
Purpose

This policy recognizes that law enforcement officers become involved with medical emergencies involving citizens and visitors of our community and establishes appropriate training and response for such situations.

Policy

It is the policy of the Bemidji Police Dept. to respond to all medical emergencies that are broadcast by dispatch. The sergeant or officer in charge (OIC) may determine officer response for NON-emergency calls based on all available information and availability.

A. RESPONDING OFFICER RESPONSIBILITIES

- a. Whenever practicable, officers should take appropriate steps to provide initial medical aid in accordance with their training and current certification levels. This should be done for those in need of immediate care and only when the officers can safely do so. Officers should follow universal precautions when providing medical aid, such as wearing gloves, using a barrier or bag device to perform rescue breathing and avoiding contact with bodily fluids, consistent with the exposure control plan.
- b. When applicable, Officers should relay information to other EMS responders regarding:
 - i. Any scene hazards or unique response issues
 - ii. Signs and symptoms of the person in need of care.
 - iii. Any changes in the condition of the person while awaiting EMS.
 - iv. Officers will defer patient care to Emergency Medical Technicians upon their arrival.
 - v. Officers will make a determination if a crime has occurred and take appropriate investigative measures.

B. TRANSPORTING ILL OR INJURED PEOPLE

- a. Except in extraordinary cases where alternatives are not reasonably available, officers should not transport persons who are unconscious, who have serious injuries or who may be seriously ill. EMS personnel should be called to handle patient transportation.
- b. An officer should accompany any person during transport in an ambulance when requested by EMS personnel, when it reasonably appears necessary to provide security, when it is necessary for investigative purposes or when so directed by a supervisor.
- c. Officers should not provide emergency escort for medical transport or civilian vehicles.

C. SICK OR INJURED ARRESTEE

- a. If an officer knows that a person who is in their custody requires EMS care for injuries or excessive alcohol consumption they should be transported by the officer to a medical facility for treatment prior to being booked into the jail.
- b. Arrestees who appear to have a serious medical issue should be transported by ambulance. Officers should search any person who is in custody before releasing that person to EMS for transport.
- c. Officers shall not transport an arrestee to a hospital without a supervisor's approval.

D. AIR AMBULANCE

- a. An air ambulance may be appropriate when there are victims with life-threatening injuries or who require specialized treatment (e.g., gunshot wounds, burns, obstetrical cases), and distance or other known delays will affect the EMS response.
- b. Generally, when on-scene, EMS personnel will be responsible for determining whether an air ambulance response should be requested. However, officers on scene may make the decision prior to EMS arrival based on their observations and training.
- c. When an Air ambulance is summoned the officer shall;
 - i. Designate the landing zone and size
 - ii. Maintain security of that area with appropriate personnel
 - iii. Establish communication with flight personnel.
- d. Officers should follow these cautions when near an air ambulance:
 - i. Never approach the aircraft until signaled by the flight crew.
 - ii. Always approach the aircraft from the front.
 - iii. Avoid the aircraft's tail rotor area.
 - iv. Wear eye protection during landing and take-off.
 - v. Do not carry or hold items, such as IV bags, above the head.

E. AUTOMATED EXTERNAL DEFIBRILLATOR (AED) USE

- a. Officers who are issued AEDs for use in police vehicles should check the AED at the beginning of the shift to ensure it is properly charged and functioning. Any AED that is not functioning properly will be taken out of service and reported to a shift supervisor.
- b. Officers are expected to utilize the AED as trained during medical emergencies involving cardiac arrest.
- c. Following use of an AED, the device shall be cleaned and/or decontaminated as required. The electrodes and/or pads will be replaced as recommended by the AED manufacturer. Replacement pads should be obtained from the responding ambulance service.

F. OPIOID OVERDOSE MEDICATION

- a. Only officers who receive training in the recognition of signs of opiate overdose and the use of opiate antagonists may administer opioid overdose medication. Officers may administer opioid overdose medication in accordance with protocol

specified by the Bemidji Police Department's assigned medical director for use by the officer (Minn. Stat. § 151.37 subd. 12. (2); Minn. Stat. § 604A.04).

- b. Officers who are qualified to administer opioid overdose medication, such as naloxone, should handle, store and administer the medication consistent with their training. Officers should check the medication and associated administration equipment at the beginning of their shift to ensure they are serviceable and not expired. Any expired medication or unserviceable equipment should be removed from service and given to the shift supervisor.

G. TOURNIQUET USE

- a. Only officers who receive training in the use and application of tourniquets in accordance with protocol specified by the Bemidji Police Department's assigned medical director may utilize them in medical situations.

H. REPORTING

- a. An officer who responds to an emergency medical where an AED, Opioid overdose medication or a tourniquet is used will complete an incident report detailing the items use. If there is an indication that a crime has occurred or the injury is a result of the use of force by an officer an incident report must be completed along with appropriate forms.

I. TRAINING:

- a. All Bemidji Police Officers will receive training in basic first aid, Cardiopulmonary Resuscitation (CPR), Automated External Defibrillator (AED), Opioid Overdose Medication and Tourniquets. Officers must maintain certifications as required.

Reference or Revision Date(s):

A. Bemidji Police Department's assigned medical director – Dr. Corser, Sanford Health

B. REVISION DATE(S):