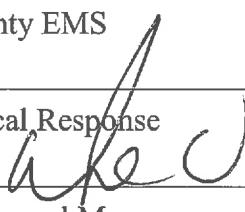




**COMMUNICATIONS OPERATIONS  
EMERGENCY MEDICAL SERVICE POLICY**

<b>Policy No.</b> 6130.80	<b>Date Issued:</b> May 25, 2000
<b>Section:</b> 6100 – CAD Procedures	<b>Date Revised:</b> July 22, 2019
Accreditation Standards:	
<b>SUBJECT: USE OF MEDICAL INCIDENT TYPE CODES</b>	
<b>APPROVED:</b>	_____
	Santa Cruz County EMS
<b>APPROVED:</b>	_____
	American Medical Response
<b>APPROVED:</b>	_____
	 Dennis Kidd, General Manager

Rescinded as of July 22, 2019

Refer to Policy 6410.81 – *Use of Medical Incident Type Codes*