

**TITLE: INTERACTION WITH LAW ENFORCEMENT/EVIDENCE****POLICY STATEMENT:**

Often the EMT-B, EMT-I, EMT-P and Pre-hospital RN may arrive at the scene of a violent crime before the police arrive. This requires an understanding by the EMS provider of law enforcement in preserving, collecting and using evidence. Anything at the scene may provide valuable clues and evidence for the police. Although it is extremely important to assist police in preserving the scene, that action should never interfere with emergency treatment of serious injuries, as that is the EMS provider's first priority.

**GOAL/PURPOSE:**

To clarify the roles and responsibilities of the EMS provider at a crime scene and the interaction with law enforcement to assist in preservation of the scene.

**POLICY/PROCEDURE:**

- A. Arrival at the Scene
  1. Observe any individuals or vehicles in the area.
  2. If possible, park your vehicle so that other vehicle tracks will not be destroyed.
  3. When you leave, remember where you parked your vehicle for later crime scene reconstruction.
  4. Watch where you walk. Do not walk over vehicle tracks, footprints, etc.
  5. Do not track dirt or snow into the scene and do not walk through blood or other possible evidence at the scene.
  6. Do not touch anything unless absolutely necessary. If you do, remember where you touched, i.e., light switch, any article you had to move, etc.
  7. Do not move an article unless it is absolutely necessary. If, moved, do not attempt to put it back in its original position.
  8. Do not use ashtrays, bathroom, etc.
  9. Do not cut through ropes, bindings, etc.; however, if it is necessary, never cut through or untie knots.
  
- B. Treatment
  1. When you insert an airway or use resuscitation, inform the police. Resuscitative efforts can contribute to confusing elements for pathologists and law enforcement personnel if they are not informed. Some of these elements are:
    - a. Marks on external aspects of the body.
    - b. Fracture of ribs and/or sternum.
    - c. Spleen and liver laceration.
    - d. Alteration of airway.
    - e. Change in contents in the mouth.
  2. During treatment or patient exam, if you find a cartridge or any other evidence, leave it and notify law enforcement authorities.

3. In drug overdose cases, if you take medication bottles, remember where you obtained them. If you give them to medical personnel at the hospital, record who you gave them to and the time.
  4. Do not rinse or clean hands of the patient for it may disrupt certain evidence, i.e. gun powder, blood, dirt.
- C. Clothing
1. Do not tear or cut through bullet holes, knife wounds, etc.
  2. If you must cut clothing or remove clothing, be careful, as the slightest movement can destroy evidence such as paint, hair, fiber and gun powder, etc.
  3. If you recover clothing, do not put everything in one bag; put each item in a separate PAPER BAG; NEVER USE PLASTIC OR CELLOPHANE.
- D. Below is a partial list of items a law enforcement agency or crime lab might take as evidence from a crime scene:
1. Stains: blood and body fluids (saliva, semen, tears, perspiration, urine, human milk, pus)
  2. Fiber and textiles, clothing examination, glass.
  3. Gun powder particles, paints, narcotics.
  4. Tool mark comparison and identification with suspect tool.
  5. Restoration of obliterated data, explosive residue.
  6. Soil examination, fingernail scrapings.
  7. Comparative microscopy: firearms, tool marks, fingernail striations.
  8. Document examination in great detail.
- E. When Death is Obvious at the Scene.
1. If you are the first to arrive on a scene where death is obvious, insure that the police are en route to the scene.
  2. If you are the first to arrive on a scene where death is obvious and police have yet to arrive, keep everyone away from the area including family or friends.
  3. If police have yet to arrive and death is obvious at the scene which is inside a building, (i.e., house apartment) leave and protect the scene from the outside.
- F. Less Lethal Weapons (Tasers)
1. Only enter the scene when authorized by law enforcement personnel on scene
  2. Assess and treat any injuries or illness to victims as needed per appropriated protocol
  3. If asked to remove Taser probes by law enforcement:
    - a. NEVER remove a probe lodged in the eye. Transport the patient to a hospital with proper immobilization of the probe.
    - b. Probes lodged in the legs, arms, buttocks, hips, and thighs may be removed by quickly withdrawing the probe while holding the skin tight (per manufacturer's recommendation). Treat any bleeding as needed and cover with a bandage. Transport the patient to a hospital or follow the "Patient Right of Refusal" policy.
    - c. Probes lodged in the chest or abdomen may be removed if the chest and/or abdomen has no indication per assessment of

significant injury, i.e. pneumothorax or occult bleeding. If significant injury is suspected, treat per appropriate protocol and transport patient. If no significant injury is suspected, the probe may be removed by quickly withdrawing the probe while holding the skin tight (per manufacturer's recommendation). Treat any bleeding as needed and cover with a bandage. Transport the patient to a hospital or follow the "Patient Right of Refusal" policy.

- d. Probes lodged in the head (except the cheek), neck, throat, groin, or spine may only be removed after contact with Medical Control.
- e. Patients who are under the influence of stimulant drugs, i.e. Cocaine, Methamphetamine, etc., should be transported to an Emergency Department for evaluation.

G. Chemical Agents (Mace, OC, Pepper Spray)

- 1. Only enter the scene when authorized by law enforcement personnel on scene.
- 2. Assess and treat any injuries or illness to victims as needed per appropriated protocol
- 3. Treatment for the chemical agent should consist of flushing with copious amounts of water
- 4. Transport the patient to a hospital or follow the "Patient Right of Refusal" policy