

Maryland-National Capital Park Police Prince George's County Division





USE OF TASER				PROCEDURE NUMBER PG403.1
ELECTRONIC CONTROL DEVICES				
SECTION	DISTRIBUTION	EFFECT	IVE DATE	REVIEW DATE
Operational Procedures	A		09/21/18	05/01/21
PG403.1 "Use of Taser Electronic Control Devices," issued 08/14/09				
RELATED DIRECTIVES	REFERENCES AUT		AUTHORITY	
PG400.0, 1500.0, 1700.0	CALEA 1,17,22,41			S.R. Johnson
				Chief Stanley R. Johnson

I. PURPOSE

To establish departmental policy, procedures and guidelines regarding the use of the "TASER" electronic control devices (ECD).

NOTE: This Directive is for internal use only, and does not enlarge this Division's, the Commission's, or any officer's civil or criminal liability in any way. This Directive is not to be construed as the creation of a particular standard of safety or care in an evidentiary sense with respect to any complaint, demand for settlement, or other form of grievance or litigation. Violations of this directive, if substantiated, can only form the basis for Division administrative sanctions.

II. POLICY

It is the policy of the Maryland-National Capital Park Police to provide its officers with the tools and training that will reduce the potential for use of lethal force. The "TASER" is a less lethal use of force option - like the baton, OC spray, and empty hand (weaponless control) techniques. The "TASER" is another tool that can be used at the discretion of an authorized officer when the decision is made that the use of force is objectively reasonable under the circumstances. As with any use of force the officer shall be accountable to this agency for the use of the TASER.

It is Division policy that police officers will use only that force which is reasonably necessary to accomplish lawful objectives and effectively bring an incident under control while preventing serious injury to the officer or another person. Deployment of the TASER shall be in accordance with all other Division policies and training on the use of force. The TASER (ECD) is approved for authorized personnel in accordance with this policy and approved training.

III. DEFINITIONS

- A. **Active Aggression** A threat or overt act of an assault (through physical or verbal means), coupled with the present ability to carry out the threat or assault, which reasonably indicates that an assault or injury to any person is imminent.
- B. **Actively Resisting** When a subject uses physically evasive movements to defeat an officer's attempt to detain, control, or place them in custody which may create a potential risk of bodily harm to the officer, subject and/or other persons. These movements include, but are not limited to, pulling away from the officer, breaking officer's grip, bracing, tensing, pushing, assuming a balanced stance, and/or verbally signaling an intention to avoid or prevent being taken into, or retained in custody.
- C. **AFID** "Anti Felon Identification" system provides accountability for each use of the ECD device via the dispersal of small uniquely, coded tags every time the device is used in "probe" (a cartridge is discharged).
- D. **Discharge** The delivery of an electrical energy charge via the probes or a drive stun.
- E. **ECD** Electronic control device (TASER), is a conducted energy device. The ECD is a hand held unit that can be used in two modes:
 - 1. Probe Mode the utilization of nitrogen gas to propel two (2) probes attached to wires that may travel a maximum of thirty-five (35) feet (depending on the type of cartridge being used); and
 - 2. Drive stun Acting as a touch-stun system when the ECD is brought into immediate, or close proximity, contact with a subject's body, or clothing. Drive stun will result in pain compliance only and will not cause Neuromuscular Incapacitation (NMI).
- F. **Passive Resistance** Physical actions that do not prevent the officer's attempt to control, for example, a person who remains in a limp, prone position, passive demonstrators, etc.
- G. **Sensitive Areas** areas of a person's body to include areas such as the face, neck, groin, or mammary glands.

IV. PROCEDURES

A. **Authorized users**- Only those officers who have satisfactorily completed the required training, to include an individual exposure, shall be authorized to carry the TASER. Officers unable to complete ALL aspects of initial TASER training will not be authorized to carry the TASER. Officers failing to satisfactorily complete an annual TASER re-certification will not carry the TASER. Officers of the rank of Sergeant or below are issued Tasers and shall carry the Taser unless medically unable to do so.

B. Weapon Readiness -

- 1. The TASER will only be carried on your reaction side and in a department issued holster in a manner consistent with the department ECD training.
- 2. The TASER will be carried with both department-issued cartridges attached and the safety on so that it is available for immediate use.
- 3. In the event of a discharge, officers shall make notification to their immediate supervisor for the need of a replacement cartridge. All cartridges will be replaced consistent with departmental procedures and processes.
- 4. Officers shall carry only the division issued TASER. No personally owned TASER is allowed or authorized for use.

C. Storage

- 1. Care shall be taken in storing the TASER unit at the officer's residence. The TASER should be stored in a locked location away from children and minors.
- 1. The TASER and cartridges are subject to extreme cold and heat, therefore no TASER or cartridge will be stored in a motor vehicle.
- 2. Officers are to secure the TASER in a safe place when it is not in their possession.
- **3.** TASERS shall be secured in lockboxes when in temporary holding, detention or prisoner processing areas.

V. DEPLOYMENT

- A. The TASER may be deployed to safely effect the arrest and control of an active resistant individual or an individual who has used or threatened active aggression, violent or potentially violent subjects that are resisting arrest or lawful commands and there is a reasonable expectation that the officer or the offender would be injured if the actions continued.
- B. The TASER may be deployed when attempts to subdue and control the individual through conventional tactics (verbal commands, manual physical control) are ineffective.
- C. The TASER may be deployed when it would be unsafe for the officer(s) to approach close enough for physical contact and the subject is within range of the TASER (25 feet).
- D. The TASER may be deployed to attempt to gain control by physical force and/or to safely effect the arrest or detention of subjects attempting to evade arrest and who pose a danger to persons in the community should he/she successfully avoid the arrest.

E. When reasonable in light of all circumstances, officers will use verbal commands to gain the

- subject's compliance prior to discharging the TASER.
- **F.** When reasonable in light of all circumstances, the discharging officer shall announce loudly, "TASER, TASER, TASER" to the other officers on the scene, prior to discharging the TASER. This will let the officer involved know that the ECD is being deployed so it is not mistaken by sight or sound as a firearm discharge. **Only one officer shall activate the TASER against a person at any time.
- G. Center mass of the subject's back is the preferred target, when reasonably possible, and lower center mass (below the chest) for front shots. Center mass of the legs are also viable targets. The ECD will not be used to target the subject's groin, neck, face, hands, feet or anywhere on the head as this could result in serious injury.
- H. Once used against a subject, the ECD cartridge, wire leads, darts and the anti-felon identification (AFID) tag will be placed into the Property/Evidence Section as evidence prior to the end of shift. The Property/Evidence Section will maintain custody of this evidence until it is released to be destroyed by the officer.
- I. Absent exigent circumstances, the TASER will not be used in a "drive stun" mode unless it is in conjunction with a full cartridge deployment. It is important to note that when the TASER is used in the "drive stun" mode it is:
 - Primarily a pain compliance tool, due to a lack of probe spread
 - Minimally effective when compared to conventional cartridge type deployments
 - More likely to leave marks on the subject's skin
 - Subject to the same deployment use guidelines and restrictions as that of the Taser cartridge deployments.
- J. Upon firing the TASER, the discharging officer shall expose the subject the least number of times needed to accomplish the lawful objective or compliance.
- K. The discharging officer shall continue to give verbal commands while exposing a subject. The discharging officer should remain alert while additional officers handcuff and take the subject into custody.
- L. The subject will be secured as soon as practical while disabled by the TASER to minimize the number of deployment cycles. In determining the need for additional TASER cycles, officers must be aware that an exposed subject may not be able to respond to commands either during or immediately following exposure.

M. The TASER **shall not** be used:

- In any environment where an officer knows that potentially flammable, volatile, or explosive material is present, (including, but not limited to OC spray with volatile propellant, gasoline, natural gas or propane);
- In any environment where the subject's fall could reasonably result in death or

serious bodily injury such as a balcony, bleachers, or other high structures;

- In or near a body of water, deep enough where a prone individual could be drowned;
- Against children, the elderly or persons of very small stature, absent exigent circumstances;
- On women known to be pregnant, in order to prevent serious physical injury to the woman or fetus. (E.g. a woman in a drug induced rage, stabbing herself, or attempting to harm herself); and
- Against passive subjects.

***The intentional abuse or misuse of the TASER is prohibited.

- N. Absent exigent circumstances, the TASER **should not** be used in the following situations:
 - On a handcuffed/secured prisoner, unless the prisoner is actively resisting and exhibiting active aggression which cannot be controlled by less forceful means;
 - When the subject is operating a motor vehicle, or a fast moving non-motorized vehicle where the act of striking the individual with a TASER could cause a serious injury;
 - Subjects who are known by the officer to be physically ill;
 - Against subjects with known neuromuscular disorders such as muscular sclerosis, muscular dystrophy, or epilepsy if they are incapacitated by the aforementioned;
 - Subjects with known heart problems or equipped with a pacemaker;
 - The TASER will not be used against a passive subject.
- O. Officers should consider having Fire/Rescue personnel respond to any incident when the use of a TASER is probable or when a person exhibits signs of extreme uncontrolled agitation or hyperactivity.
- P. Officers authorized to carry the TASER will use it in accordance with divisional policies and training as set forth by the department. It is recommended that officers not draw or display the TASER except for approved training, "spark" testing, or unless officers reasonably believe that it may be necessary to use the TASER.
- Q. The TASER (ECD) will be used with consideration of the Use of Force Continuum and is placed between the use of soft empty-handed techniques (e.g. escorts) and personal weapons strikes (e.g. fists, knees, and elbows) use of Impact Weapons or the ASP Baton. The use of the TASER (ECD) is either to subdue a subject or gain control of the subject.

Our Use of Force Continuum will be:

- Presence
- Verbal Commands
- Empty hand techniques
- TASER ECD or O.C Spray
- Personal Weapons Strikes, Baton
- Deadly Force.

TASER (ECD) and OC Spray are considered to be on the same level as far as the Use of Force Continuum is concerned. Of course, tactical and situational considerations will determine which option the officer chooses to deploy.

*** The TASER ECD is considered a "less than lethal" weapon system. However, if an officer confronted by a suspect/assailant wielding or threatening the officer with a TASER, cannot reasonably and safely retreat from the scene, or if there are not sufficient backup/support officers present to reasonably and safely protect the officer from attack or injury after exposure, the officer may use reasonable force up to and including deadly force against the attacker.

VI. AFTERCARE / MEDICAL TREATMENT

- 1. All persons exposed to TASER activation will be transported to a medical facility for evaluation by a medical professional and treatment. The transporting officer shall obtain documentation of the evaluation.
- 2. Officers who deploy a TASER will continuously monitor the subject and will watch for any signs of medical distress.
- 3. Subjects exposed to the TASER will not be left down in a prone position. Nor will any subject be "hog tied". Officers will use a restraint technique that does not impairrespiration.
- Officers will verbally engage the subject to assist in assessing the medical condition of the subject. If medical distress is detected or suspected, emergency medical personnel will be immediately summoned.
- 5. Probes that strike any non-sensitive area of the primary target such as the center mass of the body and/or the legs, the probes, absent any unusual circumstances, can be safely removed in the field by a certified TASER user. Minimal first aid should include treating any puncture wound the individual may have. The officer who takes custody of the individual will monitor the puncture site(s) to ensure there is no significant bleeding.
- **6.** Officers **will** wear latex, or other protective gloves when removing the probes. Officers without the appropriate protective gloves WILL NOT remove the probes. Should an officer stick himself/herself with the probe accidentally after removal from a subject, the officer would then treat themselves the same as they would with any possible exposure to body fluids from an outside source. **TASER probes should be treated as a biohazard.**

- 7. Should probes penetrate sensitive areas such as the face, neck, head, groin region or mammary glands, medical treatment will be immediately sought. The subject will be transported by appropriate medical personnel for removal of the TASER probes at a medical facility.
- 8. Officers will advise medical personnel that arrestee has been subjected to a TASER activation, the approximate time of the activation, location of any probe penetration, and any known injuries from the incident.
- 9. Officers shall obtain a hospital discharge form from the attending physician before transporting any subject to a processing facility.

VII. REPORTING

- 1. Officers will request the response of a police supervisor or designee to the scene as soon as practical after the discharge of a TASER, including accidental discharges.
- 2. The Supervisor or designee will complete a Use of Force Report
- 3. The officer will provide information for the completion of the report to the appropriate supervisor. This must be completed in accordance with the department's Use of Force Policy.
- 4. The following information shall be provided in the report:
 - A description of the event
 - Type of TASER mode used
 - Number of TASER cycles or "drive stuns" used
 - Duration of TASER cycles
 - Duration between cycles
 - Approximate range at which the TASER was used
 - Number of dart hits and darts fired
 - Point of impact
 - Was the subject wearing heavy clothing?
 - Injuries from the TASER application
 - Medical treatment facility used
 - Person responsible for removing probes
 - Model/make and TASER number
 - Supervisor notified
- 5. Photographs will be taken of all puncture sites in the skin or of the skin area where the probe lodged into the subject's clothing
- 6. A property record will be completed and the probes shall be submitted in a protective package to the property clerk. The probes should be treated as a potential biohazard if they made contact with any subject.

7. TASERS discharged during appropriate training will not require completion of any report.

VIII. SUPERVISORY RESPONSIBILTIES

- 1. Supervisors or a designee will respond to every discharge, including accidental discharges, and will conduct an initial investigation of the TASER discharge. A Report of Investigation (ROI) shall be completed in accordance with policy concerning use of force.
- 2. Supervisors or designee will ensure that all reporting requirements are completed as soon as practical and that the appropriate notifications to Command Staff are completed.
- 3. Supervisors or a designee will ensure that discharged TASERS are submitted for data downloads to the TASER Coordinator or designee as soon as practical and included as part of the Report of Investigation.
- 4. Supervisors or a designee shall ensure that the cartridges are replaced and the TASER batteries checked after every discharge.
- 5. Supervisors or a designee will inspect each TASER monthly to ensure they are properly maintained and in working order. Deficiencies shall be documented and corrective action implemented by the supervisor, TASER coordinator or designee.

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