

**LINE OF DUTY  
DEATH REPORT  
REPORT SLIDES**



**F2019-13**

**Career Firefighter Killed, a Police Officer and a Civilian Wounded When They Were Shot During EMS Incident—Wisconsin**



# Summary

- On May 15, 2019, a career firefighter was killed. A police officer and civilian were also injured after being shot while on an emergency medical services (EMS) incident involving a patient who overdosed.
- The firefighter was part of a three-person crew on engine 9321.
- At approximately 5:30 p.m. the crew was dispatched with a private ambulance company to report to a patient who had a seizure on a public bus at a bus terminal. A police officer was first on scene.
- The unconscious patient was successfully treated with naloxone on the bus by a paramedic and regained consciousness.
- The patient and responders then exited the bus at 5:47 p.m.
- A second police officer arrived after the patient walked off the bus.



# Summary

- The police officers, fire, and EMS crews believed that the naloxone would wear off and were concerned for the patient's continued well-being.
- All the responders expressed their concerns for the patient's well-being to the patient multiple times.
- Because all the responders believed the patient would need additional medical assistance and should be transported to a local hospital for follow-up medical care, the police officers asked the patient repeatedly if he had anything on his person that could harm the fire and/or EMS responders.
- During this conversation, the patient abruptly produced a concealed handgun and began firing at the responders.



Incident scene. A career firefighter was killed, a police officer and a civilian were injured after being shot on an EMS incident after a patient who overdosed was revived and exited this bus. (Photo courtesy of local fire department, bus identification markings altered by NIOSH.)



# Summary

- Police officers immediately returned fire as they moved to cover.
- The fire and EMS crews also ran for cover.
- The patient/shooter and police officers exchanged gun fire.
- Within 3 seconds of the handgun being produced by the patient, one firefighter was shot and collapsed while seeking cover.
- He was found unresponsive approximately 80 seconds later.
- He was treated at the scene and transported to a local hospital where he was pronounced dead.
- A police officer was shot while returning gun fire.
- The patient/shooter took a civilian bystander as a hostage and continued to fire until the patient/shooter was shot and fell to the ground.



# Summary

- The civilian hostage was also shot.
- The patient/shooter was secured, provided medical treatment for his injuries and transported to a local hospital where he was pronounced dead.
- The wounded police officer was transported to a local hospital by a fellow police officer.
- The wounded civilian was transported by ambulance to a local hospital.
- Both the wounded police officer and civilian were treated at local hospitals and recovered.
- The first gun shot was fired by the patient at 6:09 p.m.
- This was 39 minutes after the arrival of emergency responders and 22-minutes after exiting the bus.



# Contributing Factors

- Medical Emergency: When firefighters first responded to the scene, the patient (prior to the shooting) was not breathing adequately and required emergency medical attention. An autopsy confirmed the patient/shooter had methamphetamine, fentanyl, and 4-anilino-N-phenethylpiperidine (4-ANPP, a metabolite of fentanyl or fentanyl analogues) in his system.
- Scene Safety and Situational Awareness: After being revived with intravenous naloxone and exiting the bus under his own power, the patient produced a concealed handgun and fired at numerous firefighters, law enforcement, EMS, other workers, and civilians. Prior to the shooting, police officers made multiple attempts but did not complete a search of the patient.



# Recommendations

- First responders and agencies who deliver medical assistance to patients who overdose should train staff on standard operating procedures (SOPs) for naloxone administration, including an understanding of the objective of naloxone therapy and the possibility, albeit uncommon, of agitation and combativeness from persons after receiving naloxone.
- Fire, EMS, and police departments and agencies who deliver medical assistance should develop SOPs that address the possibility of polydrug overdoses.
- Fire, EMS, and police departments should take steps to ensure scene safety including taking all necessary actions to protect themselves when providing lifesaving care to a patient. The fire service and standards setting organizations should consider developing scene safety SOPs and training that provide more detailed guidance on the specifics of keeping first responders safe while providing lifesaving care to patients.





# Recommendations

- Authorities Having Jurisdiction (AHJs) (e.g. municipalities, areas, or departments) should consider developing SOPs or guides that specify when (1) a patient should receive a pat down to identify information that might be useful for patient care or identify items that pose a threat to the patient or responders and (2) a patient might be restrained if the patient poses a threat to themselves or the responders. These SOPs should specify who determines when a pat down is necessary and who is authorized to perform it. These SOPs should be operationalized, trained, and exercised by law enforcement, the fire service, and EMS as part of a Unified Command response.
- Public or mass transportation companies should consider equipping their terminals/stations with transfer/evacuation devices that are capable of fitting down the aisles for patient removal.
- Fire, EMS, police departments and dispatch agencies should ensure that all responders have the information needed for their response and safety.





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