



- sensitive areas (head, neck, hands, feet, or genitals). Follow local protocols, including those of law enforcement for evidence collection and retention.
3. Treat medical and traumatic injury

#### **Patient Safety Considerations**

1. Before removal of the barbed dart, make sure the cartridge has been removed from the conducted electrical weapon
2. Patient should not be restrained in the prone, face down, or hog-tied position as respiratory compromise is a significant risk
3. The patient may have underlying pathology before being tased (refer to appropriate guidelines for managing the underlying medical/traumatic pathology)
4. Perform a comprehensive assessment with special attention looking for signs and symptoms of active medical decompensation
5. Transport the patient to the hospital
6. EMS clinicians who respond for a conducted electrical weapon patient should not perform a "medical clearance" for law enforcement to then take the patient to a nonmedical facility

#### **Notes/Educational Pearls**

##### **Key Considerations**

1. Conducted electrical weapon can be discharged in three fashions:
  - a. Direct contact without the use of the darts
  - b. A single dart with addition contact by direct contact of weapon
  - c. From a distance up to 35 feet with two darts
2. The device delivers 19 pulses per second with an average current per pulse of 2.1 millamps which, in combination with toxins/drugs, patient's underlying diseases, excessive physical exertion, and trauma, may precipitate arrhythmias. Thus, consider cardiac monitoring and 12-lead EKG assessment
3. Drive Stun is a direct weapon two-point contact which is designed to generate pain and not incapacitate the subject. Only local muscle groups are stimulated with the Drive Stun technique

##### **Pertinent Assessment Findings**

1. Thoroughly assess the patient for trauma as the patient may have fallen from standing or higher
2. Ascertain if more than one TASER® cartridge was used (by one or more officers, in effort to identify total number of possible darts and contacts)

#### **Quality Improvement**

##### **Associated NEMSIS Protocol(s) (eProtocol.01)** (*for additional information, go to [www.nemsis.org](http://www.nemsis.org)*)

- 9914203 – Injury - Conducted Electrical Weapon (e.g., Taser)

##### **Key Documentation Elements**

- If darts removed, document the removal location in the patient care report
- Physical exam trauma findings
- Cardiac rhythm and changes
- Neurologic status assessment findings