

# Sierra – Sacramento Valley EMS Agency Program Policy

## Reduction/Cancellation Of ALS Response

	Effective: 04/01/2026	Next Review: 01/2029	<b>848</b>
	Approval: Troy M. Falck, MD – Medical Director		SIGNATURE ON FILE
	Approval: John Poland – Executive Director		SIGNATURE ON FILE

### PURPOSE:

To establish criteria for the reduction or cancellation of responding ALS resources.

### AUTHORITY:

- A. HSC, Division 2.5, § 1797.204, 1797.220 and 1798.
- B. CCR, Title 22, Div. 9, Ch. 3.1, Ch. 3.2, Ch. 3.3.

### DEFINITIONS:

- A. **Code 2** – Proceeding expeditiously but obeying all traffic laws without exception.
- B. **Code 3** – Proceeding with red lights and siren according to the vehicle code.
- C. **Competent Individual** – An individual responsible for their own healthcare, or legally responsible for healthcare decisions involving the patient (parent, legal guardian, conservator, agent/attorney-in-fact, etc.), who has the capacity to understand the circumstances for which EMS care is indicated and the risks associated with refusing all or part of such care. They are alert and their judgement is not impaired by alcohol, drugs/medications, illness, injury, or grave disability.

### POLICY:

- A. The IC/designee on the scene of a medical incident may reduce a responding ALS resource from Code 3 to Code 2 upon determination that the patient's illness or injury is not immediately life-threatening and the difference in Code 3 and Code 2 response time would not likely have an impact on patient safety (note: when an ALS ambulance is reduced to Code 2, it is possible that the resource will be redirected to a higher priority call, resulting in a delayed subsequent ambulance response).
- B. The IC/designee may cancel a responding ALS resource upon determination that the incident does not involve an illness or injury which would require ALS assessment, treatment and/or transport, or when a competent individual is refusing ALS assessment, treatment and/or transport.
  - 1. BLS personnel should not cancel responding ALS resources for 'high risk' patients, including but not limited to:
    - a. Cardiac arrest with active CPR.
    - b. Suspected Acute Coronary Syndrome (ACS).

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- c. Difficulty breathing.
  - d. Altered mental status.
  - e. Drug ingestion.
  - f. Attempted suicide, verbalized suicidal/homicidal ideations.
  - g. Seizures.
  - h. Near drowning.
  - i. Active or significant hemorrhage.
  - j. Pediatric patient's  $\leq 3$  years old.
  - k. Patients who meet Field Trauma Triage Criteria as defined in S-SV EMS General Trauma Management Protocol (Reference No. T-1).
2. Once they have arrived on scene, ALS personnel shall attempt to make patient contact unless they are cancelled by BLS personnel prior to patient contact, and there is no indication that the patient meets any of the 'high risk' criteria listed in this policy.