

Editorial Comments: Tactical Medical Skill Requirements for Law Enforcement Officers: A 10-Year Analysis of Line-of-Duty Deaths

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Dr. Sztajnkrzyca has performed a thought-provoking analysis of line-of-duty deaths in law enforcement officers. As is the case in many good studies, it raises as many questions as answers. It appears most of the preventable fatal injuries involved chest trauma. Two questions come to mind: What can be done to increase the use of ballistic armor from only 65%, and are we using the right armor if such a high percentage of deaths involve penetrating injuries despite ballistic armor use? As sophistication of projectiles increases, we must not only use our technology, but also adapt to the increasing level of threat.

Head injury was the most frequent cause of death in the study group. Head protection, while routinely used by SWAT, is seldom used by other law enforcement officers. While it is impractical to wear helmets during routine police operations, are they available to all officers for high-risk situations?

Lastly, the article questions the appropriateness of translating experience in the military battle environment to civilian law enforcement operations. While Tactical Combat Casualty Care (TCCC) has been very valuable in the military setting, it would seem less effective in the civilian setting. On the other hand, the skills involved in TCCC are relatively easy to learn, and should be considered for incorporation into the basic medical training for law enforcement officers, provided they are placed into a context which appropriately emphasizes treatment priorities.

Appropriate blending of military and civilian treatment philosophy, and technology, will undoubtedly be beneficial. As the study notes, this needs to be studied in the civilian environment, as direct translation based upon military studies does not take into consideration the variation in injury profile for the two groups.