

REQUESTS BY LAW ENFORCEMENT

PURPOSE

To provide a framework including actions to be taken and documentation to be completed for various responses initiated by law enforcement.

BACKGROUND

When you are confronted by a violent patient you should call law enforcement. In the same manner, when law enforcement officers are faced with a suspect who has a complicated medical history, current medical complaint, or has been forcefully subdued, they call upon EMS to perform assessments and make recommendations.

Whenever you are on scene at the request of law enforcement you should consider the following:

- ❑ Make sure the scene is safe; watch for environmental hazards, and expect suspects/patients to be dangerous.
- ❑ Criminal Suspects are only suspects and should be treated with respect and dignity
- ❑ If you are not comfortable with the situation, advise law enforcement on what actions they need to take before you are willing to perform assessment or treatment.

DEFINITIONS

- 1) ***Excited Delirium*** – Condition characterized by a severe disturbance in the level of consciousness and a change in mental status over a relatively short period of time, manifested by mental and physiological arousal, agitation, hostility and heightened sympathetic stimulation. It can result from mental illness, substance abuse (usually stimulants) or a combination of both

ACTIONS

Consider the following additional points while performing law enforcement requests.

Remember that you may not “clear” any patient of injuries. Transport any patient you feel warrants further treatment or assessment.

- ❑ **Assessments**
 - Always attempt to complete a thorough assessment focused around the patient or officer complaint.
- ❑ **Taser discharge:** Tased patients have been associated with “sudden in-custody deaths” in national studies. These patients should receive special attention to factors that have been known to contribute to fatalities.
 - Each agency covered by these guidelines may choose **TO** or **NOT TO** remove taser barbs.
 - Those choosing to remove barbs shall ensure all personnel are trained appropriately in their removal and will **NOT** remove any barb which has penetrated the face, anterior neck, or genitals.
 - In addition to barb removal, EMS personnel should consider the following:
 - Consider ECG monitoring.
 - Consider mechanisms associated with Taser discharge; falls, labor complications, etc.
 - Consider the reason why Taser discharge was required; drug use, anxiety, etc.
 - Consider that other methods of subduing a suspect may have been employed before or concurrent with Taser discharge.

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- ❑ **OC spray discharge:** OC spray is a respiratory/skin irritant. The following should be considered when evaluating and treating patients exposed to OC spray:
 - Flushing eyes and skin may help with the discomfort associated with irritation caused by OC exposure. Over time, the irritation will eventually subside. If permissible by law enforcement consider providing the suspect with a damp towel to rest over their eyes or skin.
 - Patients with history of respiratory conditions may require nebulized medications (see respiratory distress guideline).
 - Consider that other methods of subduing a suspect may have been employed before or concurrent with OC discharge. Attempt to complete a full assessment.
 - Consider the reason why OC discharge was required; drug use, anxiety, and etc requiring additional EMS assessment and/or monitoring. In some cases, patients should be transported by ambulance for evaluation.

SUMMARY:

Transport is always recommended for patients who have been involved in physical altercations with law enforcement due to the increased potential for delayed signs/symptoms. **Transport is strongly encouraged for the following conditions:**

- ❑ Evidence of excited delirium before or after altercation
- ❑ Persistent, abnormal vital signs
- ❑ History or physical findings consistent with amphetamine or hallucinogenic drug use
- ❑ Cardiac history
- ❑ Altered level of consciousness or aggressive, violent behavior including resistance to evaluation
- ❑ Evidence of hyperthermia
- ❑ Abnormal, subjective complaints, including chest pain, shortness of breath, nausea or headache.

DOCUMENTATION

Due to the nature of law enforcement requests for EMS assistance, it is important for personnel to thoroughly document all assessments and findings on the Pre-Hospital Care Report in accordance with the documentation guideline.