SANTA CRUZ REGIONAL 9-1-1



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COMMUNICATIONS OPERATIONS EMERGENCY MEDICAL SERVICE POLICY

Policy No.	6415	Date Issued:	1 /
Section:	6400 – Telephone Procedures	Date Revised:	May 13, 2019
Accreditation	Standards:		
SUBJECT: USE OF MEDICAL INCIDENT TYPE CODES			
APPROVED	: Brend V. Bru.	~	
	Santa 2 ruz County EMS		
APPROVED	: KMangun	W	
	San Benito County/FMS		
APPROVED	: Chry		
	American Medical Response	:	
APPROVED	:		
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1.0 Purpose

1.1 To provide specific guidelines on the appropriate use of medical incident type codes generated by using the NAEMD protocols.

2.0 Procedure

- 2.1 In accordance with Policy 6410 Telephone Procedures, all callers requesting emergency medical assistance will be directed to the Emergency Medical Dispatch (EMD program. These calls will be created by using the appropriate full determinant as determined by the EMD program, i.e., 23B1, 6D2, etc., as the incident type code.
- 2.2 Immediate reports of breathing problems, chest pain, stroke, or not breathing will be entered with the appropriate quick launch incident type and then processed through EMD.
 - 2.2.1 Quick launch codes are defined as: BREATH

CHEST STROKE ECHO

- 2.3 Any call not processed through EMD, will be created by using the NOEMD incident type code.
- 2.4 Any request by law enforcement onscene will be created by using the 2MED or 3MED incident type code.

Policy No. 6410.80