| Sierra – Sacramento Valley EMS Agency Program Policy | | | |
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| Tasered Patient Care & Transport | | | |
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| | Approval: Troy M. Falck, MD – Medical Director | | SIGNATURE ON FILE |
| | Approval: John Poland – Executive Director | | SIGNATURE ON FILE |

PURPOSE:

To establish guidelines for EMS personnel on the treatment and transportation of patients on whom a Taser has been used.

AUTHORITY:

- A. HSC, § 1797.204, 1797.220, and 1798.
- B. CCR, Title 22, § 100169.

GENERAL CONSIDERATIONS:

- A. A Taser is designed to transmit electrical impulses that temporarily disrupt the body's nervous system. The 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 EMS personnel will evaluate or treat the patient.
- C. Assess the patient for any potential cause of the abnormal or combative behavior such as head trauma, hypoxia, alcohol or drug related problems, hypoglycemia or other metabolic disorders, stress or psychiatric disorders.
- D. Assess the patient for any potential injury resulting from Taser deployment.

POLICY:

- A. Taser probes may be removed by EMS personnel if they interfere with the treatment or safe transportation of the patient. Only EMT, AEMT and paramedic personnel are approved to remove Taser probes in the prehospital setting.
- B. If removed by EMS, Taser probes shall be offered to law enforcement prior to disposal.
- C. Mode of transportation and destination will be determined by law enforcement, in consultation with EMS personnel and/or the base/modified base hospital if necessary.

PROCEDURE:

- A. When safe to do so, patients should be immediately evaluated, with particular attention to signs and symptoms of excited delirium.
- B. Treat any injuries/medical conditions according to appropriate protocol(s).
- C. The patient will normally be in law enforcement custody, and will require transportation to an emergency department for medical clearance.
- D. If EMS personnel determine that the patient is a danger to self or others, law enforcement may be requested to accompany the patient during transport.
- E. The patient should be appropriately restrained if indicated.
- F. If one or both of the Taser probes requires removal:
 - 1. Verify the wires to the probes have been severed.
 - 2. Use routine biohazard precautions. 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.
 - 3. Inspect probes to ensure that all parts were removed, and all barbs are intact.
 - 4. Follow law enforcement direction regarding the preservation or disposal of probes.
 - 5. Apply direct pressure for bleeding and apply a sterile dressing to the wound site.
 - 6. Bo not remove probes located in the eyes, face, neck, genitals, or any other potentially vulnerable area.

DOCUMENTATION:

The following information shall be documented on the patient care report:

- A. Patient's presenting behavior or signs/symptoms which resulted in Taser use.
- B. Adequate patient assessment including, but not limited to, neurological assessment, oxygen saturation, blood glucose level, and other pertinent vital signs.
- C. Anatomic location of the Taser probes (note: if Taser probes were removed by EMS, document time of removal and if probes were intact following removal).