





SAN MATEO COUNTY HEALTH
EMERGENCY
MEDICAL SERVICES

EMS POLICY	207
Effective:	April 2024
Approval: EMS Director Travis Kusman, MPH	Signed: 
Approval: EMS Medical Director Greg Gilbert, MD	Signed: 

AMBULANCE RESPONSE AND TRANSPORT RESTRICTIONS

I. PURPOSE

This policy identifies the response and transport restrictions for emergency ambulances operating in the 9-1-1 system.

II. AUTHORITY

California Health and Safety Code Division 2.5, §1797-1798.8; California Code of Regulations, Title 22, Division 9, §100168-100170

III. DEFINITIONS

Advanced Life Support (“ALS”): Special services designed to provide definitive prehospital emergency medical care, including, but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the direct supervision of a base hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital and while in the emergency department of an acute care hospital until responsibility is assumed by the emergency or other medical staff of that hospital.

Authorized San Mateo County EMS Provider: An entity which has a written agreement with the LEMSA to provide emergency ambulance services with ALS ambulance transport; or a city or fire district which operated ALS ambulance services pursuant to the Wedworth-Townsend Paramedic Act, Article 3 and holds an exclusive operating area.

Basic Life Support (“BLS”): Emergency first aid and cardiopulmonary resuscitation procedures which, as a minimum, include recognizing respiratory and cardiac arrest and starting the proper application of cardiopulmonary resuscitation to maintain life without invasive techniques until the victim may be transported or until advanced life support is available.

Emergency Medical Services: The services utilized in responding to a medical emergency.

Emergency Medical Services Agency (“LEMSA”) [or “Agency”]: The San Mateo County EMS Agency is designated as the Local Emergency Medical Services Agency (LEMSA) and is statutorily charged with primary responsibility for administration and medical control of emergency medical services in San Mateo County.

Medical Emergency: A condition or situation in which an individual has a need for immediate medical attention, or where the potential for such need is perceived by prehospital personnel or a public safety agency.

IV. POLICY

- A. Emergency ambulance services shall only be provided by a San Mateo County emergency ALS ambulance provider agency authorized by LEMSA.
- B. Any EMS provider entity that is not a San Mateo County emergency ALS provider agency authorized by LEMSA shall not respond to any prehospital emergency that occurs within San Mateo County unless specifically requested to do so by San Mateo County Public Safety Communications (“PSC”) or LEMSA.
- C. If an EMS provider entity that is not a San Mateo County emergency ALS provider agency authorized by LEMSA receives a request to provide prehospital emergency medical services or emergency ambulance transport services, the EMS provider shall immediately turn the request for service over to the 9-1-1 EMS system via PSC.
- D. If an EMS provider entity that is not a San Mateo County emergency ALS provider agency authorized by LEMSA responds to or otherwise comes upon a prehospital patient who is determined to be experiencing a medical emergency within the County of San Mateo, the EMS provider shall immediately call 9-1-1 and request an EMS response.
- E. If an EMS provider entity that is not a San Mateo County emergency ALS provider agency authorized by LEMSA drives with emergency warning lights and/or siren and/or renders prehospital care to a person experiencing a medical emergency for any reason within San Mateo County, the provider is required to notify LEMSA within 48 hours. Such notification shall include the date, time, and location of the incident and a complete description of the event and shall be submitted via the [EMS Event Reporting Form](#).

V. USE OF BLS AMBULANCES WITHIN THE 9-1-1 SYSTEM

- A. An ALS ambulance will be dispatched to all 9-1-1 requests for ambulance response. Unless otherwise directed by LEMSA, a 9-1-1 response may only be turned over to a BLS ambulance when the following occurs:
 - 1. If an ALS ambulance is not available, a BLS ambulance will be dispatched to the response.
 - 2. All patient care decisions shall be made with the best clinical interests of the patient as the primary consideration. The assignment of a BLS ambulance in the 9-1-1 system will create opportunity for a paramedic to transfer the care of a patient to an EMT provider:
 - a. If an ALS intervention has been performed, transfer of the patient to a BLS provider is not permitted. Transport shall occur as early as possible with a paramedic retaining responsibility as the primary patient care provider. Paramedics shall assure that they have immediate access to all necessary ALS equipment and supplies when providing patient care.
 - b. A patient who has received an ALS assessment and is stable may be transferred to

- a BLS provider if ALS intervention has not occurred and is not required.
 - c. If an EMT is uncomfortable with accepting care of the patient, the EMT should communicate this to the transferring paramedic and the paramedic shall retain responsibility as the primary patient care provider.
3. BLS ambulance(s) can be used to transport patients during a declared mass-causality incident as authorized by LEMSA.
- B. The South San Francisco Fire Department (“SSFFD”) may utilize BLS ambulances in certain circumstances and shall adhere to the following procedure:
- 1. An ALS ambulance will be dispatched to all 9-1-1 requests for ambulance response. In no case, other than that listed in Section A(1) above, shall a BLS ambulance be initially dispatched.
 - 2. Upon arrival at scene, the SSFFD ALS ambulance paramedic will assess the patient(s). If, in the paramedic’s best medical judgment, there is no potential for the patient to require ALS level care and there is no risk that the patient will suffer harm by being transferred by a BLS ambulance, a BLS ambulance may be dispatched to transport the patient. After the determination by the SSFFD ALS ambulance paramedic that the patient may be safely transported by a BLS ambulance:
 - a. The SSFFD engine company on scene shall assume care of the patient until the arrival of the BLS ambulance.
 - b. The SSFFD ALS ambulance paramedic shall provide the engine company, or if present, the transporting BLS ambulance EMTs, a comprehensive verbal report on the patient's condition.
 - c. If there is any question as to whether the patient is stable for BLS transport, the SSFFD ALS ambulance shall transport.