

**MEHLVILLE FIRE PROTECTION DISTRICT  
EMERGENCY MEDICAL SERVICES  
GUIDELINES FOR PREHOSPITAL EMERGENCY CARE**

**PAGE 1 OF 1**

**SUBJECT: 1100.13  
MISCELLANEOUS:  
TASER BARB REMOVAL**

**ORIGINAL ISSUE 6/10  
LATEST REVISION 6/10**

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- EMS personnel may be requested to assess patients after TASER deployment, and/or to remove TASER barbs lodged in someone's skin.
  - Be aware that secondary injuries may result from falls sustained after the device has been deployed. Subjects should not be dazed or confused following device deployment.
  - Confirm that the TASER has been shut off and the barb cartridge has been disconnected from the TASER device.
  - If the barb is located in the eye, ear, face, neck or genitals transport the patient to the hospital for barb removal.
  - Utilize appropriate PPE. Inform all caregivers of the intent to remove the contaminated sharp.
  - Remove one barb at a time. Stabilize the skin surrounding the TASER barb. Firmly grasp the barb and with one smooth hard jerk, remove barb from patient's skin.
  - Visually examine the barb tip to ensure it is fully intact. Document this on the run report. If any part of the barb remains in the subject, transport the patient to a medical facility for removal.
  - The TASER barb is considered a sharp and EMS personnel should take all precautions to avoid accidental needle sticks when removing barbs.
  - Provide wound care by cleansing the affected area with antiseptic and cover with an adhesive bandage
  - The patient should be transported to the hospital for evaluation if:
    - A barb is lodged in the areas mentioned above.
    - A barb is missing or is lodged in an area where it can't be removed in the field.
    - The patient has altered mental status or is not competent to refuse care. Many of these patients may have psychiatric conditions or toxic ingestions that require hospital evaluation.
    - The patient has been injured during the altercation with the police or from the Taser device. It is not uncommon for patients to become injured falling when the Taser device is activated.
    - The patient has chest pain.
    - The patient has any other medical complaints requiring evaluation.
  - The patient should get a tetanus booster if they have not had one in the last 5 years. This can be done within the next 72 hours.