



MESA COUNTY EMS SYSTEM GUIDELINES FOR PATIENTS WITH CONCEALED CARRY FIREARMS

PURPOSE

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

SCOPE

These guidelines have been agreed to as policy by Mesa County ambulance service agencies and hospitals when caring for individuals who require medical intervention. These guidelines describe mutually agreed-upon best practices for promoting the safety of the public and those caring for ill or injured patients. Commissioned law enforcement officers who are responding to a pre-hospital scene or hospital in the line of duty are exempt from these guidelines.

BACKGROUND

Title 18: Colorado allows a person to carry a firearm in a vehicle if its use is for lawful protection of such person or another's person or property. [C.R.S. 18-12-105(2)] Colorado law also allows a person to possess a handgun in his or her own dwelling, or own place of business, or automobile. [C.R.S. 18-12-105(2)] Likewise, Colorado law allows for the carrying of a concealed weapon or handgun so long as one has a valid permit under Colorado law. [C.R.S. 18-12-105(2)] Local jurisdictions may not enact laws that restrict a person's ability to travel with a firearm. [C.R.S. 18-12-105.6] Moreover, federal law permits the nationwide carrying of concealed handguns by qualified current and retired law enforcement officers and amends the Gun Control Act of 1968 (Pub. L. 90-618, 82 Stat. 1213) to exempt qualified current and retired law enforcement officers from state and local laws prohibiting the carry of concealed firearms. Of concern is the potential for inadvertent harm to emergency responders and healthcare personnel as they care for these patients, most significantly the unintentional discharge of a firearm.

The Mesa County EMS System is a county-wide group of ambulance service agencies and acute care hospitals including emergency medical technicians, paramedics, physicians, nurses, and emergency department technicians. All licensed ambulance service agencies have declared their ambulances to be gun-free zones and all of the Emergency Departments in Mesa County have been declared gun-free zones. The licensed ambulance services and hospitals seek to provide the best possible care to citizens while providing a safe environment for emergency responders, healthcare providers, and their patients.

FIREARMS DEFINED

Firearm means any handgun, automatic revolver, pistol, rifle, shotgun, or other instrument or device capable or intended to be capable of discharging bullets, cartridges, or other explosive charges [C.R.S. 18-1-901(3)(h)]. In the case of explosives or a hazardous substance, the fire department/bomb squad/hazmat team may be called.

PATIENT SCENARIOS

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

- Conscious patients willing to relinquish a firearm
- Conscious patients unwilling to relinquish a firearm
- Patients with altered levels of consciousness
- Family members and friends who have firearms and want to be with patients in emergency response vehicles
- Chain of custody transfer between emergency responders and medical facilities

GENERAL GUIDELINES FOR ALL EMS AND HEALTHCARE WORKERS

EMS providers and healthcare workers should anticipate that any patient may have a concealed firearm. The safety of EMS providers and healthcare personnel is paramount. EMS providers and healthcare personnel should never approach a patient who appears threatening with a firearm, no matter how ill the person seems. Law enforcement shall be called to secure the scene to disarm threatening individuals.

Ideally patients will self-disclose that they have a firearm. However it is likely that at times patients may choose not to declare or may not be able to indicate that they have a firearm. The following concepts pertain to the discovery of a firearm on a patient, and are to be considered throughout this document.

- EMS providers and healthcare personnel should always assume that all firearms are loaded.
- Optimally, firearms should be safely secured by the patient at their residence and not be transported with the patient or family/friend in an emergency response vehicle or to a healthcare facility.
- Patients with an altered level of consciousness, severe pain, or with difficulties in motor control should not be encouraged to disarm themselves.
- An EMS provider or healthcare worker may need to obtain control of the firearm for the safety of responding personnel, the public and the patient. **Caution should be used at all times when handling a firearm.**
- EMS providers 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 under the influence of intoxicating liquor or of a controlled substance as defined in C.R.S. 18-18-102 are committing a

criminal offense. Law enforcement should be notified of such instances [C.R.S. 18-12-106 Prohibited Use Of Weapons]

- EMS agencies and healthcare facilities have the legal option to declare themselves as a “gun-free zone” or a “no-carry zone.” No-carry signage should be clearly posted in emergency squads and medical facilities. Law enforcement shall be called if patients insist on carrying firearm(s) in emergency vehicles or in hospitals that have declared themselves as no-carry zones.
- **Under no circumstances should an EMS provider or healthcare worker compromise his/her safety in regards to these guidelines. When in doubt about a patient with a firearm or the firearm itself, emergency responders and healthcare personnel should contact local law enforcement.** Law enforcement officers will make the decisions regarding disarming the patient and the firearm.
- It is recommended that EMS providers, emergency healthcare workers, and hospital security personnel partner with their local law enforcement agencies in obtaining education regarding basic firearm safety.

PREHOSPITAL ACTIONS OF EMERGENCY MEDICAL SERVICES

EMS providers may discover a firearm on a patient at the scene, or in some instances during a secondary survey while en route to a hospital. Based on the possible scenarios previously listed, an EMS provider shall adhere to the following steps when a firearm is discovered.

Conscious Patient Willing to Relinquish a Firearm.

- Patients who are alert and oriented and for whom the provision of EMS is occurring at their place of residence should be asked to leave their firearms in a secure location at home prior to transport. Patients should be told that Mesa County EMS vehicles and hospitals are no-carry zones.
- Patients for whom the provision of EMS is occurring away from their residence may relinquish their firearm to a law enforcement officer on scene if one is available.
- If a patient is not at their residence or if a law enforcement officer is not available, EMS personnel should do the following:
 - (1) Place or have the patient place the firearm 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 a numbered security seal and place the Lock Box in the locked drug cabinet or locked exterior vehicle compartment pointing away from the passenger compartment for transport.
 - (3) Complete and have the patient sign the *Chain of Custody Form (Attachment A)*.
 - (4) Conduct a thorough secondary survey.

- (5) While en route, EMS providers shall notify the receiving facility that a Lock Box firearm is being transported with the patient.
- (6) Hospital security personnel shall meet the transport vehicle at the doors to take control of the firearm. EMS providers shall hand over the Lock Box with coded security seal in place.
- (7) Hospital security and EMS providers shall document the transaction on the *Chain of Custody Form*.
- (8) Hospital security personnel shall give an empty replacement box to the EMS providers.
- (9) Hospital security may validate and unload a firearm in the Lock Box. Numbered seals should be replaced and documented on the *Chain of Custody Form* if the Lock Box is opened.

Conscious Patient Unwilling to Relinquish a Firearm.

- EMS providers should engage alert and oriented patients in calm discussion about the rationale to secure the firearm prior to transport. Patients should be told that ambulances are gun free zones and that these regional guidelines are in place.
- If the patient continues to refuse to relinquish the firearm, EMS providers should refrain from continuing the assessment and from transporting to a medical facility.
- EMS providers should be suspicious of ill or injured patients unwilling to relinquish firearms. Law enforcement shall be called to intervene in the situation.
- If the situation becomes threatening, EMS providers should evacuate the scene to a secure rendezvous point a safe distance away and notify law enforcement.

Patients with Altered Levels of Consciousness.

- EMS providers must use **extreme caution** when approaching patients with altered levels of consciousness.
- If a firearm is found on an awake patient with an altered level of consciousness, EMS providers should not attempt to have the patient hand over the firearm. EMS providers should not attempt to remove a firearm from a patient whose level of consciousness could precipitate use of that firearm against them. Law enforcement should be called to assist in disarming these patients. **If a firearm is removed by a law enforcement officer, the officer will maintain possession of the firearm.**
- If the patient is unconscious and requires emergent care but law enforcement is not on the scene, EMS providers will need to carefully separate the firearm from the patient prior to transport. Optimally a firearm should be removed from the patient while still in the holster. If removing the holster and firearm together jeopardizes the safety of the patient or EMS providers, or it is physically impossible to remove the holster and firearm together, the firearm may be removed without the holster. Once removed, EMS providers shall:
 - (1) Handle all firearms carefully.
 - (2) Place the firearm or firearm-in-the-holster into the Lock Box.

- (3) Secure the Lock Box with a numbered security seal and place the Box in the locked drug cabinet or locked exterior vehicle compartment pointing away from the passenger compartment for transport.
- (4) Complete the *Chain of Custody Form*.
- (5) Conduct a thorough secondary survey.
- (6) If additional firearms 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, EMS providers shall notify the receiving hospital that a Lock Box firearm is being transported with the patient
- (8) Hospital security personnel shall meet the transport vehicle at the doors to take control of the firearm. EMS providers shall hand over the Lock Box with the numbered seal in place.
- (9) Hospital and EMS providers shall document the transaction on the *Chain of Custody Form*.
- (10) Hospital security personnel shall give an empty replacement box to the EMS providers.

Family members and friends who have firearms 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 EMS agencies. Agencies that permit transport of family/friends with the patient shall:
 - Ask the family member/friend to declare if they have a concealed firearm.
 - Explain that ambulances are gun free zones and no unsecured firearms may be transported in the emergency vehicle.
 - If a family member/friend discloses a concealed firearm AND the patient's condition is such that the EMS providers 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 firearm in a secure place at the home. If the family member/friend refuses, EMS providers shall decline transport of the family member/friend with the patient. *No family member/friend should be transported with an unsecured firearm.*
 - If the scene is not at the family member's/friend's residence, or circumstances prevent the firearm from being secured in the home:
 - (1) Have the family member/friend place the firearm 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 a numbered security seal and place the Box in the locked drug cabinet or locked exterior vehicle compartment pointing away from the passenger compartment for transport.
 - (3) Complete and have the family member/friend sign the *Chain of Custody Form*.
 - (4) While en route, EMS providers shall notify the receiving hospital that a firearm is being transported in a Lock Box with the patient.
 - (5) Hospital security personnel shall meet the ambulance at the ambulance entrance doors to take control of the firearm. Emergency response personnel shall hand over the Lock Box with numbered seal in place.

- (6) Hospital security and EMS providers shall document the transaction on the *Chain of Custody Form*.
- (7) Facility security personnel shall give an empty replacement box to the EMS providers.

LOCK BOX

A regional exchange program is established under these guidelines such that all Mesa County ambulance service agencies and hospitals participating shall purchase similar safety boxes to secure firearms. The recommended new box is manufactured by *Flambeau*. The box name is the "Flambeau Safe Shot Pistol Gun Case, 14-inch Polymer Black," product number 682841 (*Attachment B*). The cost of these boxes ranges from approximately \$8-12 depending on the retailer. Each participating agency shall procure their own boxes. Each agency shall draw/paint a gun template with indelible medium on the outside of the Lock Boxes to indicate the direction of the barrel of a stored firearm. A gun template is attached with these guidelines (*Attachment C*).

These Lock Boxes shall be secured with Security Seals® locks (*Health Care Logistics Corporation*) or similar numbered security seal to document a chain of evidence. Emergency response agencies and hospitals shall procure their own locks. Each Lock Box shall have an outside label indicating "CAUTION: FIREARM (*Attachment D*)."

Lock Boxes containing firearms must be stored in a secure, locked storage compartment or cabinet by ambulance service agencies and healthcare facilities. The Lock Boxes will be exchanged at the interface of EMS providers and hospital security personnel when patients are delivered who had a firearm that could not be left at their residence. EMS providers shall hand-over a Lock Box secured with coded snap locks to a hospital security officer. In exchange the hospital security officer will provide an empty box back to the EMS providers. The intent is to minimize the handling of firearms by EMS providers and hospital staff. Additionally, at the discretion of the ambulance service provider, a family member/friend may be transported with the patient. If the family member/friend has a firearm and is transferred, the family member's/friend's firearm must also be secured and given to a hospital's security staff by EMS providers. As above, the hospital security officer and EMS providers shall exchange the Lock Box with the firearm for an empty Lock Box.

FOR MORE INFORMATION

For more information about these guidelines or about the Mesa County EMS System, contact (970) 255-5078 or Mike.Hill@mesacounty.us. In addition to the patient-specific guidelines described in this document, ambulance service agencies and hospitals are encouraged to establish no-carry policies for staff.