

Bayfield-Ashland Counties EMS TOXINS / ENVIRONMENTAL Chemical Exposure	EC-3 CONDUCTED ELECTRICAL WEAPON INJURY (TASER®)
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SYMPTOMS:

Patient who has been tased.

ASSESSMENT and TREATMENT

ALL LEVELS

1. Assure scene safety.
2. Make sure patient is appropriately secured with assistance of law enforcement.
3. Perform primary and secondary assessment.
 - a. Evaluate patient for evidence of hyper agitated state manifested by varied combination of agitation, and or delirium, reduced pain sensitivity, elevated temperature, tachycardia, persistent struggling or hallucinosis.
 - b. Thoroughly assess for trauma.
 - c. Consider requesting ALS for delivery of behavioral control medications if patient is struggling against physical devices and may harm themselves or others.
4. Make sure cartridge has been removed from weapon.
5. Remove barbed darts **EXCEPT** from sensitive areas (head, neck, hands, feet or genitals).
6. Treat medical and traumatic injury.

EMT-O

7. Consider using ECG monitoring.

INT-R

8. Interpret ECG.

CONSIDERATIONS:

- **EMS providers who respond for a conducted electrical weapon patient should NOT perform a “medical clearance” for law enforcement.**
- Conducted electrical weapon can be discharged in three fashions:
 - By direct application of weapon without the use of darts
 - By a single dart combined with direct application of weapon
 - By two darts fired from a distance up to 35 feet
- The device delivers 19 pulses per second with an average current per pulse of 2.1 milliamps which – in combination with toxins or drugs, patients underlying diseases, excessive physical exertion, and trauma – may precipitate arrhythmias.
- 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.