



GENERAL ORDERS: Chapter 8.1

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Conducted Energy Weapon

I. Purpose

To establish guidelines for the use and deployment of a conducted energy weapon (CEW) which is synonymous with the term Electronic Control Device (ECD) or by the trademark name, Taser.

II. Policy

The CEW is authorized for use by trained and certified officers as a less lethal force option to temporarily incapacitate a dangerous, violent or potentially violent person. It is not intended to replace tactics or training utilized to de-escalate a situation and avoid the use of force or to replace lethal force when such force is justified.

III. Definition

Conducted Energy Weapon – a handheld, battery operated device that delivers low electrical amperage to encourage compliance in contact drive stun mode or when probes are deployed, dominates the neuromuscular system causing involuntary muscle contractions to temporarily incapacitate a person.

IV. General

A. Authorization and equipment

1. Officers who have successfully completed the initial certification program and maintain their required certification are authorized to use the CEW.
2. Officers who are issued a device are responsible for its care and security.
 - a. Prior to starting a shift, officers shall perform an arc test to ensure the device is functioning properly.
 - b. If it is damaged or malfunctions, the officer will notify their supervisor and the designated CEW Coordinator for repair or replacement.

B. Carry

1. Officers will carry the device with the safety on, in an approved holster with a cartridge in place.
 - a. The spare cartridge shall be carried in the designated place.
2. The device will not be carried or mounted on the strong side (firearm side).

V. Deployment

A. Application

1. When appropriate, tactics such as OC spray and physical control should be considered and utilized prior to deployment.
2. The CEW may be used in the following ways:
 - a. Discharging a single use probe cartridge and/or,
 - b. Through a direct contact drive stun

3. The CEW may be used in situations such as, but not limited to:
 - a. When other attempts to control a person by conventional tactics have been, or will likely be, ineffective
 - b. Preventing a person from harming themselves or others
 - c. Overcoming aggressive, assaultive, or violent behavior
 - d. Detering an animal that appears to be a danger to the officer or the public

B. Use

1. When device use is imminent, officers should give the individual a verbal warning, if possible, and advise other officers on scene loudly and clearly "TASER."
 - a. Officers should have a back-up plan of action if the deployment fails to achieve its goal and if possible, have a secondary officer capable of providing immediate cover.
2. Officers shall target preferred zones, based on training, that will have the greatest chance of neuromuscular incapacitation and should:
 - a. Avoid intentionally targeting sensitive areas of the body, such as the head, throat, chest or area of the heart, genitals or known pre-existing injury areas without justification
 - b. Allow a reasonable amount of time to assess the effectiveness of a complete cycle and give the individual the opportunity to comply before deploying additional cycles
 - c. Avoid repeated or continuous exposures beyond 15 seconds absent reasonably perceived immediate threat and increased justification

C. Restrictions

1. Officers will not utilize the device for punitive purposes.
2. Unless there are compelling reasons to do so which can be clearly articulated, officers should refrain from using the device on a person who is:
 - a. Operating a motor vehicle or fleeing on foot
 - b. A young child, elderly, known to be pregnant or have heart problems
 - c. Known to be physically or mentally disabled
 - d. Handcuffed
 - e. In an area where serious injury or death may occur as a result of:
 - (1) A fall from an elevated position or,
 - (2) The ignition of a known potentially flammable material.
 - f. In a situation where deadly force is justified unless another officer is capable of providing deadly force to protect the officer or other individuals
 - g. Exhibiting passive resistance, unless there is an articulable reason why it would be unsafe to approach the individual, and other options are not practical

VI. Post deployment

A. Medical treatment

1. Individuals receiving a discharge from the CEW, through discharging a probe cartridge or a direct contact drive stun, will be evaluated by fire department EMS personnel.
 - a. Officers will cut the wires at a location nearest the probes prior to medical evaluation and allow EMS personnel to remove the probes.
 - b. Individuals with probes lodged in the head, neck or genital area will be transported by fire department EMS personnel to a medical facility to have the probes removed.

B. Disposal

1. Expended probes and cartridges should be retained and placed on property as evidence.
 - a. Expended probes are considered a biohazard and each probe shall be placed in a separate sharps container.

C. Reporting

1. When the CEW is used in drive stun mode or a cartridge is discharged, officers will follow [use of force reporting](#) requirements and notify a supervisor as soon as reasonably possible after the individual is secure.
 - a. In addition, officers will contact a CEW instructor to download data from the deployment.
2. When a CEW is pointed at an individual or used to display a warning arc with the intent to gain compliance from or exert control over the individual as a de-escalation technique, officers shall document it as a display of force incident and follow the use of force reporting requirements.
 - a. A supervisor interview and photographs are not required, but may be done at the supervisor's discretion.
 - b. A download of the data from a warning arc deployment is required.
3. Accidental discharges of the device during administrative handling will be reported on a memorandum and forwarded through the chain of command.