

DEKALB POLICE DEPARTMENT

Subject: **Assisting in Emergency Medical Calls**

Policy #: **405.1**

Effective Since: 8-21-03

Originally Issued As: General Order # 42 of 2-17-94

Revision Effective: 1-1-19

FTO Training Task: # 35

Reference Material: NA

ILEAP Standards Covered: PER.09.02

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PURPOSE: Because of the probability of police units being mobile and present in various areas of the community, it is likely that a police officer could be on the scene of an emergency medical call as a first responder before paramedics arrive. It is the purpose of this policy to establish general guidelines for procedures in assisting at emergency medical calls.

POLICY: Protection of human life is the most important function of a police officer. Because valuable time is often saved by police officers arriving as first responders prior to paramedic arrival, a greater likelihood exists that a victim will survive a life-threatening situation. To this end, it is the policy of the department to have its officers render assistance in life-threatening situations until relieved by paramedic units.

DEFINITIONS:

Emergency medical call: any medical situation that requires professional medical assistance.

AED: Automated external defibrillator for shocking and resuscitating victims of cardiac arrest.

PROCEDURE:

- A. A telecommunicator, upon receiving a request for medical assistance, will determine the nature of the emergency and if the emergency is life-threatening.
 - B. A telecommunicator will dispatch a police unit if the medical emergency is life-threatening and immediate assistance may be necessary.
 - C. Upon receipt of a medical emergency dispatch, officers should: inform dispatch of an ETA; if another unit is closer, that unit should advise and respond; arrive safely by using appropriate driving and/or emergency driving techniques.
 - D. A medical kit is available for each squad car; officers are responsible to have the medical kit available and provide for its routine inspection and refilling of supplies.
 - E. Most squad car medical kits contain an AED. There are also AEDs located within the police department.
 - a. The department provides training for the use of an AED.
 - b. The department maintains the manufacturer's manuals for the use of an AED.
 - c. The AED's are inspected and tested at least annually by the Support or Patrol Commander or his designee.
- [ILEAP PER.09.02]
- F. Upon arrival, the officer should inform Communications as to the exact location of the incident or victim, and if necessary, recommend a response route and/or parking location for assisting paramedics in their arrival.
 - G. Officers should assess the situation and evaluate the condition of the victim(s) and relay this information to dispatch. (e.g., victim is breathing but unresponsive, victim is conscious and alert, victim has a cut on his arm but is otherwise fine, etc. Officers should be descriptive in their assessment but avoid vague or graphic terms, such as "he's not doing very good," or "he's bleeding like a stuck pig.")
 - H. Officers may use various information to assess the victim(s), including information from the victim, witnesses, or direct observations (e.g., large amounts of blood, obvious injuries, unconsciousness, etc.)
 - I. If the victim is not breathing and a pulse cannot be detected, CPR must be initiated as soon as possible. Advise dispatch when beginning CPR, so assistance can be expedited.
 - J. Officer should provide other emergency first aid as needed, such as placing bandages over bleeding wounds. Officers should not provide medical assistance that goes beyond the scope of first aid training.

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- K. Officers should use personal safety precautions, such as latex gloves, CPR masks, etc. to avoid the exchange of potentially harmful body fluids. See Policy 406.4, Bloodborne Pathogens Exposure Control.
- L. If the victim does not require CPR or other immediate assistance, officers can assist paramedics in their arrival by moving items out of the way, opening doors, directing traffic, etc.
- M. Officers should use standard care in protecting the scene from contamination or evidence removal if the scene involves the commission of a crime. See Policy 402.8 for Death Investigations and Notifications procedures.
- N. Upon arrival of and taking over the scene by paramedics, the officer can still be of assistance to the paramedics and/or perform other tasks such as comforting family members, obtaining information for an investigation, diverting onlookers, directing traffic, etc.
- O. Emergency transportation of the injured should be performed by paramedics, see Policy 405.2.

Policy originally issued 8 -21-03; this revision becomes effective on 1-1-19 by authority of the Chief of Police.

NOTE: This policy and procedure summarizes the department's position on this specific matter. This policy is for general direction and guidance primarily designed for use by the department's members. This policy is for internal use only and does not create or enlarge an officer's liability in any way. This policy shall not be construed as the creation of a higher standard of safety or care in an evidentiary sense, with respect to third party claims. Violations of this policy, if proven, can only form the basis of an internal departmental complaint and then only in a non-judicial administrative setting.