Title: Concealed Firearms
Policy: 304.00
Purpose: To provide guidelines when EMS encounters a patient who is incapacitated and is in possession of a found concealed weapon.

Policy:

When EMS encounters a patient who is incapacitated and is in possession of a found concealed weapon and unable to pass possession to a law enforcement officer before leaving the scene, follow these steps:

- If the weapon is holstered, **DO NOT** remove the weapon from the holster.
- If the weapon is not in a holster, **KEEP YOUR FINGER OUT OF THE TRIGGER GUARD!!!** A weapon could discharge if you manipulate the trigger.
- **DO NOT** manipulate the weapon in an attempt to render the weapon safe.
- **DO NOT** remove the magazine.
- **DO NOT** eject rounds.
- **DO NOT** pull the slide back/rotate cylinder to check if the weapon is unloaded/loaded. **All weapons should be considered loaded!**
- If the weapon is found in the holster attached to the patient, EMS crew members may have to cut the belt/strap or whatever device is retaining the holster. This is to prevent unsafe handling of the weapon.
- Keep the barrel of the weapon pointed at the ground at all times

Guidelines for securing the weapon:

- Bring the assigned box to the weapon and place the weapon inside the assigned box. Take the box containing the weapon to the ambulance cabinet which contains the narcotic box and **lock the cabinet.**
- Once at the receiving facility, **DO NOT** bring patient’s weapon inside the receiving facility.
- Security is to take possession of the weapon once at the receiving facility.
- Security will come inside the ambulance and take possession of the weapon from the locked cabinet.
- If enroute to a landing zone, notify dispatch to have law enforcement meet you at the landing zone. Law enforcement will take possession of the weapon from the narcotic cabinet.

***************Notify the on-duty supervisor when utilizing this SOG***************

Document in the patient’s PCR the following:

1. Location and description of weapon when found.
2. Reason the weapon was removed by EMS, i.e., Patient unconscious.
3. Explain removal/securing procedure.
4. Security officer’s/LEO name who took possession.
Accountability and Compliance:

1. Through the QA Process, the EMS Shift Training Officers will identify patient encounters involving concealed weapons and will be entered into a database. The report will be checked for compliance to this policy. The number of concealed weapon encounters (numerator) will be weighed against the number of encounters that were properly handled as outlined in this policy (denominator), equating to a percentage of compliance. The data will be presented to the EMS Division Chief and Medical Director quarterly in a report titled *Concealed Weapon Policy Compliance*. 

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