

# Region 5 Medical Control Authority Network Protocol Conducted Electrical Weapon Injury (e.g., TASER®) System Protocol

Initial Date:9/1/25

Revision Date:

Section 7. 30

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**Purpose:** To define the procedure of Conducted Electrical Weapon or “CEW” (e.g. Taser) probe removal by EMS and post-CEW medical evaluation and care.

**Indications:**

- a. EMS personnel may be requested to assess patients after CEW discharge, CEW deployment, and/or to remove Air Taser probes lodged in a patient's skin. Patients may be dazed or confused for several minutes post device deployment.

**Contraindications:**

- a. Do not attempt removal in currently combative patients.
- b. Do not attempt to remove probe from sensitive body areas (see notes).

**Procedures:**

- a. Follow **General Pre-Hospital Care Protocol**
  - i. For hyperactive delirium patients follow **Hyperactive Delirium Syndrome with Severe Agitation protocol**
  - ii. For Altered patients, follow the **Altered Mental Status Protocol**
  - iii. For patients injured before or after CEW deployment, follow **General Trauma Care Protocol**.
- b. Ensure sharps container is available. Ask law enforcement if the probe must remain in chain of custody and, if so, the probe should be placed in an empty sharps container.
- c. To remove the probe:
  - i. Utilize PPE
  - ii. Place hand in the form of a "V" around the taser probe in order to stabilize the surrounding skin and to keep loose skin from coming up with the probe.
  - iii. Firmly grasp the probe with your free hand and with one smooth, hard extraction, remove probe from patient's skin.
- d. Wound care should be performed with basic wound cleansing with saline or water irrigation and/or antiseptic (e.g., alcohol or chlorhexidine) followed by application of self- adhesive bandage (e.g., Band-Aid®).

MCA Name: Allegan MCA

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- e. Assess the patient for symptoms of arrhythmia (e.g. palpitations, chest pain, lightheadedness, etc). If symptoms of arrhythmia are present, obtain a 12-Lead EKG.
- f. Assess and document blood pressure, pulse rate, pulse oximetry, respiratory rate, lung sounds, and GCS. EKG should be obtained if abnormal heart rate or blood pressure are present.
- g. Asymptomatic patients do not require transport to the emergency department unless the probe is in a sensitive area patient is unable to tolerate probe removal, or patient requests to be evaluated in the ED.

**Notes:** "Sensitive body areas: Areas particularly susceptible to injury when exposed to CEW probes or activation, such as the subject's face, eyes, head, throat, axilla, chest/heart area, female breasts, groin, genitals, or known pre-existing injury areas (IACP)."