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of Austere Medical Care Standards when the situation is completely overwhelming local resources and the possibility of receiving mutual aid resources are remote.

Requests for authorization of Austere Medical Care Standards must be routed through the chain of command. Austere medical care in the pre-hospital environment is authorized only by the **County Health Officer or, in his/her absence, the Deputy Health Officer**. Authorization of the use of austere medical care will be communicated through the Incident Command System.

### **3.20.3 How to Perform Austere Care**

The San Francisco EMS Agency P-100 Austere Care Protocol is the approved guideline for austere care in the pre-hospital environment. Refer to that protocol for further details. EMS Agency P-100 Austere Care Protocol does NOT apply to in-hospital care.

## **Section 3.21 Demobilization**

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Demobilization will not be covered in this MCI Plan. For incidents in San Francisco, demobilization plans will be developed and disseminated through the EOC or delegated to the relevant DOC when an incident response winds down. San Francisco EMS responders deployed in mutual aid response will be released from their assignment according to the incident demobilization plan developed by the original responder agency that requested mutual aid.