

SAN FRANCISCO EMERGENCY MEDICAL SERVICES AGENCY

Policy Reference No.: 4020
Effective Date: February 1, 2015
Supersedes: August 1, 2007

Note: Update on Feb 1, 2015 added Veterans Administration Medical Center and UCSF Mission Bay helipads to Appendix B.

EMERGENCY MEDICAL SERVICES (EMS) AIRCRAFT UTILIZATION

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EMERGENCY MEDICAL SERVICES (EMS) AIRCRAFT UTILIZATION

I. PURPOSE

- A.** To minimize loss of life, disability, pain and suffering by ensuring the timely availability of air medical resources for the City and County of San Francisco.
- B.** To define the scope and manner with which the EMS System will use EMS aircraft for emergency transport of critically ill and injured patients.
- C.** To provide for coordinated air medical operations with ground responders and hospital resources.

II. AUTHORITY

- A.** Code of Federal Regulations, Title 14, Parts 29, 36, 71, 150, 157
- B.** California Public Utilities Code, Sections 21001-21019, Sections 21240-21258, and Sections 21661-21669.6
- C.** California Code of Regulations, Title 21, Division 2.5, Sections 3525-3560
- D.** California Code of Regulations, Title 22, Division 9, Chapter 8, Sections 100276 – 100306
- E.** City and County of San Francisco Police Code, Article 31, Sections 3100-3112

III. POLICY

A. Availability of Air Medical Services

- 1. Primary response of EMS aircraft shall be made available to sick and injured persons in the City and County of San Francisco whenever it is safe, appropriate, and necessary to optimize the care of the patient.
- 2. The pilot in command of the EMS aircraft shall have the full authority to abort or decline response to any request for service when mechanical, geographic, or flight conditions might endanger the crew or others.
- 3. For incident scene operations where air response is requested, air ambulances shall be considered to be the air response asset of choice. Rescue aircraft may be used to supplant or extend the availability of air medical transportation.

B. Authorization of EMS Aircraft Service Providers

1. All EMS aircraft operators routinely offering services to or from hospitals located in the City and County of San Francisco shall have a written agreement with the EMS Agency and be authorized to operate by the EMS Agency within the aircraft operator's jurisdiction of origin.
2. A request from a designated dispatch center shall be deemed as authorization of aircraft operated by the California Highway Patrol, Department of Forestry, National Guard, or the Federal Government.
3. All EMS aircraft authorized to operate within the City and County of San Francisco shall be classified. Verification by the San Francisco EMS Agency of classification of an EMS aircraft within the aircraft's jurisdiction of origin shall constitute classification of the EMS aircraft within the City and County of San Francisco. EMS aircraft classification shall be limited to the following categories:
 - a) Air Ambulance
 - b) ALS Rescue Aircraft
 - c) BLS Rescue Aircraft
 - d) Auxiliary Rescue Aircraft
4. The San Francisco EMS Agency retains the right to inspect EMS Aircraft Providers, including EMS aircraft, and training, quality improvement, and operations policies, procedures and records, to assure compliance with State law and local policies and procedures.
5. The San Francisco EMS Agency shall maintain an inventory of the number and type of authorized EMS aircraft, the jurisdiction of origin of authorized EMS aircraft, the patient capacity of authorized EMS aircraft, and the level of patient care provided by EMS aircraft personnel, and Receiving Hospitals with landing sites approved by the State Department of Transportation, Aeronautics Division.
6. Authorized EMS aircraft operators and service providers will comply with all EMS Agency Policies, Procedures, and Protocols.

C. Medical Flight Crew Requirements

1. All members of the medical flight crew of an EMS aircraft shall be trained in aeromedical transportation as specified in California Code of Regulations, Title 22, Division 9, Chapter 8, Section 100302.
2. All medical flight crew members shall participate in such continuing education requirements as required by their licensure or certification.

D. Ground Crew Requirements

1. All providers operating in the vicinity of helicopters must be regularly trained in standard helicopter safety operations.
2. The EMS Agency must review and approve helicopter safety training standards used by field providers in San Francisco.

E. Patient Management

1. Medical control for flight crew members shall be supplied by the air ambulance operator's Medical Director.
2. EMS aircraft staffed by registered nurses will utilize the standardized procedures of the Air Ambulance service provider. These standardized procedures will be submitted for review by the San Francisco EMS System Medical Director.
3. In situations where the medical flight crew is less medically qualified than the ground personnel from whom they receive patients, the medical flight crew may assume patient care responsibility only as directed by the Base Hospital Physician.
4. EMS aircraft that do not have a medical flight crew shall not transport patients except under direction of the Base Hospital Physician.
5. Prehospital care records will be submitted to the San Francisco EMS Agency by the EMS Aircraft provider within 2 working days of each operation.

F. EMS Aircraft Space and Equipment

1. All EMS aircraft shall be configured according to specifications in California Code of Regulations, Title 22, Division 9, Chapter 8, Section 100306 (a-c).

G. Representation of Provision of Air Ambulance Services

1. No person or organization shall provide or hold themselves out as providing prehospital Air Ambulance or Air Rescue services unless that person or organization has aircraft which have been classified by the local EMS agency within the jurisdiction of origin, with the exception of State or Federal aircraft.

H. Authorized Landing Sites

1. EMS Aircraft shall only land at landing sites meeting 1 of the following criteria:
 - a. Heliports permitted by the California Department of Transportation.
 - b. Pre-designated EMS landing sites. The San Francisco Police Department shall pre-designate and permit all EMS landing sites (see Appendix B).
 - c. Emergency helispots at or near the scene of a Multi-Casualty Incident (MCI), disaster, or other critical incident. The Incident Commander (IC) shall designate appropriate helispots at emergency scenes.
2. The San Francisco EMS Agency shall maintain an inventory of pre-designated EMS landing sites with specifications of latitude and longitude (see Appendix B).
3. In cases of consequence management planning for future events, EMS drills, and other non-emergent transportation needs, a helicopter landing permit will be filed with the Department of Parks and Recreation by the EMS Agency or the agency responsible for planning the anticipated event.

I. Communication Policy

1. EMS aircraft operators shall adhere to EMS Agency Policy #3010, *EMS System Communications Standards*.
2. EMS Aircraft shall maintain the capacity to communicate with the San Francisco Emergency Communications Department (ECD), Landing Zone Operations, and the Base and Receiving Hospitals on the designated frequencies listed in Section IV.I.
3. The EMS Agency retains the right to inspect EMS aircraft communications equipment to assure compliance with standards set forth in this policy.

IV. PROCEDURE

A. Patient Clinical Conditions Warranting Air Medical Transport

EMS aircraft may be used in the following clinical situations:

1. The patient's condition warrants rapid transport, and transport by land would be hazardous or delayed because of road or traffic conditions (> 20 minutes);
2. The patient meets trauma center destination criteria, but San Francisco General Hospital (SFGH) is unavailable and there is an extended (> 20 minutes) ground transport time interval to a regional designated trauma center;
3. Air transport is recommended for patients who meet trauma center destination criteria if the time from the initial incident to the patient's expected arrival at the trauma center via ground ambulance will exceed 30 minutes, **AND** the length of ground transport would pose additional risk to life or limb;
4. Critical trauma patient interfacility transfers from SFGH to another Level I Adult or Pediatric Trauma Center;
6. Other conditions as deemed warranted by the IC and Medical Group Supervisor (MGS or IC designee) in consultation with the Base Hospital Physician.

B. Field Situations Warranting Air Medical Transport

The following field situations warrant the use of air medical transport:

1. MCIs involving trauma when SFGH trauma center capacity is saturated;
2. Inaccessibility to the scene by ground personnel or equipment;
3. Air ambulance service shall be initiated for MCIs involving one or more of the following:
 - a. Five or more patients meeting trauma center physiologic and/or anatomic triage criteria (reference EMS Agency Policy #8000, *EMS MCI Policy*);
 - b. Five or more patients with partial thickness burns greater than 10% total body surface area or third-degree burns;
 - c. A large number of casualties such that Receiving Hospitals in San Francisco will be saturated and hospital Mutual Aid from other Bay Area counties will be requested by the IC (after consultation with the Base Hospital MD).

C. Initiating EMS Aircraft Response

1. *Field Emergency Response*

- a. For field emergency responses, the decision to request an EMS aircraft is based on the medical and scene management considerations in Section IV.A and IV.B.
- b. During an MCI, the IC is in charge of all emergency operations on scene.
- c. The decision to request an EMS aircraft for a field emergency response shall be made by the IC or his/her designee, upon:
 - 1) the advice of on-scene medical personnel; and/or,
 - 2) the suitability of the scene for helicopter operations; and/or
 - 3) the decision made by the IC and Medical Group Supervisor in consultation with the Base Hospital Physician/designee.
- d. All requests for an EMS aircraft field response shall be made through the San Francisco Fire (SFFD) Dispatch at the ECD (phone: 415-558-3291 or 415-558-3268). The following information must be provided to the ECD by the IC or his/her designee:
 - 1) Number of patients;
 - 2) Type and extent of injuries;
 - 3) Location of nearest landing site (use Thomas Brothers Map coordinates or Longitude and Latitude, if possible);
 - 4) Nearest landmarks (e.g., highways, railroad tracks, water towers);
 - 5) Weather conditions as reported from the landing site (especially high winds, fog or visibility problems);
 - 6) Radio frequency and call sign of the requesting agency/provider.
- e. The IC will determine the EMS landing site from the list of pre-designated sites or an ad-hoc site based on scene management considerations.

2. *Out-of-County Field Emergency Response*

- a. For transfer of critical patients from scene calls originating outside of San Francisco to a San Francisco Receiving Hospital:
 - 1) The EMS aircraft will contact ECD Fire Dispatch (415-558-3291 or 415-558-3268) and identify the EMS landing site to be used.

3. *Interfacility Transfers*

- a. For interfacility transfers of critical patients from San Francisco to an out-of-county Receiving Hospital, the transferring facility will contact ECD Fire Dispatch (415-558-3291 or 415-558-3268) and identify the EMS landing site to be used for patient pickup in San Francisco. **Critical pediatric trauma patient transfers from SFGH Trauma Center to a regional Pediatric Trauma Center may require use of Rolph Field EMS Landing site if ground transport is extremely delayed. EMS landing sites are reserved as “backup” for ground transport in rare circumstances when ground transport is extremely delayed. Without a hospital helipad, secondary ground transport time intervals to and from an EMS landing site make interfacility air transport a remote fall-back option, if delayed ground transport or non-transfer clearly present a threat to the life of the patient.**
- b. Interfacility transfers from out-of-county to San Francisco will use the San Francisco International Airport (SFO) or other out-of-county heliports. EMS landing sites are reserved for emergency landings only.
- c. Transferring/receiving air ambulance companies or hospitals with incoming patients will arrange for interfacility ground transfers prior to departure from point of origin. San Francisco 911 ambulance service is not available for interfacility transports from SFO or out-of-county heliports.

D. Notification

1. The ECD Fire Dispatch will notify all responding agencies when an EMS aircraft has been requested for response to an EMS landing site/helispot (SFFD, San Francisco Police Department [SFPD], or other first responder agency).
2. Cancellations shall only be made through the IC or designee.

E. Activation

1. ECD Fire Dispatch will contact the “Call First” air ambulance company as noted on the EMS system view screen. (These numbers are also listed in Appendix A of this policy.)

F. Mobilization

1. The EMS aircraft (on the primary provider list approved by the EMS Agency) that is up for first call (as noted on the EMS System view screen) will respond within a 15 minute call to arrival time interval. If the 15 minute ETA is not possible for the initial air ambulance company, the company will notify ECD Fire Dispatch (415-558-3291 or 415-558-3268 or transferring facility), and another air ambulance company listed on the EMS System view screen will be called. (These contact numbers are also listed in Appendix A of this policy.)

G. Deployment of Ground Crews

1. A Battalion Chief and engine company of the SFFD will respond to the designated EMS landing site/helispot for fire suppression support, and to clear the area of people, animals, and any temporary obstructions.
2. A SFFD Rescue Captain (RC) will respond as Landing Site Manager under direction of the Battalion Chief. The RC - Landing Site Manager is responsible for aircraft communications and oversight of ground to air patient transfer.
3. The SFPD will send 1 Sergeant and 4 officers to the designated EMS landing site/helispot to secure the landing site perimeter for safety considerations.
4. Transferring/receiving air ambulance companies or hospitals with incoming patients will arrange interfacility ground transfers from SFO or an out-of-county heliport.

H. Destination

1. During an MCI or disaster, the EMS aircraft crew will determine the destination for patients requiring air medical evacuation. The EMS aircraft and/or its dispatch center will contact ECD Fire Dispatch with the Receiving Hospital information. Enroute the EMS aircraft will relay pertinent patient information to the Receiving Hospital.
2. Determination for destination will be based on the shortest ETA to a facility best suited for definitive care of the patient.
3. The EMS aircraft pilot will have the final decision as to destination based on weather and flight safety considerations.

I. Communication Procedure

1. *General*

- a. For field emergency air response, ECD Fire Dispatch will contact the “Call First” air ambulance company dispatch listed on the EMS System view screen under “EMS Flight Services”. (These contact numbers are also listed in Appendix A of this policy.)
- b. For interfacility transfers, EMS aircraft to hospital communications will be via landline for initial notification, and HEARNet (155.34 (PL-156.7) for air to hospital communications enroute to Receiving Hospital. See Appendix D for Hospital “ring-down” codes for the HEARNet radio. ECD can ring-down a hospital if aircraft does not have ring-down capability.

2. *Frequency Assignments*

- a. **Emergency Communications Department to/from EMS Aircraft**
 - 1) All EMS aircraft shall communicate directly with ECD Fire Dispatch using CALCORD (VHF frequency 156.075 transmit; 156.075 receive) (CSQ). (Depending on scene location, ECD may not be able to monitor CALCORD traffic.)
 - 2) Backup channel is Fire White 1 (California Fire White [154.280] on VHF).
 - 3) A third backup frequency is on the 800 MHz radio system: Channel C9 (Charley 9) (Mutual Aid Channel 9, low level Firemars 821.9125 CCTSS 156.7 transmit; 866.9125 CCTSS 156.7 receive)
 - 4) ECD Fire Dispatch landline is 415-558-3291 or 415-558-3268.
 - 5) The EMS aircraft responding to field emergencies will contact ECD Fire Dispatch on landline or radio while enroute to the scene to confirm radio frequency and ground contact/incident identifier.

b. Landing Zone Operations to/from EMS Aircraft

- 1) All EMS aircraft shall communicate directly with EMS System prehospital ground crews using VHF radios on CALCORD channel: 156.075 transmit; 156.075 receive (CSQ). (Depending on scene location, ECD may not be able to monitor CALCORD traffic.)
- 2) Backup channel is Fire White 1 (California fire White [154.280]) on VHF radios.
- 3) A third backup frequency is on the 800 MHz radio system: channel C9 (Charley 9), 821.9125 CCTSS 156.7 transmit; 866.9125 CCTSS 156.7 receive.
- 4) The ground crew will be referred to as _____ LZ (call name determined by specific location of landing site).

c. Base Hospital and Receiving Hospitals to/from EMS Aircraft

- 1) All EMS aircraft shall communicate directly with Receiving Hospitals using the HEARNet, 155.34 (PL-156.7). The “ring down” name for SFGH is “Mission Base”. Hospital-specific “ring down” codes are listed in Appendix D. ECD Fire Dispatch can ring down hospitals if aircraft do not have DTMF capabilities. SFGH triage desk telephone is 415-206-8901. Telephone to Base Hospital Physician is 415-647-4747.
- 2) If HEARNET is unsuccessful, a backup channel for EMS Aircraft to Base Hospital is UHF Med-9, 462.95 (PL-167.9) 467.9500 transmit / 467.9500 receive (CTCSS – 167.9).

d. Air to Air

- 1) The air-to-air channel among EMS aircraft is VHF 123.025.

J. Quality Assurance

1. Activation of Emergency Air Ambulance Service is a sentinel event and will be reviewed by the San Francisco Trauma System Audit Committee.

Appendix A1: AIR AMBULANCE PROVIDERS CONTACT INFORMATION

Air Ambulance Dispatch phone numbers are listed below and on the EMSsystem view screen. The company up for “Call First” is also identified on the EMSsystem view screen.

AIR AMBULANCE PROVIDERS:

CALSTAR

1. Concord (CALSTAR I)
2. Gilroy (CALSTAR II)
3. Auburn (CALSTAR III)
4. Ukiah (CALSTAR IV)
5. Salinas (CALSTAR V)
6. Lake Tahoe (CALSTAR VI)
7. Santa Maria (CALSTAR VII)
8. Hayward (main office, maintenance)

Dispatch number: 831-335-0341

REACH

1. Santa Rosa (REACH I)
2. Concord (REACH III)
3. Acampo (REACH II)
4. Redding (REACH V)
5. Lakeport (REACH VI)
6. Marysville (REACH VII)
7. Corevalis, Oregon (REACH VIII)

Dispatch number: 800-338-4045

Life Flight of Stanford Health Care

Stanford Health Care, Palo Alto

Dispatch number: 800-321-7828

Appendix A2: BAY AREA AIR AMBULANCE and AIR RESCUE PROVIDERS

Air Ambulances

COMPANY	DISPATCH PHONE	CLASS	STAFF	RESCUE CAPABILITIES	HOURS OF OPERATION
CALSTAR (based in Concord, Gilroy, Vacaville)	1-831-335-0341	Air Ambulance	RN (ALS)	None	24/7
REACH (based in Concord, Santa Rosa, Sacramento)	1-800-338-4045	Air Ambulance	RN (ALS)	None	24/7
Stanford Lifeflight (based at Stanford Hospital)	1-800-321-7828	Air Ambulance	RN (ALS)	None	24/7

Air Rescue Units

COMPANY	DISPATCH PHONE	CLASS	STAFF	RESCUE CAPABILITIES	HOURS OF OPERATION
CHP (ALS and BLS units based in Napa.)	(Confidential allied agency line published at dispatch)	ALS Rescue (Napa); BLS Rescue (Napa)	EMT-P (ALS) EMT (BLS)	Hoists baskets, people—cable that runs down and back up to helicopter, vertical line up to 150 ft.; can carry 1 patient only; can do cliff/boat/water rescue (have to pick up a rescue swimmer in San Francisco to do water rescue) Hover and 1-skid operations	Medical missions: 10am – 4am, 7 days per week. Non-medical missions: 24/7

Air Rescue Units (cont'd.)

COMPANY	DISPATCH PHONE	CLASS	STAFF	RESCUE CAPABILITIES	HOURS OF OPERATION
Coast Guard Air Station (based at SFO)	(published at Dispatch) Water rescue missions OK to request directly; All other requests must have a mission number issued by State OES through SF OES and Homeland Security.	Rescue (mission specific; can get EMT rescue swimmer, otherwise crew is not medical capable)	EMT rescue swimmer (must be requested at time of dispatch—mission specific)	Hoist baskets, people; designed to pull people off water or off boats; HH-65 Dolphin aircraft	24/7
EAST BAY REGIONAL PARK FIRE	510-881-1833	ALS/BLS Rescue (Do not always have a paramedic—volunteer flight paramedic program; can take ground paramedic from scene)	EMT-1 or EMT-P	Do search; do not do short haul (with a line attached to the helicopter); no hoist; can land, get out and try to help. Can transport 1 patient at a time.	Day only; on-call at night but need some ambient light for operations
SONOMA COUNTY SHERIFF'S DEPT	707-565-2121	ALS Rescue	EMT and Paramedic (ALS)	Vertical long-line—up to 200 ft.	10 hours per day; nocs on-call
California AIR NATIONAL GUARD (stationed at Moffett Field)	(published at Dispatch) Request must have a mission number issued by State OES through SF OES& Homeland Security.	Auxiliary Rescue	No medical staff	Do not search, but will rescue; can transport rescue teams on Hueys, Blackhawk, Pavehawk (goes 1000 miles; carries more than 20,000 lbs.)	24/7

Appendix B: EMS LANDING SITES (page 1 of 2)

ID	SFD BATT.	LOCATION	STREET	CROSS STREET	LATITUDE	LONGITUDE	NEAREST HOSPITAL
SF 1	1	Galileo High School football field	Polk	Bay	37° 48'	122° 25'	Chinese, St. Francis, CPMC
SF 2	1	Nob Hill (stop traffic on California St.)	1000 block California	Taylor & Mason	37° 47'	122° 25'	Chinese, St. Francis
SF 3	1	Ferry Park	Drumm	Washington	37° 47'	122° 23'	Chinese, St. Francis
SF 4	1	Washington Square	Union	Stockton	37° 48'	122° 24'	Chinese, St. Francis
SF 5	2	James Lang Playground	Turk Street	Octavia Street	37° 46.897'	122° 25.527'	ST FRANCIS
SF 6	3	Jackson Playground	17 th Street	Arkansas Street	37° 45.903'	122° 23.926'	SF GENERAL
SF 7	NONE IDENTIFIED						
SF 8	3	Treasure Island—Soccer Field/asphalt parking lot	9 th Street	Avenue "D"	37° 49.411'	122° 22.410'	ST FRANCIS; SF GENERAL
SF 9	3	Yerba Buena Gardens	Mission	3 rd & 4 th Streets	37° 47'	122° 24'	St. Francis, SFGH
SF 10	4	Kimball Playground	Pierce Street	O'Farrell Street	37° 46.995'	122° 25.527'	CPMC-PACIFIC; KAISER SF
SF 11	4	Lafayette Park: grass clearing at the Southeast corner of Washington & Laguna	Laguna	Washington	37° 47'	122° 25'	CPMC, St. Francis
SF 12	4	Moscone Playground	Chestnut Street	Buchanan Street	37° 48.079'	122° 25.995'	CPMC-PACIFIC
SF 13	7	Big Rec—Golden Gate Park	Near Lincoln Way	Between 5 th & 8 th Ave.	37° 46.002'	122° 27.760'	UCSF
SF 14	7	Kezar Stadium—Golden Gate Park	Near Frederick	Willard	37° 46.042'	122° 27.296'	UCSF
SF 15	7	Polo Field—Golden Gate Park	Near Lincoln Way	Between 31 st & 36 th Avenues	37° 45.932'	122° 29.652'	VA Med Cntr; UCSF
SF 16	7	Rossi Playground	Arguello Blvd.	Edward Street	37° 46.702'	122° 27.499'	ST. MARY'S
SF 17	NONE IDENTIFIED						
SF 18	8	South Sunset	40 th Avenue	Wawona Street	37° 44.184'	122° 29.840'	VA Med Cntr, UCSF
SF 19	8	West Sunset #3 Playground	39 th Avenue	Ortega Street	37° 44.967'	122° 29.981'	VA Med Cntr, UCSF
SF20	8	West Sunset #2 Playground	41 st Avenue	Pacheco Street	37° 45.069'	122° 29.867'	VA Med Cntr, UCSF

Appendix B: EMS LANDING SITES (page 2 of 2)

ID	SFFD BATT. STN.	LOCATION	STREET	CROSS STREET	LATITUDE	LONGITUDE	NEAREST HOSPITAL
SF 21	9	Balboa Playground	Ocean Avenue	San Jose Avenue	37° 43.355'	122° 26.725'	ST LUKES
SF 22	9	Crocker Amazon Field	Geneva Street	Moscow Street	37° 42.777'	122° 26.004'	ST LUKES
SF 23	10	Candlestick Park Parking Lot—K-railed area between gates "E" & "F"	North of traffic control tower	Across from R.V. Park	37° 42.83'	122° 23.12'	SF GENERAL
SF 24	NONE IDENTIFIED						
SF 25	6, 10	Rolph Playground	Cesar Chavez (Army)	Potrero Avenue	37° 44.979'	122° 24.362'	SF GENERAL; ST. LUKES
SF 26	NPS*	Crissy Field (NPS* LZ# 63)	Marine Drive	Access through Marina Gate, W on Marine Dr.	37° 48.15'	122° 28.01'	VA Med Cntr
SF 27	NPS*	Presidio Main Parade Grounds (#65)*	Montgomery	Lincoln	37° 48.02'	122° 27.29'	VA Med Cntr
SF 28	NPS*	Fort Scott Parade Grounds (#66)*	Ralston	Stone	37° 48.04'	122° 28.28'	VA Med Cntr
SF 29	NPS*	Baker Beach Parking Lot (#67)*	Battery Chamberlin	Bowley	37° 47.34'	122° 28.60'	VA Med Cntr
SF 30		VA Med Center Helipad	Clement Street	42 nd Ave.	37° .78.22	122° .50.42	VA Med Cntr
SF 31		UCSF Mission Bay Helipad	16 th Street	3 rd Street	37° .76.69	122° .39.08	UCSF Mission Bay

* NPS = National Park Service; Presidio Fire Department

**Appendix C: REGIONAL TRAUMA CENTERS
 Contact Information and Flight Time Intervals**

TRAUMA CENTER	PHONE CONTACT	FLIGHT TIME INTERVAL from central San Francisco
San Francisco General Hospital (air transport to/from Rolph Field EMS Landing site)	ED CHARGE NURSE: 206-8111	3 minute air time (to Rolph Field @ C Chavez and Potrero [addnt'l 3 minute ground transport interval])
Oakland Children's (Level II pediatric)	ED: 510-428-3240	5 min.
Eden Hospital (Level II) (Castro Valley)	ED: 510-889-5015	10 min.
John Muir Hospital (Level II) (Walnut Creek)	ED: 925-939-5800	10 min.
Stanford Medical Center (Level I adult & Level I pediatric)	ED: 650-723-7337	12 min.
Regional Medical Center (Level II adult)	ED: 408-729-2841	20 min.
Santa Clara Valley Medical Center (San Jose) (Level I)	ED: 408-885-6912	20 min.
Santa Rosa Memorial (Level II)	ED: 707-525-5207	25 min.
UC Davis (Level I adult & pediatric)	ED: 916-734-3790	35 min.

**Appendix D: HEARNet RADIO
HOSPITAL “RING DOWN” CODES**

All Call	999	
CHINESE	246	
CPMC	272	
R K DAVIES	382	
KAISER	573	
SETON	738	
SFGH	734	727cp
ST FRANCIS	783	
ST LUKES	785	
ST MARYS	786	
UCSF	827	
VA	826	
EMS Section	367	
	368	
	277	
NPS - GGNRA	677	
LHH	544	
SSF KAISER	547	
	681	
IRWIN	462	
OES	637	