON
	None			Completed	None	None
	OFFENDER SUSPECTED OF USING		PREMISES ENTERED	GANG INVOLVED	JUVENILE	OTHER
		ALCOHOL	DRUGS	COMPUTER		No
CRIMINAL ACTIVITY		OPERATING/PROMOTING/ ASSISTING	CULTIVATING/MANUFACTURING/ PUBLISHING	EXPLOITING CHILDREN DISTRIBUTING/SELLING	BUYING/RECEIVING POSSESSING/CONCEALING	USING/CONSUMING TRANSPORTING/TRANSMITTING/IMPORTING

OFFENSE 3	NATURE OF OFFENSE			ATTEMPT/COMPLETE	BIAS MOTIVATION	WEAPON
	None			Completed	None	None
	OFFENDER SUSPECTED OF USING		PREMISES ENTERED	GANG INVOLVED	JUVENILE	OTHER
		ALCOHOL	DRUGS	COMPUTER		No
CRIMINAL ACTIVITY		OPERATING/PROMOTING/ ASSISTING	CULTIVATING/MANUFACTURING/ PUBLISHING	EXPLOITING CHILDREN DISTRIBUTING/SELLING	BUYING/RECEIVING POSSESSING/CONCEALING	USING/CONSUMING TRANSPORTING/TRANSMITTING/IMPORTING

OFFENSE 4	NATURE OF OFFENSE			ATTEMPT/COMPLETE	BIAS MOTIVATION	WEAPON
	None			Completed	None	None
	OFFENDER SUSPECTED OF USING		PREMISES ENTERED	GANG INVOLVED	JUVENILE	OTHER
		ALCOHOL	DRUGS	COMPUTER		No
CRIMINAL ACTIVITY		OPERATING/PROMOTING/ ASSISTING	CULTIVATING/MANUFACTURING/ PUBLISHING	EXPLOITING CHILDREN DISTRIBUTING/SELLING	BUYING/RECEIVING POSSESSING/CONCEALING	USING/CONSUMING TRANSPORTING/TRANSMITTING/IMPORTING

INCIDENT LOCATION						
STREET NUMBER	STREET NAME		CITY	STATE	ZIP	ROOM#
1500	E. Medical Center Dr.		Ann Arbor	MI	48109	B1F420
INCIDENT OCCURED				INCIDENT REPORTED		ORIGINATING UNIT
DATE FROM	TIME FROM	DATE TO	TIME TO	DATE	TIME	
12/7/2006	17:10	12/7/2006	17:20	12/7/2006	18:00	Hospital Security

PERSONS INVOLVED						
SEQ	PERSON TYPE	NAME (last, first, middle)			GENDER	RACE
1	Complainant	Royer, Staci			Female	
HOME ADDRESS			HOME PHONE	AGE	DOB	
OTHER ADDRESS			OTHER PHONE	BEST TIME TO REACH	AFFILIATION	
1500 E. Medical Center Dr., University Hospital #4244			(734) 936-6514		Staff	

VICTIM	VICTIM TYPE	CONNECTED OFFENSE	ETHNICITY	RESIDENCE	INJURY			
	Business	1 2 3 4	Unknown	Resident of State	None			
VICTIM	CIRCUMSTANCE	JUSTIFIABLE HOMICIDE	VICTIM	OFFENDER 1	OFFENDER 2	OFFENDER 3	OFFENDER 4	OFFENDER 5
	Not Applicable	Not Applicable		Stranger	Stranger	Stranger	Stranger	Stranger

OFFENDER	HEIGHT	WEIGHT	BUILD	HAIR STYLE	HAIR COLOR	EYE COLOR	FACIAL HAIR	EYE WEAR
	0'00	0	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown
OFFENDER	ALI/A/S	COMPLEXION	OPS CODE/STATE	OTHER ID	SSN			
	Unknown/None	Unknown	Unknown/None					

EXCEPTIONAL CLEARANCE	CLEARANCE DATE	OFFENDER KNOWN	VEHICLE KNOWN	EVIDENCE COLL.	OTHER AGENCY ORI	OTHER AGENCY CASE
Not Applicable		No	No	No		
REPORTING OFFICER	SIGNATURE			DATE OF REPORT	REVIEWED BY	
Walter, Ryan				12/17/2006		

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THE UNIVERSITY OF MICHIGAN
ADDITIONAL PERSON REPORT

INCIDENT YEAR	INCIDENT NUMBER
2006	4592

PERSON INVOLVED			
SEQ	PERSON TYPE	NAME (last, first, middle)	RACE
2	Victim	UofM Health System	Unknown
HOME ADDRESS		HOME PHONE	AGE
1500 E. Medical Center Dr.		(734) 936-4000	00
OTHER ADDRESS		OTHER PHONE	AFFLIATION
			Unknown

VICTIM	VICTIM TYPE	CONNECTED OFFENSE	ETHNICITY	RESIDENCE	INJURY
	Not Applicable	1 2 3 4	Unknown	Unknown	None
CIRCUMSTANCE	JUSTIFIABLE HOMICIDE	VOR	OFFENDER 1	OFFENDER 2	OFFENDER 3
	Not Applicable		Stranger	Stranger	Stranger
			OFFENDER 4	OFFENDER 5	
			Stranger	Stranger	

OFFENDER	HEIGHT	WEIGHT	BUILD	HAIR LENGTH	HAIR COLOR	EYE COLOR	FACIAL HAIR	EYE WEAR
	0'00	0	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown
ALIAS	COMPLEXION	OPS CODE/STATE	OTHER ID	SSN				
	Unknown/None	Unknown	Unknown/None					

PERSON INVOLVED			
SEQ	PERSON TYPE	NAME (last, first, middle)	RACE
3	None		Unknown
HOME ADDRESS		HOME PHONE	AGE
OTHER ADDRESS		OTHER PHONE	AFFLIATION
			Unknown

VICTIM	VICTIM TYPE	CONNECTED OFFENSE	ETHNICITY	RESIDENCE	INJURY
	Not Applicable	1 2 3 4	Unknown	Unknown	None
CIRCUMSTANCE	JUSTIFIABLE HOMICIDE	VOR	OFFENDER 1	OFFENDER 2	OFFENDER 3
	Not Applicable		Stranger	Stranger	Stranger
			OFFENDER 4	OFFENDER 5	
			Stranger	Stranger	

OFFENDER	HEIGHT	WEIGHT	BUILD	HAIR LENGTH	HAIR COLOR	EYE COLOR	FACIAL HAIR	EYE WEAR
			Unknown	Unknown	Unknown	Unknown	Unknown	Unknown
ALIAS	COMPLEXION	OPS CODE/STATE	OTHER ID	SSN				
	Unknown							

PERSON INVOLVED			
SEQ	PERSON TYPE	NAME (last, first, middle)	RACE
4	None		Unknown
HOME ADDRESS		HOME PHONE	AGE
OTHER ADDRESS		OTHER PHONE	AFFLIATION
			Unknown

VICTIM	VICTIM TYPE	CONNECTED OFFENSE	ETHNICITY	RESIDENCE	INJURY
	Not Applicable	1 2 3 4	Unknown	Unknown	None
CIRCUMSTANCE	JUSTIFIABLE HOMICIDE	VOR	OFFENDER 1	OFFENDER 2	OFFENDER 3
	Not Applicable		Stranger	Stranger	Stranger
			OFFENDER 4	OFFENDER 5	
			Stranger	Stranger	

OFFENDER	HEIGHT	WEIGHT	BUILD	HAIR LENGTH	HAIR COLOR	EYE COLOR	FACIAL HAIR	EYE WEAR
			Unknown	Unknown	Unknown	Unknown	Unknown	Unknown
ALIAS	COMPLEXION	OPS CODE/STATE	OTHER ID	SSN				
	Unknown							

REPORTING OFFICER	SIGNATURE	DATE OF REPORT	REVIEWED BY
Walter, Ryan		12/17/2006	

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THE UNIVERSITY OF MICHIGAN
PROPERTY REPORT

COPY

INCIDENT YEAR	INCIDENT NUMBER
2006	4592

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
1	Stolen		Drug/Narcotic Equipment				\$2.00			
SUBJ#	OR	NAME	ADDRESS		PHONE	NCIC#	NCIC DATE			
2		UofM Health System	1500 E. Medical Center Dr.		(734) 936-4000					
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
Fentanyl	Narcotic		clear	good						
DRUG	DRUG TYPE	QUANTITY	MEASUREMENT		VEH	PLATE	VIN			
	None	1.000	Not Reported							

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
2	Stolen and Recovered		Drugs/Narcotics				\$10.00	12/13/2006		
SUBJ#	OR	NAME	ADDRESS		PHONE	NCIC#	NCIC DATE			
0		U-M Hospital								
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
Fentanyl Citrate	1 vial 50 mcg/mL			sealed		45-407-DK				
DRUG	DRUG TYPE	QUANTITY	MEASUREMENT		VEH	PLATE	VIN			
	None	1.000	Not Reported							

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
3	None		None				\$0.00			
SUBJ#	OR	NAME	ADDRESS		PHONE	NCIC#	NCIC DATE			
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
DRUG	DRUG TYPE	QUANTITY	MEASUREMENT		VEH	PLATE	VIN			
	None		Not Reported							

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
4	None		None				\$0.00			
SUBJ#	OR	NAME	ADDRESS		PHONE	NCIC#	NCIC DATE			
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
DRUG	DRUG TYPE	QUANTITY	MEASUREMENT		VEH	PLATE	VIN			
	None		Not Reported							

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
5	None		None				\$0.00			
SUBJ#	OR	NAME	ADDRESS		PHONE	NCIC#	NCIC DATE			
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
DRUG	DRUG TYPE	QUANTITY	MEASUREMENT		VEH	PLATE	VIN			
	None		Not Reported							

AUTHORITY IS HERBY GRANTED TO:	AUTHORIZING COMMAND OFFICER(sign)			DATE
RELEASE SELL RETAIN DESTROY				

RELEASE OF PROPERTY			DESTRUCTION OF PROPERTY		
RELEASED BY(sign)	DATE RELEASED		DESTROYED BY(sign)		
RECEIVED BY(sign)	RECEIVED BY(print)		WITNESSED BY(sign)		
ADDRESS	ITEM NO.	DATE DESTROYED	ITEM NO.		

REPORTING OFFICER	SIGNATURE	DATE OF REPORT	REVIEWED BY
Walter, Ryan		12/17/2006	

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THE UNIVERSITY OF MICHIGAN
PROPERTY REPORT

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INCIDENT YEAR	INCIDENT NUMBER
2006	4592

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
1	Stolen		Drugs/Narcotics Equipment				\$2.00			
SUBJ#	OR	NAME	ADDRESS			PHONE	NCIC#	NCIC DATE		
2		UofM Health System	1500 E. Medical Center Dr.			(734) 936-4000				
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
Fentanyl	Narcotic		clear	good						
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		
	None		1.000	Not reported						

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
2	Stolen and Recovered		Drugs/Narcotics				\$10.00	12/13/2006		
SUBJ#	OR	NAME	ADDRESS			PHONE	NCIC#	NCIC DATE		
0		U-M Hospital								
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
Fentanyl Citrate	1 vial 50 mcg/mL			sealed		45-407-DK				
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		
	None		1.000	Not reported						

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
3							\$0.00			
SUBJ#	OR	NAME	ADDRESS			PHONE	NCIC#	NCIC DATE		
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
4							\$0.00			
SUBJ#	OR	NAME	ADDRESS			PHONE	NCIC#	NCIC DATE		
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
5							\$0.00			
SUBJ#	OR	NAME	ADDRESS			PHONE	NCIC#	NCIC DATE		
MAKE	MODEL		COLOR	CONDITION		SERIAL NUMBER				
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		

AUTHORITY IS HERBY GRANTED TO:			AUTHORIZING COMMAND OFFICER(sign)				DATE
RELEASE	SELL	RETAIN	DESTROY				

RELEASE OF PROPERTY				DESTRUCTION OF PROPERTY			
RELEASED BY(sign)		DATE RELEASED		DESTROYED BY(sign)			
				<i>[Signature]</i>			
RECEIVED BY(sign)		RECEIVED BY(print)		WITNESSED BY(sign)			
<i>[Signature]</i>				<i>[Signature]</i>			
ADDRESS		ITEM NO.	DATE DESTROYED	ITEM NO.			
<i>[Signature]</i>		2	1-2-07	2			

REPORTING OFFICER	SIGNATURE	DATE OF REPORT	REVIEWED BY
Walter, Ryan		12/19/2006	

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THE UNIVERSITY OF MICHIGAN
PROPERTY REPORT

INCIDENT YEAR	INCIDENT NUMBER
2006	4592

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
	Stolen and Recovered		Drugs/Narcotics				\$10.00	12/13/2006		
SUBJ#	OR	NAME		ADDRESS			PHONE	NCIC#	NCIC DATE	
		U-M Hospital								
MAKE	MODEL		COLOR		CONDITION		SERIAL NUMBER			
Fentanyl Citrate	1 vial 50 mcg/mL				sealed		45-407-DK			
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		
	None		1.000	Not Reported						

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
	None		None				\$0.00			
SUBJ#	OR	NAME		ADDRESS			PHONE	NCIC#	NCIC DATE	
MAKE	MODEL		COLOR		CONDITION		SERIAL NUMBER			
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		
	None			Not Reported						

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
	None		None				\$0.00			
SUBJ#	OR	NAME		ADDRESS			PHONE	NCIC#	NCIC DATE	
MAKE	MODEL		COLOR		CONDITION		SERIAL NUMBER			
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		
	None			Not Reported						

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
	None		None				\$0.00			
SUBJ#	OR	NAME		ADDRESS			PHONE	NCIC#	NCIC DATE	
MAKE	MODEL		COLOR		CONDITION		SERIAL NUMBER			
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		
	None			Not Reported						

PROPERTY ITEM										
SEQ	LOSS TYPE		CLASSIFICATION				VALUE	DATE RECOVERED		
	None		None				\$0.00			
SUBJ#	OR	NAME		ADDRESS			PHONE	NCIC#	NCIC DATE	
MAKE	MODEL		COLOR		CONDITION		SERIAL NUMBER			
DRUG	DRUG TYPE		QUANTITY	MEASUREMENT		VEH	PLATE	VIN		
	None			Not Reported						

AUTHORITY IS HERBY GRANTED TO:				AUTHORIZING COMMAND OFFICER(sign)				DATE
RELEASE	SELL	RETAIN	DESTROY					

RELEASE OF PROPERTY				DESTRUCTION OF PROPERTY			
RELEASED BY(sign)		DATE RELEASED		DESTROYED BY(sign)			
RECEIVED BY(sign)		RECEIVED BY(print)		WITNESSED BY(sign)			
ADDRESS		ITEM NO.		DATE DESTROYED		ITEM NO.	

REPORTING OFFICER	SIGNATURE	DATE OF REPORT	REVIEWED BY
Soichet, Rob	<i>[Signature]</i>	12/13/02	<i>[Signature]</i>

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**THE UNIVERSITY OF MICHIGAN
NARRATIVE / SUPPLEMENT REPORT**

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<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> SUPPLEMENT	DATE & TIME OF THIS REPORT	INCIDENT TYPE	ORIGINAL YEAR	INCIDENT NUMBER
	12-7-2006/ 6:00 P.M.	Larceny- From A Building	2006	06-4592
REPORTING OFFICER: <i>R. WALTER</i>	NARRATIVE NAME: ORIGINAL	INFORMATION RECEIVED FROM: Complainant		SUPERVISOR REVIEW: <i>J. Brugger</i>
REPORT INCIDENT NUMBER: 06-4592 CAD NUMBER: 063410143 REPORT RECEIVED: I, Ryan Walter, was dispatched by Ofc. J. Smith to respond to UHB1420 at 5:40 P.M. on 12-7-2006 in regards to a larceny from a building. LOCATION: University Hospital 1500 E. Medical Center Dr. B1F420 Ann Arbor, MI 48109 DATE/TIME: The incident occurred between 5:10 P.M. and 5:20 P.M. on 12-7-2006. ALCOHOL/DRUG RELATED: Yes VICTIM: UofM Health System 1500 E. Medical Center Dr. Ann Arbor, MI 48109 COMPLAINANT: Staci Royer University Hospital #4244 1500 E. Medical Center Dr. Ann Arbor, MI 48109 (734) 936-6514 INTERVIEW COMPLAINANT: I spoke with a Ms. Staci Royer in regards to a missing bottle of Fentanyl. Royer reported that she secured a 100 microgram vial of the narcotic and kept it in her possession. Royer informed me that at 5:10 P.M. on 12-7-2006 she left the narcotic upon the desk in UH B1F420 and went to get a glass of water. When she returned, she noticed that the vial was missing. Royer looked at the time and noted that it was 5:20 P.M. on 12-7-2006. INVESTIGATION: Upon examination of the scene I was unable to locate any missing property. We searched the trash and around the immediate area to no avail. PROPERTY STOLEN AND VALUE: One 100 microgram vial of Fentanyl. Valued at \$2.00.				

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NARRATIVE / SUPPLEMENT REPORT

<input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> SUPPLEMENT	DATE & TIME OF THIS REPORT	INCIDENT TYPE	ORIGINAL YEAR	INCIDENT NUMBER
	12/8/2006 1:30am	Larceny from a Building	2006	06-4592
REPORTING OFFICER: Laura Dodd <i>Laura Dodd</i>	NARRATIVE NAME: Supplement	INFORMATION RECEIVED FROM: Robert Thompson	SUPERVISOR REVIEW: Erik J. Mattila <i>Erik J. Mattila</i>	
ORIGINAL REPORT NUMBER: 06-4592				
ORIGINAL CAD NUMBER: 063410143				
ORIGINAL REPORT DATE: 12/7/06				
SUPPLEMENT REPORT NUMBER: 06-4592 supplement				
SUPPLEMENT DISPATCH ID: 75199				
SUPPLEMENT REPORT DATE: 12/8/2006				
OTHER PERSON: Robert Thompson, UMHS Department of Radiology employee				
Home phone:				
Work phone: (734) 936-8506				
NATURE OF INCIDENT: Larceny from a Building				
DATE/TIME OF ORIGINAL INCIDENT: The incident occurred between 5:10 P.M. and 5:20 P.M. on 12/7/2006.				
SUMMARY: UMHS employee Staci Royer reported that one 100 microgram vial of Fentanyl was taken from her desk in room B1F420.				
NEW INFORMATION: On Thursday, December 7 at approximately 8:37pm, I, Officer Laura Dodd, was dispatched by Officer Roger Schaff to speak with UMHS employee Robert Thompson regarding the vial of Fentanyl that Staci Royer reported as stolen.				
I spoke with Robert Thompson at approximately 9:15 in room BIF420 (Single Plane Lab/Angio Room 2). Robert Thompson stated to me that on Thursday, December 7 at approximately 8:30pm, he noticed a small towel lying on the floor beneath a cart. When he reached down to remove the towel, he saw the vial of Fentanyl lying on the floor beneath the cart as well. He stated that he had heard from his colleagues that a vial of Fentanyl had been reported as stolen, and he called UMHS Security Services immediately after finding it.				
Robert Thompson gave the vial of Fentanyl to me, and it is currently stored in the Medications Safe in the Security Services office.				

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THE UNIVERSITY OF MICHIGAN
NARRATIVE / SUPPLEMENT REPORT

<input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> SUPPLEMENT	DATE & TIME OF THIS REPORT	INCIDENT TYPE	ORIGINAL YEAR	INCIDENT NUMBER
	12-12-06 8:13AM	Larceny, from bldg.	2006	4592
REPORTING OFFICER: L. SMITH #361 <i>L. Smith #361</i>	NARRATIVE NAME: SUPPLEMENT	INFORMATION RECEIVED FROM: Joslin, Allan		SUPERVISOR REVIEW: <i>J. Brugger</i>

INCIDENT REPORT NUMBER: 06-4592

ORIGINAL REPORT DATE: 12-7-06

SUPPLEMENT DATE: 12-12-06

SUMMARY: On 12-7-06 at 5:40pm, Staci Royer reported the larceny of one vial of Fentanyl from UH B1F420. On 12-7-06 at approximately 2037 hrs, Robert Thompson called to report he had found the vial of Fentanyl in UH B1F420.

ADDITIONAL INFORMATION: On 12-11-96 at approximately 1210 hrs Allan Joslin, Interventional Radiology Manager, came to our office, Med Inn C155. Joslin stated he wanted to talk to us, Investigator Smith and Lt Wells, about the larceny of Fentanyl from UH B1F420. Joslin said he believed that the recent disappearance and reappearance of the vial of Fentanyl was due to the actions of David Kwiatkowski. Joslin stated Kwiatkowski has been suspended without pay.

Joslin said the vial of Fentanyl was reported stolen on 12-7-06 when Staci Royer, an ICU nurse, set it down in the control room. Joslin explained that the control room, UH B1F422, is between procedure rooms 1 & 2. He said the control room has all the monitoring equipment for medical procedures. Joslin said Royer reported she set the vial of Fentanyl on the counter in the control room and went to get a drink of water. Joslin said Royer told him when she returned to the control room a few minutes later the Fentanyl was not on the counter.

Joslin said the following employees were working in the area during that time: Ryan Hill, David Kwiatkowski, Bob Russell, Jerry Cook, Staci Royer, Wendy Baker, Mary Covilli and Dr. David Williams. He then went on to say that Laura Bushey had more information on this incident.

On 12/11/06 at 1345 hrs Inv. Smith interviewed Ms. Bushey who is a nurse that was working in room 6. The patient case that had been in room 6 was finished at 1640 hrs. Ms. Bushey was cleaning and prepping the room and was in and out of it. She walked into the room at about 1720 - 1725 hrs and observed Kwiatkowski in the room at the counter. He appeared to be startled when Bushey walked in. Bushey said she saw Kwiatkowski slide his hand across the counter. He then held up a band aid and said that he had been looking for a band aid to cover his cut. He then immediately walked out of the room. Bushey said as Kwiatkowski left the room he turned to his left and walked from the area towards a main corridor outside of the patient care rooms. This was a longer route away from room 2. Bushey said cutting through the inventory room would have been the fastest way back to room 2 where Kwiatkowski was assigned. Bushey also stated she thought it was odd that he was looking for a band aid in room 6 when he had been working in room 2 which had band aids.

Ms. Bushey waited a couple of minutes and then walked over to the counter where she had seen Kwiatkowski. There were some towels on the counter where Kwiatkowski had been standing and had moved his hand across the counter. Ms. Bushey observed a couple of unopened packages of needles partially obscured by the stack of towels. Ms. Bushey added that she had cleaned this counter off about 30 minutes earlier so there were no needles on the counter when she had finished cleaning.

Joslin also told us that the patient being monitored by Kwiatkowski in room 2 was in very critical condition. There were staff with the patient at all times and part of Kwiatkowski's duties was to get anything needed by the staff working

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**THE UNIVERSITY OF MICHIGAN
NARRATIVE / SUPPLEMENT REPORT**

<input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> SUPPLEMENT	DATE & TIME OF THIS REPORT	INCIDENT TYPE	ORIGINAL YEAR	INCIDENT NUMBER
	12-12-06 8:13AM	Larceny, from bldg.	2006	4592
REPORTING OFFICER: <i>A. Smith #361</i>	NARRATIVE NAME: SUPPLEMENT		INFORMATION RECEIVED FROM: Joslin, Allan	SUPERVISOR REVIEW: <i>J. Brugger</i>
<p>on the patient. It was important for him to remain in the control room in case his services were needed. There are also large numbers of band aids in every room of the area. There was no need for Kwiatkowski to leave his station to look for a band aid as they were within easy access to him.</p> <p>The search for the missing Fentanyl during the initial time period was negative. Ms. Royer had left the vial on the counter top in the control room before she left to get a drink. The time period that she was gone was about 5 – 10 minutes. Kwiatkowski was the one person that was in the area when she left to get a drink. The vial was found about 3 hours later in room 2. This room was occupied with the patient and medical staff from about 1500 hrs until midnight. The room is fairly dark and medical staff would most likely have kept their attention turned towards the monitors that monitored the patient they were attending. The vial of Fentanyl was found inside room 2 between 2000 – 2010 hrs. The vial was located on the other side of room 2 away from the control room under a towel that was under a cart in the room.</p> <p>FENTANYL INFORMATION: The vial of Fentanyl was secured in the meds safe in Hospital Security's Lost & Found. On 12/13/06 Lt Wells took control of the vial and turned it over to Det. Soichet of UMPD.</p>				

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THE UNIVERSITY OF MICHIGAN NARRATIVE / SUPPLEMENT REPORT

<input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> SUPPLEMENT	DATE & TIME OF THIS REPORT	INCIDENT TYPE	ORIGINAL YEAR	INCIDENT NUMBER
	12/13/2006	Larceny Narcotics	2006	4592
REPORTING OFFICER: R. Soichet	NARRATIVE NAME: Evidence Recovered		INFORMATION RECEIVED FROM:	SUPERVISOR REVIEW: RN

NATURE:
Larceny in building (fentanyl)
VCSA

SUMMARY:
On 12/13/06 I received a sealed clear plastic envelope containing a mcg/mL vial of 50 fentanyl citrate from Hospital Security Lt. Wells. Lt. Wells advised me that this was the vial stolen and recovered at the scene in the above incident.

CASE STATUS:
Open

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**THE UNIVERSITY OF MICHIGAN
NARRATIVE / SUPPLEMENT REPORT**

C O P Y

<input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> SUPPLEMENT	DATE & TIME OF THIS REPORT	INCIDENT TYPE	ORIGINAL YEAR	INCIDENT NUMBER
	12/20/2006	Larceny	2006	4592
REPORTING OFFICER: R. Soichet	NARRATIVE NAME: Closed		INFORMATION RECEIVED FROM:	SUPERVISOR REVIEW: RN

cap left in the area. I confirmed that he had not handled the vial and he agreed he had not and allowed me to print him. I turned these prints over to Off. Zavala who informed me that he was unable to lift any prints from the vial.

I ripped up and destroyed the print card provided by Kwiatkowski in the presence of Lt. Neumann.

CASE STATUS:
Closed

m. sf