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October 15, 2009

Subject: TASER Training Bulletin 15.0 Regarding Medical Research Update and Revised Warnings

We are aware that the recent TASER Training Bulletin 15.0 and the revised warnings have caused some agencies and the media to misinterpret the message in the bulletin. We want to emphasize that TASER International is continually seeking to improve and refine our products and our training. Because of this, we occasionally modify recommendations and warnings to reflect a “best practices” approach for our customers to consider. These modifications take into account the most recent research data, customer feedback, and risk management knowledge. The recent release of our Training Bulletin should not be interpreted as a significant change in how our products should be used. The recommendations should be viewed as best practices that mitigate risk management issues resulting in more effective deployments while maximizing safety considerations such as avoiding face, neck, and chest/breast shots.

We have received feedback from our customers indicating that there are three frequently asked questions associated with this Training Bulletin. Each is addressed below:

Frequently Asked Questions:

1. Why was the preferred target zone changed?

The answer to this has less to do with safety and more to do with effective risk management for law enforcement agencies. As the training bulletin points out, arrest scenarios often involve individuals who are in crisis and are at a heightened risk of serious injury or death, regardless of actions taken by law enforcement. Also, Sudden Cardiac Arrest is a leading cause of death in the United States, and often occurs in an arrest scenario. Should Sudden Cardiac Arrest occur in an arrest situation involving a TASER[®] electronic control device (ECD) discharge to the chest area – plaintiff attorneys will likely file an excessive use of force claim against the law enforcement agency and officer and try to allege that the TASER ECD played a role in the arrest related death by causing ventricular fibrillation (VF), an arrhythmia that can be fatal without intervention. The available research does not support this and demonstrates that while it may not be possible to say that an ECD could never affect the heart under any circumstances, the risk of VF is extremely rare and would be rounded to near zero. However, law enforcement is left defending a lawsuit and disproving a negative, which is difficult to do. Independent [field results](#) indicate a risk factor of 0.25%¹ for serious injury from use of a TASER[®] brand ECD – while the risk of affecting the heart is much lower.

By simply lowering the preferred target zone by a few inches to lower center mass, the goal of achieving Neuro Muscular Incapacitation (NMI) can be achieved more effectively while also improving risk management. Additionally, it lessens the risk of shot placement into areas that are undesirable such as the head, face, neck, and female breast. Using this preferred targeting for all TASER ECD handhelds, as well as the new TASER XREP[™] projectile, provides a uniform targeting pattern for the customer, consistent with other less lethal weapons, including impact projectiles. Also, this preferred area results in increased effectiveness by allowing the bottom probe to affect the lower extremities such as the pelvic triangle and legs. This ability to achieve incapacitation while improving risk management is a best practice recommendation.

¹ (01/15/09) Bozeman W, II WH, Heck J, Graham D, Martin B, Winslow J., [Safety and Injury Profile of Conducted Electrical Weapons Used by Law Enforcement Officer Against Criminal Suspects](#). Annals of Emerg Med. 2009, doi:10.1016/j.annemergmed.2008.11.021.

2. **Can I still deploy my TASER ECD into the chest?**

Yes. Please note that the recommendation for **intentionally** targeting the preferred target zone is qualified by “**when possible**” and “**unless legally justified.**” These qualifiers address the reality that an arrest situation is fast moving and dynamic, and that exact shot placement in a preferred target zone is not always going to be possible. In addition, it may not even be possible to intentionally aim the ECD, but rather point and shoot. This recommendation also recognizes the reality that sometimes it is legally justified to aim for areas outside the preferred target zone, for example, if an officer is being attacked by a suspect wielding an edged weapon and the only shot is to the face or chest area.

It is important to note that the preferred target zone **does not** mean that other areas are prohibited. However, when the situation allows for sufficient time to intentionally aim the ECD and from a best practice standpoint, it is recommended to try, when possible, to aim for the preferred target areas shown in the new training bulletin for all the reasons stated above. While this may require some slight modification to traditional target acquisition by lowering the point of aim several inches to lower center mass, this will play an important role in reducing risk management issues and avoiding litigation.

3. **How does TASER’s targeting recommendation affect excessive use-of-force claims?**

While statistics from our customers and law enforcement risk pools show that the TASER ECD has played an important role in decreasing excessive use of force claims against law enforcement, TASER International is encouraging smart use of the TASER ECD with the targeting recommendations to promote best practices risk management and to avoid **any** excessive use of force claim or litigation against law enforcement.

Law enforcement officers are required to make split-second judgments in circumstances that are fast moving, tense, uncertain, and/or fluid, and the law recognizes that the amount of force necessary may vary from one particular situation to another. TASER International’s targeting recommendations do not alter an officer’s ability to assess and determine the most effective use of the TASER ECD. The recommendations simply provide guidance on physical factors that an officer may consider when deploying a TASER ECD -- much like consideration for pregnant women, persons in water, or persons on a high ledge.

In cases where an officer may deploy a TASER ECD outside of the preferred target areas, this action does not automatically constitute an act of excessive force. For example, the unintentional discharge of a TASER ECD probe to persons’ head when the officer did not intentionally try to hit the suspect’s head - did not support an excessive force violation. (*Wylie v. Overby*, Slip Copy, 2006 WL 1007643, E.D.Mich. April 14, 2006).

TASER International will continue to support our customers in legal proceedings, even in cases where probes strike outside of the preferred target zones.

Sincerely,

TASER International, Inc.



By: _____
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