

 <p style="text-align: center;"><b>DIVISION OF ADULT INSTITUTIONS</b></p> <p style="text-align: center;"><b>POLICY AND PROCEDURES</b></p>	<b>DAI Policy #:</b> 500.30.04	<b>Page</b> 1 of 3
	<b>Original Effective Date:</b> 09/01/97	<b>New Effective Date:</b> 12/01/16
	<b>Supersedes:</b> 500.30.04	<b>Dated:</b> 09/11/13
	<b>Administrator's Approval:</b> Jim Schwochert, Administrator	
<b>Required Posting or Restricted:</b>		
<input type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Electronic Control Devices		

## POLICY

The Division of Adult Institutions Health Services Units shall maintain the health and safety of inmate patients who may be subject to the use of electronic control devices. Health care staff shall not participate in the use of electronic control devices nor be called to witness the use of the electronic control devices.

## REFERENCES

DAI Policy 306.07.01 – Use of Force

DAI Policy 306.07.03 – Use of Force – DOC Approved Commercially Manufactured Tools

IACP National Law Enforcement Policy Center. Electronic Control Weapons/Model Policy, Revised April 2010

Study of Deaths following Electro Muscular Disruption: Interim Report, U.S. Department of Justice, Office of Justice Programs, National Institute of Justice. June 2008

## DEFINITIONS, ACRONYMS, AND FORMS

Advanced Care Provider (ACP) – Provider with prescriptive authority.

DOC – Department of Corrections

DOC-3050 – Medical Classification

Electronic Control Devices – Security equipment designated to stop, control or temporarily immobilize through the use of high voltage, low amperage electric shock.

HSU – Health Services Unit

WICS – Wisconsin Integrated Corrections System

## PROCEDURE

- I. **Evaluation for contraindications for the use of electronic control devices shall occur upon admission and/or change in medical status.**
  - A. An ACP shall complete the DOC-3050 – Medical Classification documenting the presence of a contraindication for the use of electronic control devices.
  - B. HSU staff shall enter the contraindication to electronic control devices into the WICS Medical Classification screen.

<b>DAI Policy #:</b> 500.30.04	<b>New Effective Date:</b> 12/01/16	<b>Page</b> 2 of 3
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Electronic Control Devices		

C. Security determines if the potential benefits of using the electronic control device outweigh the contraindications of its use.

**II. Post Use/Deployment of Electronic Control Devices**

- A. HSU staff shall not remove electronic control device probes.
- B. Security staff shall remove electronic control device probes.
- C. The probes shall be handled and disposed of as bio-hazardous waste.
- D. The inmate patient shall be treated at the local emergency facility if the electronic control device probes involve sensitive areas such as the eyes, face, head, breasts or genitals or if Security staff is having difficulty or concerns removing the probes.
- E. HSU staff shall be contacted for further evaluation or treatment if there are any concerns.

**Bureau of Health Services:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
James Greer, Director

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Ryan Holzmacher, MD, Medical Director

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Mary Muse, Nursing Director

**Administrator's Approval:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Jim Schwochert, Administrator

**DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES**

<b>Facility:</b> Name		
<b>Original Effective Date:</b>	<b>DAI Policy Number:</b> 500.30.04	<b>Page</b> 3 of 3
<b>New Effective Date:</b> 00/00/00	<b>Supersedes Number:</b>	<b>Dated:</b>
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Electronic Control Devices		
<b>Will Implement</b> <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
<b>Warden's/Center Superintendent's Approval:</b>		

**REFERENCES**

**DEFINITIONS, ACRONYMS, AND FORMS**

**FACILITY PROCEDURE**

- I.
  - A.
  - B.
    - 1.
    - 2.
      - a.
      - b.
      - c.
    - 3.
  - C.

II.

III.

**RESPONSIBILITY**

I. Staff

II. Inmate

III. Other