



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

March 28, 2017

Greetings Peter Tapia,

Attached please find the final approved Medical Plan for the upcoming event titled "SUNDAY STREETS WESTERN ADDITION" scheduled for 10:00AM on Sunday September 10, 2017 until 4:30PM on Sunday September 10, 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

03/28/17 8:28 am

Event Type

Athletic or Sporting Event

Alcohol at Event

no

Event Plan Creator

Peter Tapia  
specialmed1@sbcglobal.net  
+14157228876

Collaborators

jeff@livablecity.org  
judy.stark@amr.net  
nick.chapman@sfmta.com

Permitting Agency

ISCOTT

## Operation Period 1 Overview

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Time Period

Start

09/10/2017 at 10:00

End

09/10/2017 at 16:30

Crowd

Peak Crowd Size

5000

Total Crowd Estimate

15000

Event Footprint

Fillmore St, Fulton St, Baker St

## First Aid Stations

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### SMA AID

Level

BLS

Provider

Special  
Medical Aid

MD

RN

1

EMT

1

AED

1

Planning Contact

Name: Special Medical Aid

Phone: +14157228876

Email: specialmed1@sbcgloba

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## Mobile Teams

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### TEAM 1

Level	Type	Provider	AED
BLS	Foot	Special Medical Aid	0

Planning Contact

Name: Special Medical Aid

Phone: +14157228876

Email: specialmed1@sbcglobe.com

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### TEAM 2

Level	Type	Provider	AED
BLS	Foot	Special Medical Aid	0

Planning Contact

Name: Special Medical Aid

Phone: +14157228876

Email: specialmed1@sbcglobe.com

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## Transport

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### ALS 1

Provider

American Medical Response

Planning Contact

Name:

Phone:

Email:

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## Dispatch

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### FA STATION

Level

Provider

Special Medical Aid

Planning Contact

Name:

Phone:

Email:

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## Supplemental Documents

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

## WESTERN ADDITION MAP

## 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.