

HEALTHEAST MEDICAL TRANSPORTATION
MEDICAL OPERATIONS MANUAL

CP 9.13 Crime Scenes and Prisoner Transport

Title: Crime Scenes and Prisoner Transport
Effective Date: April, 1, 2015
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Standard: Patient Care and Transport
Policy: HealthEast Medical Transportation will take all reasonable precautions to preserve evidence at a suspected crime scene and transport prisoners in a safe and effective manner.

I. Purpose

- To describe special considerations and procedures for HEMT patient care providers when responding to calls involving crime scenes, evidence preservation, law enforcement tactical operations, or the presence of uncontrolled lethal weapons.
- To reduce risks to crew members involved at crime scenes, caring for patients who are crime victims or suspects, or transporting incarcerated or in-custody patients.
- To reinforce the importance of preserving evidence at a crime scene while providing appropriate patient care.

II. Definitions

None

III. Procedure

A. Crime and Tactical Scenes

1. Report to and coordinate with the scene Incident Command if established. Communicate at regular intervals and update any changes in your activity or assignments to HEMT dispatch.
2. If a law enforcement tactical team is conducting operations, stage out of site at a safe distance or in the designated staging area until specifically requested to enter inside the control perimeter to provide patient care.
3. Enter any known or potential crime or tactical scene in a manner that attempts to minimize the disruption of possible evidence.
 - Avoid driving into and across areas that may contain evidence
 - Attempt to enter and exit the scene using the same walking or driving routes
 - Avoid using obvious or natural routes of approach that persons involved in a crime are likely to have used and do not step on tracks made by other persons.
4. Only the minimum number of EMS responders necessary should approach any victim needing assessment and care. Keep non-essential personnel away.
5. Request that victims located in unsecured areas be brought out to safe and secured areas to receive patient care.

B. Handling Evidence and Weapons

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1. For an unresponsive crime suspect or victim, carefully check for signs of life. Any moving or disturbing of the victim, their clothing, or articles in the vicinity, should be done in a manner that preserves potential evidence. If death is established, carefully step away from the scene.
 2. Proceed with resuscitation efforts if the victim appears viable. Leave disposable and discarded medical items and their packaging in place at the scene.
 3. Potential evidence, weapons, or items used in a crime should be touched and moved as little as possible, and then only with a gloved hand. Document anything that was moved or touched by your EMS crew.
 4. If exposure of the patient is needed, avoid cutting clothing through gunshot markings, stab holes, or other evidence. Law enforcement investigators will want any removed clothing placed in paper bags and may place paper bags over the victim's hands, if feasible, when transported from the scene.
 5. If a patient possessing any type of weapon is uncooperative or threatening, handle this situation the same as if the patient is refusing medical care. Immediately withdraw from the scene and re-engage only after law enforcement determines it is safe to do so.
 6. All items discovered during assessment that can be used as weapons should be removed and secured before beginning transport.
 7. The only exception to transporting a weapon in an ambulance is a weapon in the possession of a conscious and alert law enforcement officer who is the patient or who is accompanying the crew and patient during the transport.
 8. If a weapon is discovered after an ambulance begins transport, stop the vehicle and request law enforcement to assist in removing and securing the item.
- C. Combative Patient and Prisoner Transports
1. Before engaging in the care or transport of any patient who may be a safety risk to EMS, request that the patient be searched and cleared of any weapons by law enforcement.
 2. When transporting a prisoner or uncooperative patient who poses a safety risk, a restraint method should be used for the safety of the crew and patient and to preclude the patient from interfering with the safe operation of the vehicle.
 3. If a patient restraint system fails during transport, the HEMT provider must immediately notify the driver and proceed as follows:
 - Bring the vehicle to a safe stop and resume transport only when the patient is adequately controlled.
 4. Avoid transporting a prisoner under the following circumstances:
 - The patient cannot be adequately restrained to ensure the safety of all transport personnel.
 - The patient is unsafe for transport without the attendance of a guard or law enforcement official and such personnel are not available to make the transport with the crew.
 5. Any patient who is to remain in law enforcement applied restraints must be accompanied by a law enforcement officer or guard. Having an officer follow immediately behind the ambulance is an acceptable procedure if the transporting providers agree that this is a safe option.
 6. Any HEMT patient care provider may refuse to transport a prisoner or dangerous patient under the following circumstances:

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- The patient cannot be adequately restrained to ensure the safety of all personnel.
 - If the patient is unsafe for transport without the attendance of a guard or law enforcement official and such personnel are not available to make the transport.
7. A patient in police custody maintains the right of self-determination for medical care decisions, including against medical advice refusals, and must be treated in accordance with applicable consent and refusal policy.

IV. **Documentation**

- Document in the patient care report all provider actions at any crime or tactical scene as well as observations of circumstances and items that are potential evidence. Do not draw or record conclusions based on second hand information.
- Document in the Patient Care Narrative any relevant spontaneous statements made by the patient by using exact quotations whenever possible.
- Whenever a voluntary written statement is provided to law enforcement, a copy should be obtained and provided to a Supervisor.
- Complete the “Restraint” intervention in the patient care report whenever physical restraints of any type are deployed for any patient.

Previous Versions: