

SIERRA-SACRAMENTO VALLEY EMS AGENCY PROGRAM POLICY

REFERENCE NO. 848

SUBJECT: CANCELLATION OR REDUCTION OF ALS / LALS RESPONSE

PURPOSE:

The purpose of this policy is to identify the responsibilities of BLS prehospital emergency medical personnel when canceling/reducing responding ALS / LALS resources when patient contact has been made.

AUTHORITY:

California Health and Safety Code, Division 2.5, Sections 1797.204, 1797.220, and 1798 et seq.,

California Code of Regulations, Title 22, Division 9, Chapter 4, Sections 100147, 100169 and 100170.

DEFINITIONS:

- A. **Code 4 or Canceled Call** - is defined as no further assistance is needed by the Incident Commander (IC). Further responding units are canceled. All ALS / LALS units dispatched via the 911 system that are canceled prior to arrival on scene shall be considered to be Code 4.
- B. **No Patient Contact** - "No patient contact" is defined as arrival at scene and unable to locate any patient. Verbal or physical contact with a patient has not been made.
- C. **Code 3** - Code 3 is defined as proceeding with red lights and siren, according to the California Vehicle Code.
- D. **Code 2** - Code 2 is defined as proceeding expeditiously but obeying all traffic laws without exception.
- E. **Competent Person** – is a person with a capacity to understand the nature of his/her medical condition, and not impaired by alcohol, drugs or medications, mental illness, traumatic injury, grave disability or mental abilities diminished because of age.

POLICY:

- A. Cancellation of Responding Units:

Effective Date: 07/01/2010

Date last Reviewed / Revised: 06/10

Next Review Date: 06/2013

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Approved:

SIGNATURE ON FILE
S-SV EMS Medical Director

SIGNATURE ON FILE
S-SV EMS Regional Executive Director

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The IC or designee on the scene of an incident may cancel a responding ALS / LALS resource upon determination of the following:

1. That the incident does not involve an injury or illness which would require assessment, treatment or transport by Paramedic or Advanced EMT personnel; or,
2. When the patient is a competent adult and is refusing ALS / LALS assessment and or transport.

Before canceling the ALS / LALS resource, consider the medicolegal responsibility involved. Once an ALS / LALS unit has arrived on scene, and ALS / LALS personnel are within visual range of the patient, the ALS / LALS personnel should attempt to make patient contact.

B. Reducing Code of Responding Units:

The IC or designee on the scene of a medical incident may reduce a responding ALS / LALS resource from Code 3 to Code 2 upon determination that, in the best judgment of the IC, the illness or injury is not immediately life-threatening and that the difference in Code 3 and Code 2 response time would not likely have an impact on patient safety.

Note: When an ambulance is reduced to Code 2 the agreed upon emergency response time standard is no longer applicable to that call. When an ambulance is reduced to Code 2, it is possible that the responding ambulance will be redirected to a different Code 3 call, resulting in a delayed ambulance response from a distant location.

C. Incidents when the ALS / LALS resource should not be canceled by BLS EMS personnel:

1. Medical

- a. Cardiac arrest with active CPR
- b. Cardiac symptoms
- c. Difficulty breathing
- d. Altered mental status
- e. Drug ingestion
- f. Seizures
- g. Near drowning
- h. GI or OB hemorrhage
- i. All Pediatric patients < 3 years old

2. Trauma

- a. Respiratory problems associated with trauma

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- b. Significant bleeding associated with trauma
- c. Trauma where the patient has lost consciousness.
- d. All penetrating injuries to the head, neck, chest, torso, and extremities proximal to the elbow and knee.
- e. In general, any traumatic event with a mechanism of injury and high energy impact consistent with serious injury despite a lack of clinical signs and symptoms such as:
 - Ejections from a motorized vehicle.
 - Death in the same passenger compartment.
 - Vehicular crashes requiring extrication time of > 20 minutes.
 - Falls that appear to be > 20 feet.
 - Vehicle rollovers.
 - High-speed vehicular crashes with initial speed > 40 mph, major auto deformity > 20 inches, or intrusion into passenger compartment > 12 inches.
 - Auto-pedestrian/auto-bicycle injuries with significant (> 5 mph) impact.
 - Pedestrians thrown or run over by a vehicle.
 - Motorcycle crash > 20 mph or with separation of a rider from the bike.

CROSS REFERENCES:

Policy and Procedure Manual

Patient Initiated Released at Scene (RAS) or Patient Initiated Refusal of Service (AMA), Reference No. 850

Treatment / Transport of Minors, Reference No. 851