



Edwin M. Lee
Mayor

Emergency Medical Services Agency

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



Peter Tapia
specialmed1@sbcglobal.net
+14157228876

September 11, 2017

Greetings Peter Tapia,

Attached please find the final approved Medical Plan for the upcoming event titled "CALLE 24TH " scheduled for 12:00AM on Sunday September 17, 2017 until 8:00PM 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

Approved	Event Type	Alcohol at Event
09/11/17 1:55 pm	Outside: Parade, Block Party, or Street Fair	no

Event Plan Creator	Collaborators	Permitting Agency
Peter Tapia specialmed1@sbcglobal.net +14157228876	judy.stark@amr.net shannon.nelson@amr.net shanna.hurley@sfmta.com moises@calle24sf.org	SFMTA/ISCOTT

Operation Period 1 Overview

Time Period	Crowd	Event Footprint
Start 09/17/2017 at 00:00	Peak Crowd Size 2500	24TH STREET BETWEEN MISSION AND HAMPSHIRE
End 09/17/2017 at 20:00	Total Crowd Estimate 5000	

First Aid Stations

MED TENT/ MED CONTROL

Level	Provider	MD	RN	EMT	AED
BLS	Special Medical Aid	0	1	1	1

Planning Contact

Name: Special Medical Aid

Phone: +14157228876

Email: specialmed1@sbcgloba

Mobile Teams

BLS TEAM 1

Level	Type	Provider	AED
BLS	Foot	Special Medical Aid	1

Planning Contact

Name: Special Medical Aid

Phone: +14157228876

Email: specialmed1@sbcglobe.com

BLS TEAM 2

Level	Type	Provider	AED
BLS	Foot	Special Medical Aid	1

Planning Contact

Name: Special Medical Aid

Phone: +14157228876

Email: specialmed1@sbcglobe.com

Transport

ALS TRANS 1

Provider

American Medical Response

Planning Contact

Name:

Phone:

Email:

ALS TRANS 2

Provider

American Medical Response

Planning Contact

Name:

Phone:

Email:

Dispatch

MED TENT/ MED CONTROL

Level

Provider

Special Medical Aid

Planning Contact

Name: Special Medical Aid

Phone: +14157228876

Email: specialmed1@sbcglobe.com

Supplemental Documents

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

[FESTIVAL MAP](#)

EVENT FOOTPRINT RESPONSIBILITY

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

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

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

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

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.