TASERED PATIENTS, CARE & TRANSPORT

PURPOSE

To establish guidelines for Paramedics and Advanced EMT personnel in the treatment and transportation of patients on whom a TASER has been used.

AUTHORITY

California Code of Regulations, Title 22, Section 100169

Health & Safety Code, Sections 1797.204, 1797.220, 1798

GENERAL CONSIDERATIONS

A. A TASER is designed to transmit electrical impulses that temporarily disrupt the body's nervous system. Its Electro-Muscular Disruption (EMD) technology causes an uncontrollable contraction of the muscle tissue, allowing the TASER to physically debilitate a target regardless of pain tolerance or mental focus.
B. The scene must be safe and secured by law enforcement before Emergency Medical Services (EMS) will evaluate or treat the patient.
C. Assess the patient for any potential cause of the abnormal or combative behavior such as, but not limited to, head trauma, hypoxia, drug and alcohol related problems, hypoglycemia and other metabolic disorders, stress and psychiatric disorders and treat according to the appropriate protocol.
D. Assess the patient for any potential injury after the TASER was deployed. Remember the TASER will cause the patient to fall to the ground or become incapacitated.

POLICY

A. Local law enforcement policy:
   1. Taser probes should not be removed by EMS personnel unless they interfere with the airway or the safe transportation of the patient. TASER probes should be considered legal evidence and if removed shall be offered to law enforcement prior to disposal. Follow law enforcement direction regarding the preservation or disposal of TASER probes.

B. Mode of transportation and destination to be determined by law enforcement.

PROCEDURE

A. When safe to do so, patients should be immediately evaluated, with particular attention to signs and symptoms of excited delirium.
B. Any injuries or medical conditions will be treated according to the appropriate treatment protocol.
C. These patients will be in custody of law enforcement and will require transportation to an emergency department for medical clearance.
D. If the transporting Paramedic or Advanced EMT determines that the patient is a risk to him/herself and/or the ambulance personnel, law enforcement officer(s) may be requested to accompany the patient.

E. Unless otherwise contraindicated, the patient should be adequately and safely restrained.
F. If one or both of the TASER probes requires removal for safe transportation:
   1. Verify the wires to the probes have been severed.
   2. Use routine biohazard precautions.
   3. Place one hand on the patient in the area where the probe is embedded and stabilize the skin surrounding the puncture site between two fingers. Keep your hand away from the probe. With your other hand, in one fluid motion pull the probe straight out from the puncture site.
   4. Follow law enforcement direction regarding the preservation or disposal of TASER probes.
   5. Apply direct pressure for bleeding, and apply a sterile dressing to the wound site.

DOCUMENTATION

A. The following must be documented on the PCR:
   1. The patient's presenting behavior or signs / symptoms which lead law enforcement to tase the patient, if available.
   2. Baseline patient assessment including, but not limited to, oxygen saturation, blood glucose level, neurological assessment, vital signs. Repeat assessment every 10 minutes until arrival at the ED.
   3. Time of taser barb removal, if applicable.
   4. Anatomic location of the taser barb(s).
   5. Whether or not the taser barb(s) are intact following removal.

CROSS REFERENCES:

Patient Destination,

Trauma Triage Criteria,

Base Hospital/Modified Base Hospital Contact,

Restraint of Violent Patients,

Sedation