

MADISON POLICE DEPARTMENT

TASER REPORT

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SUMMARY

In the summer of 2003, the Madison Police Department (MPD) first deployed Tasers as part of an experimental pilot program. The Taser program was one component of an effort to expand the non-lethal useof-force options available to Madison Police officers. The goal of this effort was to provide officers with additional options that would reduce injuries to officers and citizens, and would reduce officers' utilization of deadly force. The Taser program was expanded significantly in early 2004, with a resulting increase in Taser deployments. This report serves as a summary of MPD's Taser program to date. The report's key findings:

- MPD's deployment of the Taser has reduced injuries to officers and suspects resulting from use-of-force encounters.
- MPD's deployment of the Taser has reduced MPD officers' utilization of deadly force.
- The Taser has proven to be a safe and effective use-of-force tool.
- MPD officers are deploying the Taser in an appropriate manner.

HISTORY

In early 2000, the use-of-force tools/techniques available to Madison Police were limited to empty-hand techniques (including compliance holds, takedown techniques, and active countermeasures, like punches or kicks), OC spray, the baton, and firearms (officers' individual handguns or the AR-15 patrol rifle). The department recognized several things about those use-of-force options:

- They all relied on either causing pain or causing injury to be effective. Some subjects whether they be under the influence of alcohol or controlled substances, have mental health issues, or are simply extremely mentally focused—do not respond to pain and are extremely difficult for officers to control with traditional use-of-force tools/techniques.
- They offered officers no way to deliver non-deadly force from a safe distance.

• They were, for the most part, the same use-of-force options that officers in the 1960's (or earlier) had available.

As a result of these recognitions, the department began exploring other use-of-force options. In the summer of 2000, the department implemented a less-lethal projectile program (bean-bag rounds fired from 12 gauge shotguns). Initially, approximately 70 officers were trained in the use of impact projectiles, and shotguns designated as less-lethal weapons were deployed in certain squads and to District Stations. Other impact projectile weapons were also deployed with the Special Events Team. At the time we proposed implementing the less-lethal program, less-lethal technologies were not new, and had (in various forms) been in use across the nation for years. However, we felt that at that time technology had progressed to the point that it was appropriate for the department to move forward (the particular advancement was the development of the "super sock" round, offering a proper balance of effectiveness and safety).

Since the initial deployment of patrol less-lethal projectile weapons, the program has expanded to over 100 trained users and about 40 less-lethal shotguns. The less-lethal projectiles offer one significant advantage over traditional use-of-force tools/techniques: the ability to deliver non-deadly force from a safe distance. However, they do suffer from the same limitation as most other tools/techniques: they rely on causing pain or causing injury to be effective. As stated above, some subjects will not respond to pain, and are no more likely to respond to less-lethal projectiles than to other use-of-force tools/techniques. [Note: as of January 31, 2005, MPD officers have deployed less-lethal projectiles in 9 incidents; 5 of those deployments likely allowed officers to avoid the use of deadly force]

Since the time we began discussing the less-lethal projectile program, several of us on the department had been monitoring other developments in police use-of-force technology. One device I had researched and tracked was the M26 Advanced Taser, manufactured by Taser International. In October of 2002, I attended an M26 Taser Instructor certification course, to gain additional information about the Taser. The Taser, I learned, functions by causing electromuscular disruption (EMD). The electrical wave of the Taser mimics the wave that the human brain uses to communicate with the body; when the Taser wave is inserted into the body, it overrides these electrical impulses, creating a contraction of the body's muscles and preventing the brain from exercising voluntary control over the muscles. The result is incapacitation. My research suggested a number of advantages the Taser offered over traditional use-of-force tools/techniques:

- Because the Taser causes EMD, it does not rely on causing pain or causing injury to be effective. As such, it allows suspects to be controlled in most cases without injury; and it is effective against subjects who are not responsive to pain (subjects who have historically been extremely challenging and dangerous for officers to control).
- The Taser allows officers to control suspects from a safe distance (up to 21 feet).
- Traditional use-of-force tools/techniques exhibit a direct relationship between effectiveness and propensity for injury: techniques that are located near the bottom of the use of force continuum (such as escort holds, pain compliance, etc.) are very unlikely to cause injury, but are also very unlikely to be effective in controlling a subject who is non-compliant; techniques located higher on the continuum (baton strikes, active countermeasures, etc.) are more likely to be effective in gaining control of a non-compliant subject, but are also very likely to cause injury. The Taser, however, offers the best of both worlds. The Taser is extraordinarily effective in controlling resistive subjects, while also being extraordinarily safe (causing virtually no injury in the vast majority of cases, and causing no long-term injury or adverse effects).
- The Taser internally records the date and time each time it is deployed, and that data can be downloaded to a computer and reviewed. The data download will show the time and date for each time the Taser is deployed, as well as the duration of each deployment (how long the Taser current is delivered). Each Taser will store data for about 2,000 firings. Also, each air

cartridge has an individual serial number, and also contains about 20-40 AFID's (anti-felon identification). The AFID's are small confetti-like pieces of paper that are fired from the air cartridge when the Taser is deployed. Each AFID is printed with the unique serial number of the air cartridge it was fired from. This offers a higher degree of oversight and accountability than any other use-of-force tool.

- The electrical output of the Taser is well-below established safety standards, and has no long-term effects.
- Agencies that had deployed the Taser saw a decrease in injuries (to both officers and suspects), a reduction in officers' use of more intrusive use-of-force tools/techniques (such as baton strikes) and a reduction in officers' utilization of deadly force.

As a result of this research, in early 2003 Captain Snyder (then a Lieutenant) and I gave a presentation to the Management Team, recommending that the department move forward with deployment of the Taser. Chief Williams and the Management Team endorsed the concept, and the department acquired two M26 Advanced Tasers as a pilot program in mid-2003. Initially, about fifteen members of the Emergency Response Team were trained to use the M26, and were authorized to carry the Tasers with them on patrol. The department's first Taser deployment was on July 18, 2003. From July of 2003 to February of 2004, there were a total of eleven M26 Taser deployments.

In 2003, while we were moving forward with our pilot M26 Taser program, Taser International introduced the X26 Taser. The X26 offered a number of advantages over the M26. The primary advantage of the X26 was its small size; while the M26 is comparable in size to a Glock 17 handgun, the X26 is 60% smaller and lighter (this difference is critical, as officers trained in the M26 found it difficult to fit on their duty belts). Given the many advantages the X26 offered over the M26, we determined that any future MPD Taser purchases would be of the X26.

A presentation on the Taser was made to the Public Safety Review Board in May of 2003, and presentations were made to the Mayor's Capital Improvement Review Committee in both 2003 and 2004. A press conference unveiling the Taser to the public was held, and local media did a number of stories/articles on the Taser.

In January of 2004, the department ordered 31 X26 Tasers (and associated equipment) from Taser International, utilizing Block Grant funds. The equipment arrived in early-March (literally one day before the first user training was scheduled). In March and April of 2004, about 100 MPD sergeants and officers were trained as X26 Taser users. While Taser International recommends a four-hour training course for users, we provided a full eight-hour day of training. The training consisted of a classroom segment, followed by a written test. The remainder of the training consisted of hands-on training with the Tasers, including weapon retention instruction and a practical Taser deployment scenario. Some points of emphasis during the training:

- The preferred mode of control in any police/citizen encounter remains verbal dialog. While the Taser (and a few years earlier, the less lethal projectiles) offer alternatives not previously available, officers still need to attempt to gain control through verbal dialog in all but the most severe circumstances, and should not accelerate the transition from verbal dialog to physical force simply because of the Taser.
- While the Taser is generally an effective tool, in the field it will not always be effective, and officers need to be prepared to rely on other tools/techniques if necessary.
- Officers need to be aware of their environment prior to deploying the Taser (presence of flammables, other hazards, etc.).

• Officers should be aware of the symptoms of Excited Delirium, and seek medical attention/evaluation for those subjects once they are in custody.

Training was provided to operations sergeants, and a selected group of operations-assigned officers (drawing from the pool of officers who had been trained in the use of the less-lethal shotgun).

One additional training session was held in October of 2004, bringing the total number of MPD Taser trained personnel to 113.

The Tasers were deployed to the CCB and District Stations for checkout by Taser trained personnel. Throughout 2004, I was able to expand our Taser inventory somewhat, and the Task Force also purchased three Tasers (from Task Force funds). We currently have 40 X26's deployed as follows:

District	Tasers Deployed
CCB	12
NPD	8
SPD	8
WPD	9
DCNAGTF	3

ANALYSIS OF DEPLOYMENTS

As of January 31, 2005, MPD officers have deployed Tasers (M26 and X26) **92** times, in **83** incidents. In some instances, one suspect/incident was responsible for multiple deployments (for example, a probe shot where the probes missed followed by a drive-stun).

From the beginning of MPD's Taser program, all Taser reports have been routed to me. I have maintained a database of information regarding Taser deployments, and have analyzed a variety of factors related to MPD's Taser deployments:

Success Rate/Failures

Of the 92 Taser deployments, 71 (or 77%) were effective (meaning the weapon functioned and allowed the suspect to be taken into custody). Of the ineffective deployments, the causes were:

Failure Cause	Number	Percentage of Total Deployments
Probes Missed (one or both)	8	9%
Thick/Heavy Clothing	6	7%
Wires Broke During Fall or Handcuffing	3	3%
Drive-Stun Failure	2	2%
Weapon Malfunction	1	1%
Williamson Street Incident	1	1%

Note that in some of the "failure" cases the suspect still complied. For example, in several incidents the suspect did not receive any significant Taser current due to heavy clothing, but still chose to comply with no escalation in force use.

Recall that the Taser can be used in two modes, a probe deployment (an attached air cartridge fires two probes a distance of up to 21 feet), and the drive-stun mode (with the air cartridge removed, the weapon can deliver a contact stun). While the probes will deliver an incapacitating EMD effect (as described above), the drive-stun mode only results in a stun effect (painful stimulus). As a general rule, therefore, the drive-stun is not nearly as effective as a probe deployment. The drive-stun failure category includes incidents where officers delivered drive-stuns and the suspect did not respond. Some other drive-stun instances resulted in different responses and varying degrees of effectiveness, so quantifying these deployments was somewhat subjective.

A Taser malfunctioned during one field deployment. CPT officers were struggling with a subject, and an officer attempting to deliver a drive-stun to the subject noted that the Taser was not functioning (no spark at all). The subject was controlled after the Taser malfunction, and no injuries resulted.

Williamson Street Incident – On June 14, 2004, David Lopez, having just engaged in a violent confrontation, physically attached MPD Officer Deanna Reilly, stole an MPD squad (crashing it a short distance away), then physically attacked and attempted to disarm MPD Sergeant Karen Krahn, causing her to use deadly force (Lopez survived). A Taser was deployed early in the incident, but Lopez was not incapacitated. The failure of the Taser to incapacitate Lopez generated almost as much media attention as the officer-involved shooting did. To understand what I believe happened with the Lopez Taser deployment, two facts about the Taser must be recalled. First, as a general rule, a wider probe spread will lead to a more effective Taser deployment. Probe spreads of a few inches or less will generally result in a painful effect to the suspect, but not a full EMD incapacitating effect. The second issue to recall is that the Taser works by causing involuntary contraction of muscle tissue. As such, if the probes impact an area on the body that has a low volume of muscle mass, the Taser will be less effective.

As Lopez initially assaulted Officer Reilly, he was in very close proximity to her (a few feet away). Officer Reilly recalled seeing the laser aim point from her Taser on Lopez's upper sternum just prior to deployment. Officer Reilly stated that Lopez tensed up somewhat and screamed as a result of the Taser deployment, a reaction consistent with a close probe spread in an area of low muscle mass. Lopez turned and, in a rigid manner, walked a few steps away from Officer Reilly. From Officer Reilly's description, it is clear that Lopez was feeling an effect—albeit a limited one—from the Taser. However, Lopez was suddenly able to turn and resume his aggression towards Officer Reilly. It is not clear what allowed Lopez to regain full control of his body, but the most likely possibility is that one of the probes came loose. Testing of the Taser after the incident showed it to function properly. After the shooting, Lopez continued to resist and several drive-stuns were delivered to him. These were described as having some effect on Lopez.

While this incident was widely cited as a Taser "failure," it appears to have simply reflected two known limitations of the Taser (close probe spreads and low muscle mass hits). Also, Lopez's ability to resist on that evening was extraordinary; after crashing a squad car into a tree at high speed and being shot four times, he continued to resist violently.

Deadly Force Avoided

A review of MPD Taser deployments shows that in six cases it can fairly be said that the Taser deployment allowed officers to avoid having to utilize deadly force. Examples:

- An armed robbery suspect fled on foot from officers, then was surrounded but refused to surrender. The suspect indicated that he had a weapon, and reached into his waistband as if he was attempting to draw the weapon. The Taser was deployed and the suspect was taken into custody without injury to officers or the suspect. After the incident, the suspect told the officers he was trying to force them to shoot him and thanked them for not doing so.
- A suicidal subject sat on the edge of his bed, armed with a large butcher knife. He repeatedly told the officers that he was going to charge them with the knife and force them to shoot him. The Taser was deployed and the suspect was taken into custody without injury to officers or the suspect.
- Officers knocked on an apartment door, attempting to contact a sexual assault suspect. The suspect opened the door with a small knife in his hand. The suspect refused to drop the knife, and began to raise it to the officers. The Taser was deployed, and the suspect was taken into custody without injury to officers or the suspect.
- A suicidal subject in a hotel room armed himself with a box cutter. The subject refused to comply with officers, telling them, "you're going to have to kill me." The individual had

inflicted cuts to both of his wrists, and was bleeding as a result. The Taser was deployed, and the suspect was taken into custody without injury to the officers or further injury to the suspect.

Also, several of the instances in which Taser use was threatened or the Taser was displayed (but not deployed) involved armed subjects. Those incidents easily could have rapidly escalated to deadly force encounters without the presence of the Taser.

Other Notable Deployments

The first MPD Taser deployment, on July 18, 2003, demonstrated the benefits of the device. A subject needing to be taken into custody for a mental health commitment had barricaded himself in an East Side hotel room. The individual was extremely large (6'5", 265 pounds), and had a history of resisting officers. In fact, during a previous incident where officers had confronted the individual, it took 10 officers almost 10 minutes to subdue him (OC spray and baton strikes were both used with no effect). The individual and several officers sustained minor injuries during that encounter. The officers attempting to extract this subject from his hotel room were aware of this, and requested that I respond with a Taser (at that time I was the only one on MPD trained to use the Taser). After lengthy efforts to get the individual to exit voluntarily were not successful, we entered the room. The subject was in the small bathroom, crouching on the toilet, completely nude. He was shouting incoherently, and had flooded the bathtub, making the tile floor wet and slippery. I deployed the Taser, and the individual was taken into custody in a matter of seconds, with no injuries to the subject or officers. Had officers been forced to take him into custody with traditional police use-of-force tools/techniques, there can be little question that a high degree of force would have been required, and that injuries would have resulted.

Other Taser deployments have demonstrated the great benefit provided by the Taser. Examples:

- At about 2 a.m. on a weekend, officers responded to the 500 block of State Street for a large fight involving more than 100 subjects. The first officer who arrived noted that the disturbance was being instigated by a large individual (6'4", 235 pounds), who was actively fighting with two individuals. Numerous bystanders were hostile to the officers, and some physically attempted to prevent them from intervening. An officer deployed the Taser, which incapacitated the subject, allowing him to be taken into custody without injury. The Taser deployment also caused the rest of crowd to back away and cease their aggressive behavior. This incident would undoubtedly have required the use of much more intrusive use-of-force tools/techniques without the Taser, and injuries would likely have resulted.
- An officer responded to a two-car accident on the City's east side. The officer observed that two subjects from one of the vehicles were acting in a suspicious manner, and also determined that one of them had battered the driver of the other vehicle prior to police arrival. As the officer—still alone—attempted to frisk one of the suspects, the suspect (6', 200 pounds) turned and attempted to punch the officer. The officer backed away, and the suspect moved towards him in an aggressive manner. The officer deployed the Taser, and was able to take the suspect into custody. This incident—a single officer facing multiple, hostile suspects—would likely have resulted in injuries to the officer or the suspects without the Taser.
- An officer working the night shift was attempting to locate a motorcycle that was fleeing from him. The officer located the motorcycle and rider, laying in the roadway on a curve. As the officer pulled up, the rider got up and began lifting the cycle to continue his flight. The suspect refused to comply with the officer's directions, and a brief struggle ensued. The suspect broke free from the officer and again tried to flee on the motorcycle. The officer deployed his Taser, and the suspect was taken into custody. The Taser deployment in this incident prevented the risk to officers and citizens associated with vehicle pursuits.

- MPD officers were assisting an outside agency with a barricaded suicidal subject who was believed to be armed. The subject refused to surrender, and indicated that he was armed. During the incident, the subject also illuminated officers on the perimeter with a high-powered spotlight. The subject indicated that he had taken an overdose, then exited the residence, still refusing to comply with officers. An MPD sergeant deployed the Taser, and the subject was taken into custody without injuries. This deployment prevented the subject from re-entering his residence and arming himself, and allowed officers to provide emergency medical care to the subject.
- Officers responded to a robbery that occurred downtown. Six suspects had fled on foot, and officers engaged in multiple-foot pursuits. One officer chasing a suspect drew his Taser, and projected the laser aimpoint on the ground in front of the suspect. The suspect immediately stopped and complied. Elsewhere, two officers had flushed four of the suspects out of a wooded area. The four suspects fled towards perimeter officers, one of whom drew her Taser. One of the suspects recognized this, telling the others, "she's got a Taser." All four suspects stopped and complied at that point.
- Two night-shift officers contacted two subjects believed to be involved in drug activity in a bar parking lot. The driver quickly started the car and attempted to put it in gear. One of the officers leaned in the car and struggled with the suspect, attempting to prevent him from starting the car. Before the driver was able to put the car in gear, the Taser was deployed, preventing him from operating the car. The bar parking lot was crowded with people, and the Taser deployment prevented the suspect from posing a risk to the officers and bystanders.

Distance

The maximum range of the Taser probes is 21 feet (note that a new air cartridge manufactured by Taser International but not yet deployed by MPD has a range of 25 feet). The Taser probes/wires spread out as they travel away from the officer (the probes spread 1 foot for every 7 feet they travel), resulting in a wider spread between probes at longer distances (the bottom probe will impact 3 feet below the top one at the maximum range of 21 feet). As a result, it can be more difficult to ensure that both probes will impact the target at long distances. As might be expected, the majority of Taser deployments occurred at relatively close range (11 feet or less):

Distance	Deployments (92 total)
Drive-stun	31
1-3 feet	12
4-7 feet	20
8-11 feet	20
12-15 feet	6
16-21 feet	3

<u>Injuries</u>

The Taser fires two small metallic probes which, if they impact the body, create very small punctures (similar to mosquito bites). In many cases the probes don't impact the skin, and simply connect with the clothing. Only a small number of the incidents in which Tasers were deployed resulted in any injury (to either officers or suspects) beyond the minor punctures sometimes caused by the Taser probes:

Incidents in which suspects were injured (beyond probe punctures)	6
Suspect injuries requiring medical treatment	2
Incidents in which officers were injured	3
Officer injuries requiring medical treatment	1

Of the suspect injuries, two were due to the suspect falling as result of the Taser incapacitation (both resulted in minor injuries, one required medical attention and 7 sutures). Three of the suspects sustained minor scrapes struggling with officers or being handcuffed (none requiring medical attention). One suspect was shot with a firearm during the incident (requiring medical attention).

Of the officer injuries, one was a minor scrape caused by an officer falling during a foot pursuit (the Taser had been deployed prior to the foot pursuit but was ineffective, likely due to a probe falling out or wire breakage), no medical attention was required. Two officers sustained minor injuries during the incident in which the suspect was shot (not requiring medical attention). One officer sustained a dislocated shoulder in a struggle with a suspect after Taser deployment (the Taser was only marginally effective, due to heavy clothing), medical attention was required.

Time of Day

The majority of Taser deployments occurred on MPD's 2^{nd} and 3^{rd} shifts:

Shift	Deployments	Percentage
1 st	9	10%
2 nd	40	43%
3 rd	43	47%

While Taser-trained officers were distributed across patrol shifts fairly evenly, a number of neighborhood officers and CPT officers—all working primarily evening hours—were Taser trained. While this may have contributed to the disparity in Taser deployments between day hours and evening/night hours, it is likely that the difference simply reflects MPD staffing allocations, as well as the volume and nature of calls for service on the different shifts.

Subject Age

The majority of Taser deployments were against subjects between the age of 19 and 43. The youngest subject a Taser was deployed against was 14, the oldest was 60.

Age Range	Number of Subjects	Percentage *
14-18	7	8%
19-23	15	18%
24-28	17	20%
29-33	12	14%
34-38	13	16%
39-43	10	12%
44-48	5	6%
49-53	2	2%
54 +	2	2%

* Percentages are rounded, as a result they do not add up to 100

It is not clear if other use-of-force tools/techniques employed by MPD officers are applied to various age groups in a pattern similar to that of the Taser. However, a review of MPD arrest data (for 2003)—showing percentages of total MPD arrests by age—is relevant:

Age Range	Percentage of Total MPD Arrests
14-18	24%
19-23	34%
24-29	12%
30-34	7%
35-39	7%
40-44	7%
45-49	5%
50-54	3%
55-59	1%
60-64	Less than 1%
65 +	Less than 1%

While the utilization of the Taser against subjects in the 14-18 year-old age range has created some controversy locally, this data suggests that MPD officers exercise considerable restraint with respect to

deploying Tasers during arrests of subjects in that age range (accounting for 24% of arrests but only 8% of Taser deployments).

Race/Gender

The race and gender of the 83 subjects against whom the Taser was deployed:

Gender/Race	Deployments	Percentage
M/W	36	43%
M/B	30	36%
M/A	1	1%
M/H	5	6%
F/W	7	8%
F/B	4	5%

MPD arrest data (from 2003) shows that MPD arrest rates (by race) are comparable (arrest rates: white: 63%; black: 34%) to Taser deployment rates (by race).

Location

Taser deployments by MPD district:

District	Deployments	Percentage
East	12	13%
North	20	22%
Central	18	20%
South	16	17%
West	24	26%
Outside City*	2	2%

* One of these incidents was an MPD officer assisting an outside agency; one was an MPD pursuit that ended outside of the City.

For comparison, this data can be compared to MPD calls for service and violent crimes reported (by MPD District):

District	2003 Calls for Service (percentage of	2003 Violent Crimes
	MPD total)	(percentage of MPD total)
East	14%	13%
North	17%	15%
Central	28%	29%
South	15%	19%
West	23%	25%

When determining which officers to train in use of the Taser, consideration was given to district, so Taser trained personnel (in 2004) were split across districts fairly evenly. These numbers indicate that Taser deployments by geographic area are fairly consistent with overall demand for police services.

Criminal Charges

The 83 subjects who were taken into custody during incidents in which the Taser was deployed accounted for a total of 30 felony and 144 misdemeanor charges (as a result of the incidents). 13 of the subjects were taken into custody for a non-criminal reason (protective custody, mental health commitment, emergency detention, etc.).

Resulting Charges to Subject	Number	Percentage
Misdemeanor Charges Only	49	59%
Misdemeanor & Felony Charges	20	24%
Protective Custody, Emergency Detention, etc.	13	16%

*Resulting charges in one incident - where an MPD officer deployed the Taser while assisting another police agency - are unknown.

Weapons

Officers trained to use Tasers are clearly instructed that the Taser is not a substitute for deadly force. It would be inappropriate under MPD policy for an officer faced with a potential deadly force encounter to utilize a Taser. However, if another officer is present at a scene with the ability to immediately deliver deadly force, it would be appropriate for an officer to arm him or herself with a Taser (and deploy it, if appropriate). That being said, some of the suspects involved in Taser incidents were armed:

Number of armed suspects (actual Taser deployments)	6
Number of armed suspects (incidents where Taser was displayed or Taser use was threatened)	3

Taser Display Or Threatened Use

In Spring of 2004, when the Taser program was expanded, Taser-trained officers were instructed not only to forward all reports involving actual deployments of Tasers to me, but to also route reports where officers displayed or threatened to deploy a Taser in order to gain compliance from a suspect. In **47** instances, officers gained compliance from suspects by displaying or threatening to deploy the Taser. These suspects were taken into custody with no physical force being used, and with no injuries to officers or suspects. Notably, some of these instances involved suspects who refused to comply when confronted with firearms; only when the Taser was displayed did the suspect comply. Some suspects reported being aware of the Taser and its capabilities, and consciously choosing not to resist as a result.

Officers initially trained in the use of the Taser (in 2003) were not instructed to forward these reports to me, so it is likely that the total number of these cases is slightly higher.

Many of these instances involved suspects that were displaying behavior indicative of significant resistance. There can be little doubt that most of these instances would have resulted in physical confrontations without the presence of the Taser, and that at least some of these physical confrontations would have resulted in injuries to the suspect, officers, or both. Several of these incidents involved subjects who were armed; those easily could have escalated to deadly force encounters without the Taser's presence.

Citizen Complaints

The department has received no citizen complaints about any of the Taser deployments.

SUCCESS OF MPD TASER PROGRAM

At the outset of the MPD Taser program, our belief was that deploying the Taser with MPD officers would achieve two primary goals:

- A reduction in injuries to officers and suspects from use-of-force encounters.
- A reduction in officers' utilization of deadly force.

To fully understand the benefits of the Taser, a brief discussion of police use-of-force is in order. The purpose of police use-of-force is to gain control of a subject in pursuit of a legitimate law enforcement objective. Officers can use that degree of force that is reasonable and necessary under the circumstances. The U.S. Supreme Court has articulated three general factors that will be used to evaluate the reasonableness of a police use-of-force:

- The severity of the crime.
- Whether the suspect poses a threat to the safety of officers or citizens.
- Whether the suspect is actively resisting arrest or attempting to evade arrest.

The reasonableness of an officer's actions will be judged based on what information the officer knew at the time of the incident (not through 20/20 hindsight). Officers are not required to use the minimum amount of force in any given situation; the constitutional standard is reasonableness.

In Wisconsin, a force continuum serves as a framework for officers in making use-of-force decisions:

Mode Presence	<u>Tactic</u> Professional Presence	<u>Purpose</u> To present a visible display of authority
Dialog	Tactical Communication	To verbally persuade
Empty Hand Control	Escort Holds Compliance Holds OC Spray Passive Countermeasures [Taser] Active Countermeasures Incapacitating Techniques	To safely initiate contact To overcome passive resistance To overcome active resistance or its threat To decentralize To create dysfunction To cause the immediate, temporary cessation of violent behavior
Intermediate Weapon	Intermediate Weapons [Less Lethal Projectiles]	To impede a subject
Deadly Force	Firearm	To stop the threat

[Note that the State of Wisconsin does not currently incorporate the Taser or less lethal projectiles into the force continuum, they are reflected above as placed in the continuum under MPD policy.]

Officers are authorized to initially use the level and degree of force that is reasonably necessary to achieve control; it is not necessary to escalate step-by-step through the continuum. Tools/techniques located near the bottom of the continuum (tactical communication, escort holds, etc.) are very unlikely to cause injury, but are also very unlikely to gain control of a non-compliant subject. Tools/techniques located near the top of the continuum (the intermediate weapon—the baton; or active countermeasures—punches, kicks, forearm strikes or knee strikes) are more likely to gain control of a non-compliant subject, but are also much more likely to cause injury. So, tools/techniques that would be used as alternatives to the Taser are more likely to cause injury (indeed, if they are done properly, they will cause injury) than the Taser, but are less likely to be effective than the Taser (particularly when dealing with extremely resistive/violent subjects).

Injury reduction - As indicated above, use-of-force incidents involving the Taser resulted in very few injuries. There were 130 total use-of-force incidents involving Tasers (83 incidents involving actual deployments, and 47 where officers threatened to use or displayed the Taser). Given the alternative use-of-force tools/techniques (baton strikes, punches, kicks, etc.) officers would have employed in many of the incidents where the Taser was deployed, and the high propensity for those tools/techniques to cause injury, there is no question that both the number and severity of injuries (to both officers and suspects) would have been far higher but for the Taser.

Injury Type	Number	Percentage of Taser Incidents
Incidents in which suspects were injured	6	5%
Suspect injuries requiring medical treatment	2	2%
Incidents in which officers were injured	3	2%
Officer injuries requiring medical treatment	1	Less than 1%

National studies have consistently shown that police use-of-force encounters often result in injuries to officers and suspects. Comparing these figures to injury rates from MPD use-of-force encounters involving the Taser shows that the Taser does lead to a reduction in injuries to both officers and suspects:

	Percentage of MPD use-of-force incidents involving Taser	National Averages, all use-of-force incidents
Injuries to Officers	2%	10%
Injuries to Suspect	5%	38%

As part of the process of researching the Taser and proposing an MPD Taser program, MPD officer injuries (resulting from physical confrontations with suspects) were analyzed (by reviewing MPD worker's compensation forms). Comparing that data (from 2002) with similar data collected from 2004 also illustrates the benefit on overall MPD officer injuries since the Taser was deployed:

	2002	2004
Incidents where MPD officers were injured during physical confrontations with	90	68
suspects		
Missed work days by officers as a result of these injuries (worker's comp days)	29	26
Light duty days as a result of these injuries	54	25
Using average MPD officer salary, value of missed work time	\$24,714	\$15,899

This reduction cannot necessarily be correlated only to the Taser, but it does further indicate the benefit of the Taser. It is also important to note that Taser deployment was not expanded until Spring of 2004 (so for the first few months of the year, there were only a handful of Taser-trained officers and only two Tasers available for use), that only a limited number of officers are Taser trained, and that only a limited number of Tasers are available for checkout. Expanded deployment of the Taser would likely further reduce officer and suspect injuries.

Deadly Force Utilization – As indicated above, a number of incidents where the Taser was deployed allowed officers to avoid having to resort to the use of deadly force. Also, some of the incidents in which displaying or threatening to use the Taser resulted in compliance could have very easily escalated to deadly force encounters. As such, the Taser clearly has reduced MPD officers' utilization of deadly force.

TASER SAFETY

When we first researched and deployed Tasers in 2003, there was strong evidence demonstrating the Taser's safety. Since then, several new reports on Taser safety have been released. The most notable was conducted by the Department of Defense (Human Effects Center of Excellence). While the full report is not yet available, a summary has been released. The summary states:

[U]se of the Taser M26 and X26, as intended, will generally be effective in inducing the desired temporarily incapacitating effect without presenting a significant risk of unintended severe effects.

The summary also stated:

...increased use of the Taser M26 or the Taser X26 has decreased the overall injury rate of both police officers and suspects in conflict situations when compared to alternatives along the use-of-force continuum.

Another Taser safety study was recently published in a peer-reviewed cardiac physiology medical journal (Pacing and Clinical Electrophysiology), concluding that the X26 Taser has a wide margin of safety. The study concluded that 20 times the standard X26 output is required to induce ventricular fibrillation in a subject weighing 100 pounds. The safety margin increased with larger body sizes:

Body Weight (pounds)	X26 Safety Margin
66	15x
82	18x
108	22x
119	30x
183	36x
258	42x

The study also showed that heart rhythm and blood pressure remain unchanged during the Taser cycle. The study's conclusion stated:

This study confirmed the cardiac safety of an experimental NMI (Taser) device emulating the performance of commercially used devices. An NMI discharge that could induce VF (ventricular fibrillation) required 15-42 times the charge of the standard NMI discharge. Furthermore, this study demonstrated a safety index strongly correlated with increasing weight. In addition, the observation of the hemodynamic stability of the animals suggests that these devices may be safely applied multiple times if needed. Discharge levels output by fielded NMI devices have an extremely low probability of inducing VF.

Also, the Defence Scientific Advisory Council (United Kingdom), undertook an extensive research study into Taser safety. The study's conclusion, released in July of 2004: "The risk of life-threatening or serious injuries from the M26 Taser is very low."

Over the past year, however, a number of media outlets have questioned the safety of the Taser, suggesting that Taser deployments have been responsible for the deaths of a number of subjects. These media outlets—primarily The Arizona Republic (a daily newspaper in Phoenix, AZ)—have cited a number of cases where subjects died after Taser deployments (so called "Taser related" deaths). A close analysis of these cases, however, demonstrates the inaccuracy of the media implications. I reviewed 90 cases (mostly reported by The Arizona Republic) occurring between 1999 and 2005 involving the Taser and the eventual death of a suspect. That review showed:

Of the 90 cases:

- 89 involved significant physical exertion (fleeing or fighting) on the part of the suspect.
- In 41 out of the 51 cases for which information was available, the suspect had ingested controlled substances—usually cocaine, but also including PCP and methamphetamine prior to police contact (in 39 of the cases drug information was not available).
- In 54 out of the 59 cases for which information was available, there was a significant time delay between the application of the Taser and the suspect's death—sometimes up to a week (information was not available for 31 cases). This is a clear indication that the Taser did not contribute to these deaths (electricity is not stored in the body—if an electrical current is sufficient to cause ventricular fibrillation, it will do so immediately).
- Most involved violent struggles with police, in which other use-of-force tools/techniques (such as OC spray, baton strikes, beanbag rounds, and empty hand techniques) were utilized.

These cases were included as "Taser related" deaths:

- 2 subjects who were shot (with firearms) by police after Tasers were deployed unsuccessfully.
- 2 subjects who died from head injuries (1 from a fall after Taser deployment, 1 prior to police arrival).
- 1 subject who slit his wrist prior to police contact and died as a result.
- 1 subject who filled his home with natural gas prior to police contact—when the Taser was deployed the house exploded, killing the subject and injuring two officers.

What did the coroners/medical examiners in these 90 cases say?

- In 46 cases the cause of death was unknown, or the autopsy is unavailable. Most of these cases involved drug ingestion and/or a delay between Taser application and death.
- In 23 of the remaining 44 cases, the death was attributed to lethal drug consumption In 8 of these cases the autopsy report specifically excluded the Taser as a contributing factor In 3 of these cases the role of the Taser was deemed to be unknown

• In 9 of the remaining 21 cases, the death was attributed to medical causes, usually cardiac arrest due to physical exertion or pre-existing disease

In 5 of these cases the autopsy report specifically excluded the Taser as a contributing factor In 2 of these cases the role of the Taser was deemed to be unknown

- In 6 of the remaining 12 cases, the death was attributed to trauma unrelated to the Taser (gunshots, etc.)
- None of the autopsy reports ruled or suggested that the Taser was a primary cause of any death.
- In 6 cases the Taser was deemed to have contributed to the subject's death; all 6 findings are highly speculative and a review of the incidents suggests that the Taser played no causative role in any of the deaths:

James Borden (47 years of age, Monroe County, Indiana)

- Multiple drive-stuns delivered to lower abdomen and buttocks during struggle in jail.
- Borden had a massively enlarged heart (twice the normal size) and had toxic drug levels present in his body.
- A national forensic expert (Cyril Wecht) reviewed the case and concluded that the Taser did not cause or contribute to the death.
- The original coroner has since stated that the pain from the Taser—rather than the current itself—frightened Bolden, causing him to have a heart attack (all police use-of-force tools/techniques will cause pain, however, so the use of any tool/technique during this incident would have led to the same result).

William Lomax (26 years of age, Las Vegas, Nevada)

- Lomax, under the influence of PCP, engaged in a violent struggle with police. He died 19 hours after the Taser deployment.
- The coroner's report attributed the death to "cardiac arrest during restraint procedure" with "PCP intoxication" listed as a secondary cause.
- A coroner's inquest jury (not medical professionals) issued an opinion stating "the combination of the force of the knee in his back, the TASER, his drug use, and the restraining: they all played an equal role in his demise."
- No experts in Taser safety or technology testified at the inquest.

William Teasley (31 years of age, Anderson, South Carolina)

- Large subject became violent during booking process, Taser deployed.
- Teasley had numerous medical problems: his heart and spleen were enlarged, his liver weighed twice as much as a normal one, he had hardened arteries and a constricted airway.
- Medical examiner stated that the Taser alone did not cause the death, but stated, "in the dominoes of this man's existence, this Taser was the last straw."

Greshmond Gray (25 years of age, LaGrange, Georgia)

- Subject resisted officers, Taser deployed.
- After first Taser deployment, subject attempted to pick up a small grill filled with hot coals, Taser deployed again.
- Subject had a history of cocaine use, and an abnormal heart.
- Coroner ruled that the emotional and physical stress the subject went through during the struggle with police, including the Taser deployment, led to a lethal heart rhythm.

Milton; Salazar (29 years of age, Mesa, Arizona)

- Hours after being released from prison, Salazar began throwing rocks at motorists.
- Salazar resisted officers and Taser was deployed, he died two days later.
- Tests showed the presence of cocaine in Salazar's system.
- Medical Examiner ruled that Salazar died from complications from excited delirium due to cocaine intoxication, but added that the Taser and stress from the struggle with police contributed.

Michael Rosa (38 years of age, Del Rey Oaks, California)

- Rosa was wandering through yards and screaming; when police approached he swung a 2x4 piece of wood at them.
- Rosa was taken into custody after Taser deployment, he died later at the hospital.
- The coroner ruled that Rosa died of a heart attack due to methamphetamine intoxication, but listed the Taser and the struggle with police as contributing factors.

So, in most of the cases cited by media outlets as "Taser related" deaths, the Taser can readily be eliminated as a factor in the suspect's death. In those few cases where coroners or medical examiners mentioned the

Taser as a possible factor in the death, circumstances suggest otherwise. No coroner or medical examiner has ruled that the Taser was the primary cause of any death.

The summary of the Department of Defense study on Taser safety (discussed above) also spoke to the subject of in-custody deaths associated with the Taser: **"based on the documentation and research reviewed, this report concludes that (the Taser) is likely not the primary causative factor in reported fatalities."**

The delay between Taser application and death in most of these incidents forecloses the Taser as playing a role in those deaths. UW-Madison professor of biomedical engineering John Webster:

If people are electrocuted, then the heart stops pumping. In about five seconds the blood pressure goes to near zero. Within about 30 seconds, the person faints and collapses. Most of the incidents of persons dying after being "Tasered" don't fit this situation.

A 1991 report in the Journal of Forensic Sciences reviewed 16 in-custody deaths associated with Taser use (those cases involved an earlier model of Taser, manufactured by a different company, however). The study concluded that the Taser does not cause death and ruled out the Taser as a factor in fifteen of the cases. The study concluded that in one of the cases, the Taser could not be ruled out as a contributing factor ("the subject's heart condition was such that he could have suffered a fatal arrhythmia from the PCP, the excitement, the electrical stimulation or any of these factors").

Suspect deaths in police custody are not new; indeed, such incidents have occurred previously in Madison. It is estimated that between 50 and 125 police in-custody deaths occur each year. These incidents are almost always associated with a condition known as Excited Delirium:

A state of extreme mental and physiological excitement, characterized by extreme agitation, hyperthermia, epiphoria, hostility, exceptional strength and endurance without fatigue.

Excited delirium typically results from excessive or chronic drug use, or from certain types of severe mental conditions. It is characterized by bizarre and violent behavior, incredible strength, paranoia, incoherent shouting, overheating, profuse sweating, and being impervious to pain. The erratic behavior engaged in by these individuals results in police response, and a violent struggle typically ensues. Because the subject suffering from excited delirium is experiencing paranoia, is impervious to pain and temporarily exhibits extraordinary strength and endurance, these confrontations are extremely dangerous and challenging for police. The subject—feeling no pain and behaving irrationally—exerts him or herself far beyond the limits of the body and heart, sometimes resulting in death. As the Taser continues to be used more widely by police agencies, it is not unusual that some of these in-custody deaths will occur after incidents in which the Taser was used. Indeed, almost all of the incidents cited by The Arizona Republic appear to be instances of Excited Delirium. To conclude that the Taser caused any of these deaths is simply not accurate.

Dr. Jan Garavaglia, Chief Medical Examiner for Orlando, Florida, spoke to the issue of Excited Delirium and the Taser (July 2004):

It is my belief that Taser use is now associated with Excited Delirium, because it's associated; that's how they're bringing them down, but there's really no evidence that they're causing any of the deaths...Excited Delirium is now a fatal disease, whether the police interact or not...I believe these individuals would have died with or without being shot with a Taser.

A United States Department of Justice study into the safety of OC spray (conducted in the mid-90s) also sheds some light on the issue of police in-custody deaths. The DOJ study reviewed 73 cases in which subjects had died after being exposed to OC spray. The study pointed out that when OC spray was new (like the Taser is now), safety concerns developed: "as pepper spray use began to spread, questions arose as to its safety, especially after several exposed arrestees died in custody." The DOJ study concluded that OC spray

contributed to only two of the deaths, both involving suspects who suffered from asthma. A few points from the DOJ's OC study are relevant to the topic of Taser safety and in-custody deaths:

- A review of the facts associated with the individual incidents in the DOJ study show striking similarities to the cases cited by the Arizona Republic (almost all of them showing symptoms of Excited Delirium). Most involve suspects who have either ingested controlled substances or have pre-existing medical conditions. The suspects engage in some type of behavior requiring police intervention, and then proceed to engage in violent confrontations with officers. These similarities demonstrate that police in-custody deaths are to be expected in a small number of police use-of-force encounters, and that the suspect's exertion while resisting—rather than any particular tool or technique used by the police—leads to the death.
- Conclusions reached by medical examiners or coroners are opinions, and necessarily entail some degree of subjectivity. The DOJ report stated, "[T]he author did not always agree with the cause of death listed by the autopsy surgeon or the medicolegal officer." Indeed, a review of the Arizona Republic cases shows a number of very similar incidents where the medical examiner/coroner reached different conclusions. The Arizona Republic emphasizes the few autopsy reports concluding that the Taser contributed to a death, but discounts the autopsy reports expressly ruling that the Taser played no role in a death.
- The DOJ study stated, "the studies cited in this report do not and cannot prove that pepper spray will never be a contributing factor in the death of a subject resisting arrest." So, while unable to definitively state that OC spray is "safe," the DOJ study concluded that all but two of the deaths associated with the use of OC spray would have occurred even if OC spray had not been used.
- Despite the lack of a definitive conclusion in the DOJ report, the vast majority of police officers in the United States carry and use OC spray.

A review of 38 police in-custody deaths during a two-month period in 2004 showed that 9 of the cases (24%) involved Taser use, while 29 (76%) did not. Since about 30% of law enforcement agencies in the U.S. deploy Tasers, this suggests that in-custody deaths involving the Taser comprise a percentage of all police in-custody deaths proportionate to overall Taser deployment.

None of the media stories casting doubt upon the safety of the Taser has cited any type of medical or scientific study or research to support their claims. Indeed, there is no research suggesting any safety concerns with the Taser. Information available in 2003 when MPD first deployed the Taser strongly indicated that the device was safe. While the past year's media attention has raised doubts about Taser safety among the uninformed, available information continues to demonstrate that the Taser is a safe device. MPD's Taser experience (close to 300 deployments, including volunteer exposures, with only a few minor injuries and no long-term adverse consequences) further demonstrates this.

OTHER TASER ISSUES

Policy

MPD policy on Taser use has changed in several respects since the program's inception. Initially, the Taser was placed at two distinct locations on the force continuum: if used in the drive-stun mode, the Taser was placed at the compliance hold level; if used by firing probes, the Taser was placed above takedown techniques but below active countermeasures. The reason for the distinction was primarily the differing propensities for injury: firing the probes creates a small risk for injury (primarily due to the potential for an uncontrolled fall), while the drive-stun carries virtually no potential for injury. After reviewing Taser deployments for the first

few months of expanded deployment (mid-2004), we realized that a few deployments in the drive-stun mode, while in compliance with the policy at that time, did not reflect circumstances under which we wanted Tasers to be deployed. As a result, in June of 2004 MPD's policy on Taser use was changed, putting any Taser use at the same point on the force continuum (above takedown techniques but below active countermeasures). 86% of agencies deploying the Taser place it on the continuum at the same level as OC spray, and The International Association of Chiefs of Police (IACP) model policy on electric weapons equates the devices with OC spray. So, MPD's current policy is slightly more restrictive than the IACP recommended policy and that of most agencies deploying the Taser.

A the time the above change was made, this section was also added to the Taser section of the use-of-force policy:

The Taser shall not be used once an individual is subdued and under control, nor shall it be used against subjects who are offering passive resistance.

At the inception of the MPD Taser program, officers were required to have medical staff (at an emergency room) remove the Taser probes (if they were embedded in the subject's skin). Officers found that ER staff removed the probes in the same way Taser International trains officers to remove them. Accordingly, the policy was changed to allow officers to remove probes in the field. Probe removal was incorporated into the Taser user training as well. Probes embedded in a sensitive area of the body will still have to be removed by medical personnel.

Volunteer Exposures

Since the inception of the MPD Taser program, close to 200 people have volunteered to be exposed to the Taser. Most of these volunteers have been MPD officers going through Taser training (Taser exposure is highly recommended, but not required, for officers being trained in use of the Taser; only a handful did not volunteer). In 2004, Officer Eric Anderson provided training on police use-of-force and possible resulting injuries to the Madison Fire Department. More than 60 MFD personnel volunteered to be exposed to the Taser. One media representative has also volunteered. None of these individuals sustained any injury during the exposure, and no adverse effects have been reported.

Deployment Problems/Effectiveness

The Taser user training underscores the Taser's great effectiveness. The volunteer Taser exposures most officers were subject to (under controlled conditions) can create the belief that the Taser will always be effective. Not surprisingly, in actual field deployments many things can (and do) go wrong that hinder the Taser's effectiveness. The primary issues MPD officers have faced are clothing (thick or baggy) or probe misses. Officers are recognizing that the Taser, while a great tool, is not a cure-all.

Reliability

MPD was one of the first agencies to purchase the X26, and as a result our initial order of 31 were some of the earlier ones manufactured. 16 X26's have had to be returned to Taser International, for a variety of problems. All but one of these malfunctions were detected either during training or through spark-testing. Only once did an X26 malfunction (fail to spark when deployed) during a field deployment.

Taser International has replaced each of these X26's, and had provided a few extra X26's at no cost to the department. It appears that the malfunctions may be attributable to early problems in the X26 manufacturing process. Tasers received after the initial order (with higher serial numbers, from later manufacturing lots) have proven to be more reliable.

CONCLUSIONS

MPD's deployment of the Taser has clearly been a success. The Taser has been utilized to resolve more than 100 use-of-force encounters, with few resulting injuries to officers or suspects. Given the alternative force

options that would have been utilized in these encounters, there is no question that both the number and severity of injuries (to both officers and suspects) would have been far greater had the Taser not been available. The Taser has also allowed officers to avoid having to deploy deadly force in a handful of incidents, and has also likely precluded other incidents from escalating to deadly force encounters.

The fact remains, however, that most MPD officers have not been trained in the use of the Taser. Each shift, most MPD patrol officers working the street are not equipped with Tasers, either because they have not been trained in use of the Taser, or because there are no Tasers available for Taser-trained officers to check-out. As a result, many MPD use-of-force encounters continue to be handled with traditional tools/techniques. These incidents are resulting in injuries to both officers and suspects that could be avoided with expanded Taser deployment.

MPD Taser Deployments

July 2003 - January 2005

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6/14/2004 Relily 900 Williamson St. Probes 5 feet MH 28 C27 04-6683 Initial minor effect, then not effective, ikkly due to close probe spread & low muscle mass 5 misd; 5 felony 6/14/2004 Relily 800 Williamson St. Drive-Stun na C27 04-6683 Multipe drive-stuns; pre-shooting not effective, post-shooting marginal effective mosts 1 misd 6/14/2004 D.Xiong 3737 E. Washginton Probes 162 t V/V 23 C25 04-6733 Probes find at suspect in vehicle; initially effective; suspect removed probes after cycle; then complete cycle 1 misd 6/14/2004 Genrin 3737 E. Washginton Probes 3 feet WW 23 C26 04-6732 Probes find at suspect in vehicle; initially effective; suspect removed probes after cycle; then complete cycle 1 misd 6/14/2004 Genrin 3737 E. Washginton Probes 1 felt WW 23 C2 04-6733 Probes find at suspect in vehicle; initially effective Suspect termoved probes after cycle; then complete cycle 1 misd 6/12/2004 Herrar 3330. Henry Drive-Stun na MB 27 C2 04-67348 Suspect actively fi			-									
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8/23/04 Frei 125 Crystal Ln Probes 6 feet M/W 43 N19 04-99258 Violent suspect after foot pursuit; knee strikes & front kick ineffective; probes effective 3 misd	8/23/04	Green	W. Beltline & Whitney	Drive-Stun	na	M/B	35		04-99187	Resistive subject, several drive-stuns delivered, marginally effective	2 misd	
8/25/04 Radke 11 N Seventh St. Drive-Stun na M/W 29 04-100153 Suspect resisting after being handcuffed, kicking at officers; drive stun effective 2 misd	8/23/04	Frei	125 Crystal Ln	Probes	6 feet	M/W	43	N19	04-99258	Violent suspect after foot pursuit; knee strikes & front kick ineffective; probes effective	3 misd	
	8/25/04	Radke	11 N Seventh St.	Drive-Stun	na	M/W	29		04-100153	Suspect resisting after being handcuffed, kicking at officers; drive stun effective	2 misd	

MPD Taser Deployments

July 2003 - January 2005

Date	Officer	Location	Probes/Stun	Distance	S/R	Age	Taser	Case Number	Comments	Charges	Armed?
8/28/04	McConnell	1980 Atwood Av	Probes	11 feet	M/W	41	C21	04-101720	04-101720 Suspect fleeing; probes effective; 2 cycles delivered		
8/28/04	R. Gonzalez	3737 E. Washginton	Drive-Stun	na	M/W	24	N15	04-101264 Suspect physically resisting; probes effective		2 misd; P&P	
8/30/04	McConnell	2914 Industrial Dr.	Drive-Stun	na	M/W	26		04-102185	Suspect physically resisting being put into 4-point restraints at detox; drive-stun effective	2 misd	
9/6/04	Wixom	4825 Lovell La	Probes	4-5 feet	M/A	15		04-105838	Violently resisting suspect; probes effective	3 misd	
9/28/04	Meinert	1701 Blossom Lane	Probes	8-10 feet	F/W	22	C26	04-115932	Suicidal subject w/ knife, probes effective; 2 cycles	PC Conveyance	
10/1/04	Alvarez	Fairchild & W. Wash	Probes	10 feet	M/W	26	C23	04-117644	Uncooperative subject walking away from officer; probes effective	2 misd	Yes
10/6/04	Wiering	2349 Allied	Probes	1-3 feet	F/B	31	W14	04-119488	Violent female, probes effective	1 misd; 1 felony; P&P	
10/9/04	L. Schwartz	2001 Sundstrom	Probes	3 feet	M/B	15		04-120869	Violent juvenile, probes deployed w/minimal effectiveness followed by drive-stun; clothing failure	2 misd	
10/10/04	Heimsness	10 S. Midvale	Probes	7 feet	M/B	21	W13	04-121252	Violent suspect fleeing from traffic stop; struggled w/officers; probes effective	4 misd	
10/12/04	Milton	2009 Melrose	Probes	15 feet	M/W	32	N19	04-122010	Probes fired at suspect, both missed; suspect still complied	1 misd; P&P	
10/30/04	Heimsness	3129 Maple Valley	Probes	10 feet	M/W	22	W12	04-130102	Uncooperative subject, probes effective, 2 cycles	3 misd	
11/4/04	Knight	6813 Schroeder Rd	Probes	4-7 feet	M/B	26	W8	04-132568	Unccoperative subject, only one probe hit; suspect complied	1 misd	
11/6/04	Alvarez	2914 Industrial Dr.	Drive-Stun	na	F/W	35	C28	04-133436	Unccoperative subject at detox, resisting being put into restraints; drive stun effective	PC Conveyance; P&P	
11/8/04	Morovic	2500 Fish Hatchery Rd	Probes	8-11 feet	M/B	15		04-134317	Fleeing juvenile burglary suspect; probes fired through/over fence; missed	1 misd; 2 felony	
11/16/04	D. Xiong	109 Cottage Grove	Probes	6-8 feet	M/W	29	C26	04-134027	Resistive subject at detox; minimal effectiveness; poss. Low muscle mass or close probe spread	1 misd	
11/13/04	Acre	2914 Industrial Dr.	Drive-Stun	na	M/W	44	W10	04-136484	Uncooperative subject at detox; drive-stun effective	PC Conveyance	
11/24/04	Alvarez	215 S. Bedford	Drive-Stun	na	M/B	44	C29	04-141096	Uncooperative subject struggling w/officers; drive-stun effective	2 misd	
11/27/04	McClurg	2200 W. Broadway	Probes	1-3 feet	M/B	43		04-141653	Violent suspect after short pursuit; not effective; appears one probe missed	3 misd; 3 felony	
12/5/04	R. Finnegan	3400 Hwy 30	Probes	5 feet	M/B	32	C21	04-144792	Violent suspect aggressing on officer; probes effective; 2 cycles	3 misd; 1 felony	
12/8/04	R. Gonzalez	2453 Upham	Drive-Stun	na	M/W	21	N19	04-145638	Resistive suspect; 2 drive-stun cycles delivered; effective	3 misd; P&P	
12/9/04	Armagost	1321 Tompkins	Probes	3 feet	F/W	17	C26	04-146303	Violent female suspect w/knife; probes effective; 2 cycles; very close probe spread	4 misd	Yes
12/11/04	Valenta	712 S. Whitney	Probes	3 feet	M/B	40	W7	04-147143	Resistive suspect exiting squad; probes initially effective, wires likely broke mid-cycle	2 misd; 1 felony	
12/11/04	Nale	712 S. Whitney	Drive-Stun	na			W10	04-147143	Drive-stun attempted during struggle; Taser malfunctioned (no spark)		
12/14/04	Esser	1034 Moorland	Drive-Stun	na	M/W	51		04-147483	Drive-stun to buttocks during struggle; not effective	PC Conveyance	
12/18/04	Shane Olson	4321 Britta Pkwy	Probes	10 feet	M/H	55		04-149783	Suspect believed to be armed w/knife; dual deployment, marginal effectiveness due to heavy coat	5 misd; 1 felony	
12/18/04	Kobinsky	4321 Britta Pkwy	Probes	10-15 feet			W12	04-149783	Suspect believed to be armed w/knife; dual deployment, marginal effectiveness due to heavy coat		
12/21/04	Herrera	117 W. Main St	Probes	5 feet	M/W	34	C31	04-150965	Violent suspect in rear of squad, kicked officers multiple times, probes effective	3 misd; 1 felony	
12/24/04	Rife	1329 Temkin	Probes	5 feet	M/B	33	W11	04-152104	Uncooperative subject w//mental health issues; probes very effective	PC Conveyance	
12/29/04	Leerek	2121 East Springs Dr.	Probes	10 feet	M/W	24	N19	04-153268	Fleeing suspect, probes not effective; clothing	3 misd; 2 warrants	
1/1/05	Paulson	1007 W. Badger	Probes	8-11 feet	M/W	34		05-352	Barricaded subject, poss. Armed, uncooperative, emerged from building, probes very effective	PC/ED	
1/18/05	Reilly	600 S. Thornton	Drive-Stun	na	M/B	31		05-005944	10-80 subject resisting after pursuit; drive stun moderately effective;	1 misd; 1 felony	
1/21/05	Harder	201 S. Gammon	Probes	21 feet	M/B	14		05-007239	Fleeing Juv. Reaching in pocket, initial recation then continued to flee; probably bottom probe came out	1 misd	
1/21/05	Kobinsky	Gamon/Watts	Probes	3	M/B	28	W12	05-007301	Uncoop. Subject; 1st cycle into lower leg due to coat, initially effective, wire broke during struggle	1 misd	
1/21/05	Kobinsky	Gamon/Watts	Probes	3			W12	05-007301	Reload & 2nd probe deployment to hamstring, effective		

MPD Taser Deployments - Display or Threat Only

April 2004 - January 2005

Date	Officer	Location	Probes/Stun	Distance	Taser	Case Number	Comments
4/16/2004	Grann	500 N. Oak	Laser Only	na	C22	04-40646	After foot pursuit, laser on suspect drew compliance
4/27/2004	Fiore	2914 Industrial	Display Only	na		04-42820	Displayed X26 and threatened use, suspect compllied
5/1/2004	Radke	St. Mary's ER	Display Only	na		04-47543	Suspect refused to enter squad, taser displayed, complied
5/6/2004	Leerek	1933 Manley St.	Verbal Threat	na		04-49942	Suspect resisted, ofc. Threatened to use taser, suspect complied
5/15/2004	Radovan	7000 Mineral Point Rd.	Display Only	na		04-53898	Noncompliant suspect after foot pursuit, threatened w/taser, complied
5/27/2004	Wiering	2114 Rosenberry	Display Only	na		04-58918	Suspect refusing to exit vehicle, display effective
5/24/2004	Wiering	2349 Allied	Display Only	na		04-57538	Diplayed to disorderly suspects; effective
6/9/2004	J. Dexheimer	Beewick St.	Laser Only	na		04-64992	Uncooperative suspect, laser display effective
6/11/2004	Sweeney	116 W. Washington	Laser Only	na		04-65686	Uncooperative suspect, laser display effective
6/23/2004	Orvis	4202 Milwauke St.	Display Only	na		04-68689	Uncooperative suspect after pursuit, display effective
6/23/2004	Sweeney	2351 Allied Dr.	Laser Only	na		04-65412	Uncooperative suspect in bedroom; laser display effective
6/21/2004	L. Schwartz	2230 Rosenberry	Laser Only	na		04-70212	Semi-cooperative; laser display effective
7/2/2004	L. Schwartz	2300 Allied	Display Only	na		04-75289	Displayed X26 and threatened use, suspect compllied
7/3/2004	Ostrenga	2914 Industrial	Spark Demo	na	S4	04-76143	Uncooperative subject at detox in seclusion room; spark-demo used; subject complied
7/11/2004	Wiering	4219 W. Beltline	Laser Only	na		04-79681	Suicidal subject w/knife; taser display gained compliance
7/18/2004	Sweeney	2914 Industrial	Laser Only	na		04-82475	Uncooperative subject at detox in seclusion room; display & threat; subject complied
7/27/2004	Ostrenga	1905 Beld St.	Laser Only	na		04-87111	Uncooperative subject, laser display effective
7/31/04	Knight	50 Hollywood Dr.	Laser Only	na	W7	04-89080	Uncooperative & intoxicated subject; laser display effective
8/5/04	Fiore	2601 Fish Hatchery Rd	Display Only	na		04-90998	Robbery suspect, complied at sight of taser
8/9/04	Xiong	4017 Claire St.	Laser Only	na	C23	04-93201	Juv. Out of control, laser effective
8/13/04	Wixom	2301 Carling Dr.	Laser Only	na		04-94787	Foot chase suspect hidden in apartment; laser display effective
8/19/04	Favour	1411 Theresa Terr.	Laser Only	na		04-97085	Domestic suspect attempting to flee out widow; display effective
8/20/04	Wiering	4705 Jenewein	Display Only	na		04-97593	Large suspect, noncompliant; taser display gained compliance
8/23/04	Wiering	6300 Bettys Ln	Display Only	na		04-98864	Ofc. Responded to fight involving bats, group began to walk away, stopped w/taser display
8/26/04	D. Xiong	141 Langdon	Laser Only	na		04-100245	Robbery suspect fleeing on foot; laser displayed in front of him - suspect stopped
8/26/04	Reilly	141 Langdon	Display Only	na		04-100245	Multiple robbery suspects fleeing on foot, taser displayed - suspects complied
8/27/04	Radke	5236 Piccadilly	Laser Only	na		04-101109	Noncompliant domestic suspect; laser display effective
9/2/04	Sheffer	1738 Roth St.	Laser Only	na		04-103692	Uncooperative & threatening subject; display effective
9/7/04	Jugovich	213 Swanton	Display Only	na	C29	04-106303	Drive stun threatened on noncompliant suspect; effective
9/15/04	Kobinsky	5317 High Crossing BI	Laser Only	na		04-109758	Uncooperative, threatening suspect; display effective
9/3/04	Wiering	2309 Carling Dr.	Display Only	na		04-104075	Taser threatened at two suspects fighting; one complied, one fled
9/19/04	L. Schwartz	1210 McKenna	Laser Only	na		04-111566	Taser pointed at subject attempting to flee; effective
9/21/04	Kellogg	700 State St.	Laser Only	na		04-112533	Taser use threatened, effective
9/30/04	Krahn	100 N. Broom	Laser Only	na		04-116772	Taser pointed at uncooperative subject; effective
10/18/04	Wiering	5600 Russett	Display Only	na		04-124472	Uncooperative subject on traffic stop; display effective
10/24/04	L. Schwartz	704 Odana	Laser Only	na		04-127293	Domestic suspect hiding in garage; laser effective
10/28/04	Pharo	1619 Troy Dr.	Laser Only	na		04-128829	Juv. With knife, laser effective
10/27/04	Wixom	2422 Allied Dr.	Laser Only	na		04-128710	Uncoop. Subject
11/16/04	Pharo	89 East Towne Mall	Laser Only	na		04-137762	Aggressive Juv. At mall, laser effective
11/22/04	Shane Olson	676 S. Whitney Way	Laser Only	na		04-140280	Uncooperative retail theft suspect; laser effective
11/26/04	Grann	1203 MacArthur	Laser Only	na		04-141388	Escape suspect leaving bldg.; laser effective
12/4/04	Pharo	300 Oak St.	Display Only	na		04-144490	Physically resistive suspect in squad, display effective
12/19/04	Krahn	1209 MacArthur	Display Only	na		04-149988	Taser use threatened during struggle
12/26/04	Bitterman	3301 Cityview Dr.	Laser Only	na		04-152617	Uncooperative subject, laser display effective
1/12/05	D. Dexheimer	1810 Northport	Display Only	na		05-004172	Resisting subject, display effective
1/15/05	Kobinsky	481 Hilton	Display Only	na		05-005165	Resistive subject; display effective
1/25/2005	Patterson	431 W. Main	Laser Only	na		05-008963	Resistive subject; laser effective