

## McHenry Western Lake County EMS System

### GUIDELINES FOR PATIENTS WITH CONCEALED WEAPONS

#### PURPOSE

The purpose of these guidelines is to outline common procedures for intervening with patients and/or their families who under the law may be permitted to carry a concealed weapon. The intent is to reduce the potential risk of injury to emergency responders, healthcare providers and the public. These guidelines are in place to mutually respect the rights of citizens who lawfully carry a concealed weapon as well as to provide safety for emergency responders and healthcare providers.

#### SCOPE

These guidelines are for use by MCWLEMS System provider agencies and healthcare facilities when caring for individuals who require medical intervention. These guidelines describe best practices for promoting the safety of the public and those caring for ill and or injured patients.

#### DANGEROUS WEAPONS DEFINED

***Dangerous Weapon*** means any instrument, device, or thing capable of inflicting death, and designed or specially adapted for use as a weapon, or possessed, carried or used as a weapon. In Illinois, statute defines dangerous weapon," Dangerous weapon" means any firearm- whether loaded or unloaded; any device designed as a weapon and capable of producing death or great bodily harm; any electric weapon.

#### **POLICY STATEMENT : Patients Transported via Emergency Responders to a Medical Facility**

- EMS should make every attempt to screen all patients for concealed weapons prior to transport to a medical facility.
- Patients with concealed weapons that could not be secured at their residence may have had them placed in a Lock Box by emergency personnel. It is preferred that the local law enforcement agency meets the EMS transport vehicle at the scene to secure the weapon. If a weapon is being transported with the patient to a medical facility , the medical facility will need to assume control of the locked weapon, when the patient is delivered
  1. While en route, emergency response personnel shall notify the receiving facility that a weapon is being transported in a Lock Box with the patient. Advise the receiving facility if the patient is or was uncooperative regarding his/her weapon.
  2. Facility security personnel shall meet the transport vehicle at the doors to take control of the weapon. Emergency response personnel shall hand over the Lock Box with Security tags in place.
  3. Medical facility and emergency response personnel shall document the transaction on the *Chain of Custody Form*.

4. Facility security personnel may give an empty replacement box to the Emergency responders if the medical facility is participating in an exchange program.

## **PATIENT SCENARIOS**

These guidelines will address the following scenarios in the prehospital and hospital setting:

- Conscious patients willing to relinquish a weapon.
- Conscious patients unwilling to relinquish a weapon.
- Patients with altered levels of consciousness.
- Family members and friends who have weapons and want to be with patients in Emergency Response Vehicles.
- Chain of custody transfer between emergency responders and medical facilities.

## **GENERAL GUIDELINES FOR ALL EMERGENCY RESPONDERS AND HEALTHCARE WORKERS**

Emergency responders and healthcare workers should anticipate that any patient may have a concealed weapon. The safety of emergency responders and healthcare providers is our most important priority. Emergency responders and healthcare providers should never approach an agitated, threatening, chemically impaired or disoriented patient who is or claims to be armed, no matter how ill the person seems. Law enforcement should be called to secure the scene and to disarm such individuals.

Emergency responders and healthcare providers should ask not only the patient, but any friends or family that would be transported with the patient if a conceal carry weapon is present. The following concepts apply to the discovery of a concealed weapon on a patient, and are to be considered throughout this document.

- **ALWAYS ASK A PATIENT IF THEY HAVE ANY WEAPONS ON THEIR PERSON.**
- Emergency responders and healthcare providers should always assume that all firearms are loaded.
- It is not the job of the EMT's or Paramedics to determine if the patient is carrying the weapon legally.
- Optimally weapons should be safely secured by the patient at their residence and not be transported with the patient in an emergency response vehicle.
- Patients with an altered level of consciousness, severe pain, or with difficulties in motor functions should not be encouraged to disarm themselves. An emergency responder or healthcare worker may need to obtain control of the weapon for the safety of responding personnel, the public and the patient. Caution should be used at all times when handling a weapon. Emergency responders and healthcare workers should not attempt to unload a firearm. Regardless of a person's familiarity with firearms, there is no way to know if the gun is in proper working order. (Patients carrying a firearm while being intoxicated are committing a criminal offense. )
- **When possible- Law enforcement should be notified immediately- prior to leaving the scene of an incident.**
- EMS agencies and healthcare facilities are encouraged to designate themselves as a weapons-free facility or a "No-carry zone." "No-carry" signage should be clearly posted in emergency response vehicles. Law enforcement shall be called if patients insist on carrying weapons in emergency vehicle, that is declared as a no-carry zones, because they are then violating the law.

- **Under no circumstances should an emergency responder or healthcare worker compromise his/her safety in regards to these guidelines. When in doubt about a patient with a weapon or the weapon itself, emergency responders and healthcare providers should contact local law enforcement for assistance.** Law enforcement officers will make the final decisions regarding disarming the patient and the weapon.
- It is recommended that emergency healthcare workers and facility safety/security personnel ask their local law enforcement agencies if they can receive education regarding basic firearm safety.
- Any person under the age of 21 carrying a handgun is in violation of the law. Emergency responders and healthcare workers should contact law enforcement for assistance.

## **PREHOSPITAL ACTIONS OF EMERGENCY MEDICAL SERVICES**

Prehospital emergency responders may discover a weapon on a patient at the scene while doing a hands-on assessment, or in some instances during a secondary assessment while en route to a hospital. Based on the possible scenarios previously listed, an emergency responder shall follow these steps when a weapon is discovered.

### **Conscious Patient Willing to Relinquish a Weapon.**

- 1, Patients who are alert and oriented and for whom the emergency response is occurring at their residence should be asked to leave their weapons in a secure location at home prior to transport. Patients can be told that EMS vehicles and most hospitals are “no-carry zones”
2. When the emergency response is occurring away from their home, the patient may relinquish their weapon to a law enforcement officer on scene if one is available or to another responsible party at the scene.
- 3, If a patient is not at their residence or if a law enforcement officer is not available, emergency response personnel should do the following:
  - A. Place or have the patient place the weapon into the “Lock Box.” The barrel of a firearm should be pointing in the direction that is indicated on the outside of the Lock Box/Bag.
  - B. Secure the Lock Box with designated Security Seals or similar numbered security seals and place the Box in a locked cabinet or locked exterior vehicle compartment for transport.
  - C. Complete and have the patient sign the *Chain of Custody Form (Attachment A)*.
  - D. Conduct a thorough secondary survey of the patient for a secondary weapon.
  - E. If additional weapons are found, begin again at step (A). If no additional weapons are found, load the patient into the vehicle and transport to an appropriate medical facility.
  - F. While en route, emergency response personnel shall notify the receiving hospital that a Lock Box /Bag weapon is being transported with the patient. Facility security personnel shall meet the transport vehicle at the doors to take control of the weapon. Emergency response personnel shall hand over the Lock Box/Bag with security tags in place.

- G. Medical facility and emergency response personnel shall document the transaction on the *Chain of Custody Form*.
- H. Facility security personnel shall give an empty replacement box to the emergency responders.

#### **Conscious Patient Unwilling to Relinquish a Weapon.**

- Emergency responders should approach an alert and oriented patient in calm discussion about the need to secure the weapon prior to transport. Simple explanations can be given including that these regional guidelines are in place.
- Patients that are conscious but have an altered mental status are considered dangerous because they are unable to make sound decisions, therefore they should be disarmed as soon as possible.
- If the patient continues to refuse to relinquish the weapon, emergency responders may immediately stop the assessment and refuse transporting to a medical facility if their individual protocols and SOG's allow them to do so.
- EMS Providers should be suspicious of ill or injured patients unwilling to relinquish weapons. Law enforcement may be called to intervene in the situation.
- If the situation becomes threatening, emergency responders should evacuate the scene to a secure place a safe distance away and notify law enforcement immediately.
- If emergency responders deem a situation "unsafe" at anytime throughout your contact with an individual, you may retreat to a safe place until law enforcement arrives.

#### **Patients with Altered Levels of Consciousness.**

- Emergency responders must **use extreme caution** when approaching patients with altered levels of consciousness.
- If a weapon is found on a conscious patient with an altered level of consciousness, emergency responders should not attempt to have the patient hand over the weapon on their own. Law enforcement should be called to assist in disarming these patients. If a weapon is removed by a law enforcement officer, the officer will then take custody of the weapon.
- If the patient is unconscious and requires emergent care but law enforcement is not on the scene, EMS personnel will need to carefully separate the weapon from the patient prior to transport. In a perfect situation a firearm should be removed from the patient while still in the holster. If removing the holster and weapon together jeopardizes the safety of the patient or emergency response personnel, or it is physically impossible to remove the holster and firearm together, the weapon may be removed without the holster. Once removed, emergency response personnel shall:
  1. Handle all weapons carefully
  2. Place the weapon or weapon-in-the-holster into the Lock Box.
  3. Secure the Lock Box with Security Seals or similar numbered security seal and place the Box in the locked drug cabinet or locked exterior vehicle compartment for transport.
  4. Complete the *Chain of Custody Form*.
  5. Conduct a thorough secondary exam for a secondary weapon.
  6. If additional weapons are found and removed, begin again at step (1). If no additional weapons are found, load the patient into the vehicle and transport to an appropriate medical facility.

7. While en route, emergency response personnel shall notify the receiving facility that a Lock Box weapon is being transported with the patient.
8. Ideally, facility security personnel, or designated hospital staff shall meet the transport vehicle at the doors to take control of the weapon. Emergency response personnel shall hand over the Lock Box with security tags in place.
9. Medical facility and emergency response personnel shall document the transaction on the *Chain of Custody Form*.
10. Facility security personnel may give an empty replacement box to the emergency responders if the medical facility is participating in the an exchange program.

**Family members and friends who have weapons and want to be with patients in emergency response vehicles.**

- The decision to transport family members and/or friends with the patient solely rests with existing policies of individual emergency response agencies.
- Agencies that permit transport of family/friends with the patient shall:
  1. Ask the family member/friend to announce that they have a concealed weapon.
  2. Explain that no unsecured weapons may be transported in the emergency vehicle
- If a family member/friend discloses a concealed weapon AND the patient's condition is such that the emergency medical personnel deem it in the best interest of the patient to transport the family member/friend with them. the family member/friend should be instructed to leave the weapon in a secure place at home.
- If the family member/friend refuses, emergency response personnel have the ability to decline transport of the family member/friend with the patient. **No family member/friend should be transported with an unsecured weapon.**
- If the scene is not at the family member's/friend's residence, or circumstances prevent the weapon from being secured in the home:
  1. Have the family member/friend place the weapon into the "Lock Box." The barrel of a firearm should be pointing in the direction that is indicated on the outside of the Lock Box.
  2. Secure the Lock Box with Security Seals or similar numbered security seal and place the Box in the locked drug cabinet or locked exterior vehicle compartment for transport.
  3. Complete and have the family member/friend sign the *Chain of Custody Form*.
  4. While en route, emergency response personnel shall notify the receiving facility that a weapon is being transported in a Lock Box with the patient.
  5. Ideally, facility security personnel shall meet the transport vehicle at the doors to take control of the weapon. Emergency response personnel shall hand over the Lock Box with coded snap locks in place.
  6. Medical facility and emergency response personnel shall document the transaction on the *Chain of Custody Form*.
  7. Facility security personnel may give an empty replacement box to the emergency responders if the medical facility is participating in the exchange program.



DOB:

Proof of CCW Permit:

Patient ID #:

**ATTACHMENT "B"**

## **Flambeau Safe Shot Pistol Gun Case 14" Polymer Black**

Product #: 682841 Flambeau #: 6450SC

**\$7.19**

### **Technical Information**

**Material :** Hard Plastic

**External Dimensions:** 14" Long X 11" Wide X 3-1/4" High

**Weight:** 1.45 Pounds

**Number of Firearms:** 1 Handgun

**Type of Lock:** Sliding, Lockable Latches **FAA Approved:** No

**Notes:**

- Full Egg-Shell Foam Padding
- Cases are stackable
- Based on inside dimensions, this case will hold one handgun up to a 7" grip length and 12" overall length including barrel



**ATTACHMENT "C"**



ATTACHMENT "D"



**CAUTION:  
LOADED WEAPON**

