



London Breed  
Acting Mayor

## Emergency Medical Services Agency

Population Health Division  
Department of Public Health  
30 Van Ness Ste#3300  
San Francisco, CA 94102



Anthony W. DuComb  
anthony@swimacrossamerica.org  
+14156804624

August 14, 2017

Greetings Anthony W. DuComb,

Attached please find the final approved Medical Plan for the upcoming event titled "Swim Across America-SF Bay Area" scheduled for 8:00AM on Sunday September 17, 2017 until 12:00PM on Sunday September 17, 2017. I hope your Event is successful and I am available during business hours to answer any questions or address any concerns that you may have. A copy of your Plan will be held on file in my office to reference and compare against any future plan that you may submit. Some elements of your submitted Medical Plan will not be included in the approval package, but will be kept as hard copies in the EMS Agency File.

A member of the EMS Agency may visit your Event in order to confirm that all required and contracted Medical Services are appropriate and present. They will present Identification to the Primary Emergency Contact as listed in your submitted Plan. Please remember that an after action report must be submitted to my office within 14 days of the close of your operational period.

Regards,

A handwritten signature in blue ink, appearing to read "Aram L. Bronston".

Aram L. Bronston  
Prehospital Coordinator  
Emergency Medical Services Agency  
SF Department of Public Health  
30 Van Ness Ave., Ste#3300  
San Francisco, CA 94102  
aram.bronston@sfdph.org  
Office: 415-487-5032

## Plan Overview

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Approved

08/14/17 9:42 am

Event Type

Water-based

Alcohol at Event

no

Event Plan Creator

Anthony W. DuComb  
anthony@swimacrossamerica.org  
+14156804624

Collaborators

kerry.k.bolen@uscg.mil  
judy.stark@amr.net  
dana.ketcham@sfgov.org  
diane.rea@sfgov.org  
shannon.nelson@amr.net

Permitting Agency

SF Department of Rec  
& Park

## Operation Period 1 Overview

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Time Period

Start

09/17/2017 at 08:00

End

09/17/2017 at 12:00

Crowd

Peak Crowd Size

450

Total Crowd Estimate

500

Event Footprint

North Side of Little Marina  
Green, Yacht Harbor Parking  
Lot, and Yacht Harbor Beach;  
Water between GG Bridge and  
Yacht Harbor Beach.

## First Aid Stations

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### AMR

Level

ALS

Provider

American  
Medical  
Response

MD

0

RN

1

EMT

2

AED

1

Planning Contact

Name: American Medical  
Response

Phone: +14157209015

Email: judy.stark@amr.net

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## Mobile Teams

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### AMR Unit stationed on motorized water CRAFT

Level	Type	Provider	AED
ALS	Boat-based	American Medical Response	1

Planning Contact

Name: American Medical  
Response

Phone: +14157209015

Email: judy.stark@amr.net

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### AMR Unit ALS Team on motorized craft.

Level	Type	Provider	AED
ALS	Boat-based	American Medical Response	1

Planning Contact

Name: American Medical  
Response

Phone: +14157209015

Email: judy.stark@amr.net

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## Transport

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### Ambulance

Provider  
American Medical Response

Planning Contact

Name:

Phone:

Email:

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### Ambulance

Provider  
American Medical Response

Planning Contact

Name:

Phone:

Email:

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## Dispatch

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### AMR

Level

Provider

American Medical Response

Planning Contact

Name: American Medical  
Response

Phone: +14157209015

Email: judy.stark@amr.net

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## Communication Plan

Event Coordinator

Event Supervisor

Dispatch Supervisor

Medical Group Supervisor

Triage Supervisor

Transport Supervisor

Non-Transport Supervisor

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## Supplemental Documents

To download, right-click and select "Save Link As..."

[Swim Ops Doc.](#)

[Timeline](#)

[Emergency Management](#)

[EMS Pan for Medical Emergency](#)

[Swimmer Safety Doc.](#)

## EVENT FOOTPRINT RESPONSIBILITY

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The medical group supervisor or the event coordinator must contact the dispatch supervisor at DEC (phone: 415-575-0737) to take responsibility for the event footprint at the beginning of each operational period and release responsibility for the footprint at the end of each operational operation\_period.

## CPR & 911

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During the operational period of the event safety personnel will follow the existing communications plan and will contact 911 only if medical needs overwhelm the capabilities of dedicated contracted medical assets. All medical interventions are the responsibility of the dedicated/contracted medical staff.

## COMMUNICATIONS

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All event safety personnel will have a list of contact info and will be communicating as specified in the Medical Assets section

In case of emergency during the event, the event coordinator can be reached at all times at:

## STAFF RESPONSIBILITY

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All contracted medical interventionists will be active, current, and in good-standing at the time of the operational operation\_period. The event producer will ensure that a complete staff list is provided no less than one week prior to the first operational period.

## MCI CAPABILITIES

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A written MCI plan and an approved MCI will be present at the event. All contracted responders will be briefed and trained on their contents and use.