**Ambulance Policy for the Transport of LEK9s**

**Disclaimer**

* Currently, New York, Illinois, and Mississippi allow ambulance transport of injured law enforcement K9s (LEK9) providing no human needs the ambulance at that time. It is essential that EMS personnel be familiar with their state laws before transporting a LEK9.
* Injured conscious LEK9s may pose a serious health risk to the personnel working around them. These dogs may exert bite forces up to 800 psi and are trained to bite with all of their teeth in multiple places until the handler commands a release. The risk of injury to human personnel can be significantly reduced by the correct placement of a basket muzzle. No attempt at naloxone administration, transport or first aid should be rendered to a working dog until a basket muzzle is in place. Unconscious working dogs administered naloxone may wake in a temporarily aggressive state.
* When approaching the scene of a suspected opioid overdosed working dog, providers should wear personal protective equipment (PPE) including gloves to prevent contact with potent opioids. Mouth-to-snout ventilation should NOT be attempted in these situations to avoid human harm or death from residual substances in or around the nose and mouth.

Ambulance Policy for Transport of LEK9s

Background: “Our ambulance service” (insert name) provides medical support services to several law enforcement agencies who utilize K9 officers. It is our intent to support the entire team, including the K9 officers. Under medical direction of the appropriate veterinarian (insert name), the following K9 transport algorithm is enacted.

Section 1: Overall Guidelines and Paramedic Safety

Our ambulance service’s (insert name) primary mission remains the treatment and transport of sick and injured humans. If, on a scene, both a LEK9 and a human need treatment and transport, the human is always treated and transported first, even if their injury is comparatively minor compared to the K9’s.

In most cases an injured LEK9 should be transported exclusively by their dog handler’s police vehicle. If the handler is unavailable it is advisable to contact another handler to assist with restraint. In a few critical situations, transport by our ambulance is authorized to allow better ability to treat the animal in transit.

We have arranged in advance for all injured LEK9s to be transported to the XXX Veterinary Emergency Clinic (insert name of emergency clinic) located at (insert address) and available 24/7. Call patient report to XX (insert phone number of emergency clinic) and ask that Dr. XX (insert name of veterinarian with whom prior agreement has been discussed) be notified.

Police working dogs are trained to be capable of inflicting significant injury, and an injured LEK9 can react unpredictably. Except in the circumstance of a dog being fully unconscious or in severe respiratory distress, the LEK9 is to be placed in a basket muzzle for the duration of care. The K9 handler officer, if available, must also ride in back of the ambulance with the animal for the entire duration of ambulance transport.

Our Ambulance will not transport civilian dogs to XXX Veterinary Clinic for any reason. As in the past, ambulance crews and firefighters are welcome to render oxygen aid on a fireground scene to an animal emerging from a structure fire, but such animals must then be transported by their owners if they wish to seek veterinary care. Any other requests for service, made to either crews in the field or to dispatch, should be deferred to call either the Veterinary clinic (insert name) # (insert phone number) or their private veterinarian.

Section 2: Treatment

It is not our intent or training scope to provide comprehensive veterinary technician care. Our Ambulance (insert name) staff will focus on a few treatable critical conditions, where simple intervention can save the life of the LEK9 prior to arrival to the veterinarian and where the law allows.

A. Opioid overdose. Law enforcement K9s are at risk from inadvertent inhalation or ingestion of opioids, particularly drug sniffing dogs. Naloxone (Narcan®) has the same mechanism of action and safety profile in dogs. An average working dog (~25 kgs) should receive a minimum of 2.0 mg, however if the 4.0 mg dosage is carried, that should be given. Naloxone can be given via the intranasal or intramuscular route. The appropriate injection site for intramuscular in a canine is the outer side of a rear thigh pointing toward the head (away from the sciatic which runs down the back of the thigh).

B. Hemorrhage control. Pressure on the wound as would occur in a human can stem the bleeding until definitive care occurs. Tourniquets on extremities can be used in the same manner as on a human but may not have the same effect due to differences in the anatomy.

C. Respiratory support for severe distress or apnea. Three conditions are most likely to cause respiratory distress; upper airway obstruction (usually from inhalation of an object), severe hypoventilation (from opioid overdose) or a tension pneumothorax.

* K9 airway is easily visualized when patient is placed lying on stomach/chest. Open mouth and pull the tongue forward. Airway visualized with human laryngoscope blade depressing the epiglottis. Magill forceps can be used for foreign body airway obstruction.
* If the dog has respiratory arrest, intubation should be followed by ventilation at 6-10 breaths per minute. The average size police dog will require a size 9 or 10 endotracheal tube. If intubation is not possible placement of a tight fitting face mask attached to an ambubag followed by ventilation may be lifesaving until the reversal is effective.
* Identifying and treating tension pneumothorax. The dog with a tension pneumothorax will have short shallow breathing and rapid deterioration. Tapping either right or left side of the thorax in the dorsal 3rd of the thorax between the 7th and 9th intercostal space may be lifesaving. This is the same basic technique as in a human.

D. Heat Stroke. Rapid cooling with cool (not ice) water should be done at the first suspicion. There is little correlation between core body temperature and heatstroke in working dogs, therefore it is not recommended to struggle with a conscious LEK9 to get a baseline temperature. Cooling for 5-10 minutes can be followed by wet/damp towels placed on the dog during transport. Law enforcement K9s should not be cooled below 103F if a temperature is available. Cooling should be stopped during transport or if the dog becomes cold or starts to shiver.

Section 3: Records

Our Ambulance Service (insert name) will provide services to the K9 officers free of charge OR payment will be provided by (Insert name of responsible police department). A verbal care report to the receiving veterinarian at XX Veterinary Clinic (insert name) is required on arrival to their facility, and a one-paragraph summary of the incident and care rendered should be emailed after the call to the medical director of “Our Ambulance”, Dr. XX at (insert email address) for our records.

Signatures:

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XX MD FAEMS                XX, DVM, DACVECC

Medical Director, Our Ambulance            Veterinary Medical Director, XX Clinic