



SPECIAL EVENT SERVICES



EVENT :

Chargers vs Jags 09/25/2022

LOCATION :

SoFi Stadium

1001 S. Stadium Drive, Inglewood, CA 90301 (Enter off of Century Blvd. for personal vehicles)

PARKING :

Lot RED (See attached Map)

You should receive a parking pass if you are driving your personal vehicle.

Parking passes are limited and carpooling is HIGHLY encouraged.

Normally, you enter the parking lot from Doty & Century Blvd. Look for traffic signs with SoFi instructions for employees. DO NOT BE LATE! It can take up to 45 minutes just to get to the parking lot! Please arrive and be at gate 10-B by **0700**. **Non-Ambulance crews are not to clock in until you arrive at gate 10-B.**

If you are driving an ambulance, you will report directly to parking lot **F**. (Enter off of Pincay x Varus for ambulances) and walk to gate 10-B. *Only unit 100 with equipment will park in VIP lot 11. All other ambulances will stage in lot **F** until AFTER the Fire Department briefing.

Unit 100 will be stocked with red backpacks #1 to #10 and all of the Sonim phones. Unit 100 will park at **Gate 10-B**, off-load these to the new primary first-aid room located at just inside Gate 10-B.

ARRIVAL :

From the RED parking lot, walk to the employee check in area between gate 10 and 11 (See attached Map)

We will meet at employee check-in at **0700**. This is the time that you will be assigned a position and wristband.

ASSIGNMENTS :

Everyone will have a specific assignment for the event. When you receive your assignment, please remain in your area. Do not wonder or explore any areas you are not assigned to. Your assignment will include a radio call sign. You must memorize your radio call sign.

We operate under system status so it is possible that you will be moved to different areas within the event. Your radio call sign will not change once assigned.

*Everyone must wear a mask while treating patients. Masks should be a solid color and without branding.

FIRST-AID STATIONS:

All first-aid stations have a name/I.D. (See attached Maps)

First-Aid station assignments will include 2 EMT's. 2 EMT's will respond to calls from their assigned First-Aid station. Do not travel to any location without all of your equipment!

First-Aid stations are fully stocked. Please familiarize yourself with all equipment and supplies immediately when you arrive. Contact a Supervisor (See contact list) if you are missing anything.

First-Aid stations contain over-the-counter medications. Under no circumstance are you to directly dispense or suggest any medications. You may allow a patient to acquire a single dose or packet on their own, but you must document it on the declaration of evaluation form located inside each First-Aid box. (See sample). If your box doesn't have the medication, refer patient to the main first-aid room (Rampart) on level 6 (South/East side).

CALLS & PATIENT CONTACTS :

Still-Alarms: Immediately inform Dispatch via radio/sonim of any still-alarm or walk in situation. They will need to know that you are now unavailable for call assignments. If someone asks you to follow them to a patient, ask exactly where the patient is located. If it is outside your assigned area, contact dispatch. They may send a closer team. *Masks shall be worn on EVERY patient contact!

Call Assignments:

When you are dispatched, immediately proceed to the dispatched location with all of your equipment.

If you are having trouble locating the Patient location, use the radio or sonim and ask for help. Look for SoFi staff, illuminated traffic wands and/or flashlights that may indicate the call location.

When you reach the patient, state that you are "On Scene" or "On Scene and locating" Give Dispatch the following info as soon as you have it:

Age, Gender, LOC, Chief Complaint, Patient Location and PCR number.

Patient destination will normally be the **"RAMPART"** First-Aid station on the 6th floor.

Depending on the location, Dispatch may send a QRV to you or to a meeting place for transportation to Rampart.

PATIENT CARE REPORTS :

You will be utilizing paper patient care reports for all patient contacts. Bring a good ball-point pen!

Please familiarize yourself with the PCR. (See attached example).

If you are first on-scene, you will start a PCR. Fire will do their own documenting. In either case, you will put the FD run number on your PCR so the documents can be matched up. AMA documentation must be pre-authorized by dispatch if FD Paramedics are not on scene.

PCR's will be done for **ALL patient contacts** unless someone just has a medical question or they are requesting medical supplies (Band-Aid, ice pack, etc). Requests for meds or supplies shall be documented on the medication log and turned in at the end of the event. The PCR is in triplicate so press down firmly when writing. We do not give patients any copy of the PCR. The AMA is on the back of the last page. Dispatch (SoFi Comms) will request a PCR number from you for each incident. This is the printed number in the top right corner of the PCR.

COMMUNICATIONS :

Dispatch will operate on a dedicated medical channel (Channel 3 = **SECURITY 1**).

Each team will be issued at least one portable radio and a Sonim phone. These are your responsibility.

You must always monitor the radio / Sonim. Remember your radio call sign.

You must always be reachable by radio / Sonim phone. Headsets shall be worn at ALL times!

When you are dispatched, acknowledge the call by reading it back. Do not just reply with "Copy". Ensure that you ALWAYS update your status with SoFi Comms. They must ALWAYS know your current status so make sure you are updating them **anytime** your status changes. If you go *"On-scene locating"*, make sure you update to *"On-scene with patient"* when you have located. Make sure you are always aware of the radio's channel, volume, and battery status. Communication at this event is a KEY item of monumental importance. Successful communications lead to a successful event!

AMBULANCE DUTY :

Monitor your radio and Sonim!!!

If you are assigned to an ambulance, you must be in the immediate vicinity of the ambulance at all times. Do not wander away from your ambulance. Know how you will get to the hospital. The parking lot is full of bollards (Short vertical posts that raise and lower out of the street). Watch your speed while in the parking lot or in the tunnel. There will be pedestrians and golf carts everywhere you drive. Watch out for them! Code 3 lighting is encouraged. Siren use should be kept to an absolute minimum while on property. No siren use in the tunnel or underground.

CONDUCT :

Safety begins with you! Maintain situational awareness at all times.

You represent EMS and our company. Please present yourself professionally at all times. This event requires you to be matching in full uniform. **NO T-shirts! NO Hats! NO VIDEOS OR PHOTOS** while working the event! If you are issued a First-Aid room key, you must wear the key around your neck at all times! You are never to give anyone else the key you are issued for the day. No exceptions!

PHONE SERVICE:

- Verizon: 4G and 5G
- AT&T: Wi-Fi calling
- T-Mobile/Sprint: Wi-Fi calling
- Others: Wi-Fi calling

WiFi Calling Setup

Go to Settings on your iOS device. Within Settings, navigate to Cellular.

In Cellular, navigate to Wi-Fi Calling, then Enable Wi-Fi Calling on this iPhone if its not enabled

Android Configuration

To enable Wi-Fi Calling, you can select the Wi-Fi Calling icon in the fast menu (Pulling down the notification shade). Additionally, you can go to Settings.

Within Settings, navigate to Network & Internet > Connections.

Within Network & Internet Connections, search for "Wi-Fi Calling".

If you do not find Wi-Fi Calling, you may need to navigate to "Wi-Fi Preferences" or "Call" which will need to be Enabled.

NOTE: Android Settings are different from phone to phone, if Wi-Fi Calling is not in the Connections menu, you can type in "Wi fi calling" in the search bar:

- a. Note that a restart may be required following enabling Wi-Fi Calling.

It is recommended to print this document and bring it with you to the event.

CONTACT LIST :

Event Manager Mike Henderson 818-822-0960

Event Supervisor David Granados 310-892-4749

On-Site Dispatch -Radio or Sonim: **SoFi.Comms1 or SoFi.Comms2**

Field Supervision **on MCC.SoFi.Sup1**

Employee Checklist

Non-Ambulance Crews

1. Park in lot **RED**. Do not be late! Do not be late!
2. Walk to gate 10-B (Between gates 10 & 11).
3. Clock in.
4. Attend roll-call, receive assignment and wristband.
5. Return to parking lot F for Fire Department briefing.
6. Return to gate 10-B. All bags must be x-rayed.
7. Walk to Primary first aid room "RAMPART" (Just inside of gate 10-B) and receive assigned equipment.

100 Ambulance Crew

1. Enter the property from Pincay and Stadium and Drive to parking lot 11 VIP.
2. Arrive at gate 10-B and check in with lead supervisor.
3. Immediately off-load Sonims and all backpacks into new primary first aid room. (Located at gate 10-B)
4. Walk to parking lot F for Fire Department briefing.

All other Ambulance Crews

1. Enter the property from Pincay and Varus and Drive to parking lot F.
2. Walk to gate 10-B for wristbands and Sonim phones.
3. Walk to parking lot F for Fire Department briefing.

ALL Crews:

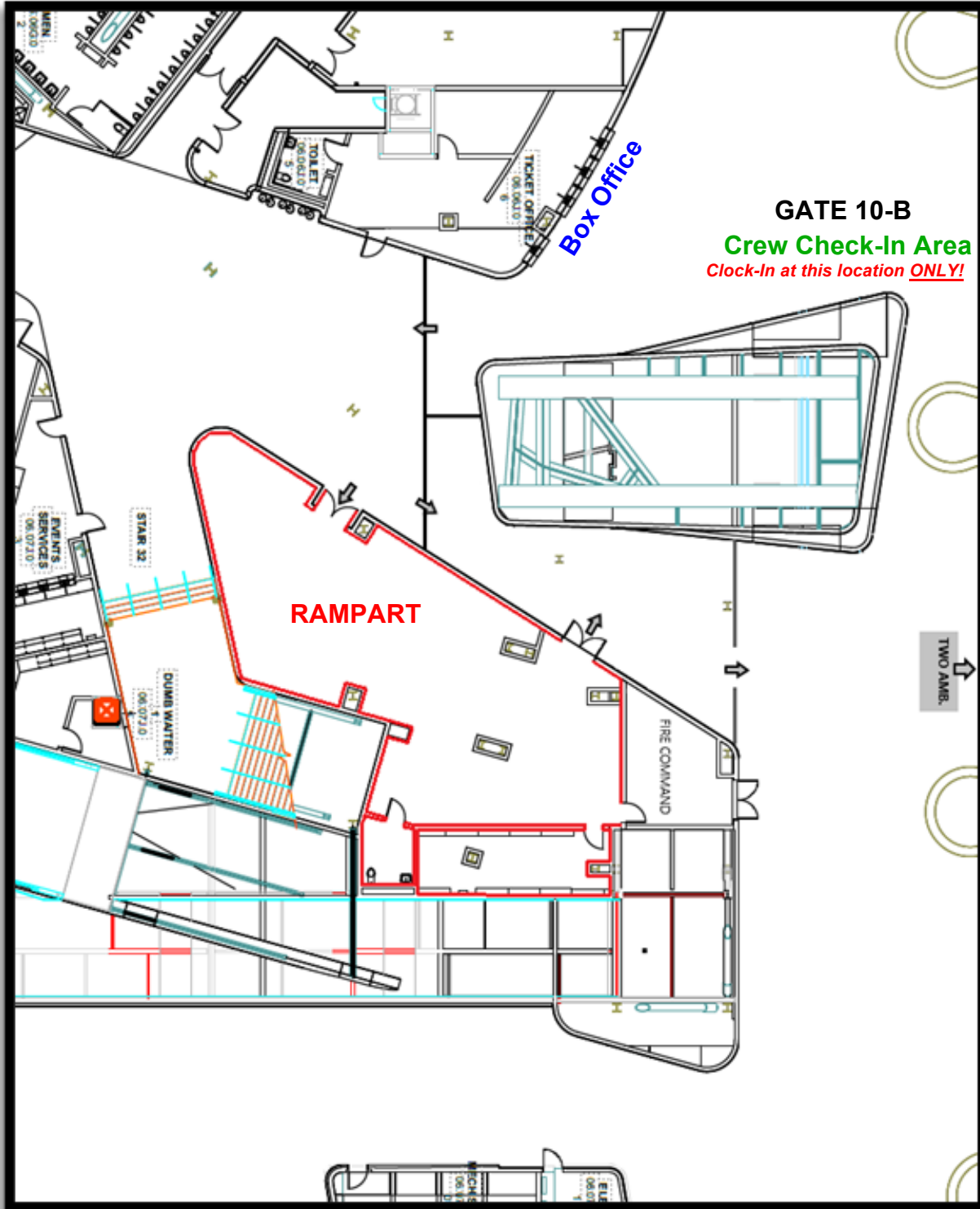
The stadium *normally* provides 1 (one) lunch meal for us. I recommend that everyone bring additional snacks, meals and drinks to supplement the provided meal. It's a long day so plan ahead.

SoFi Stadium PARKING ZONES

| | | | |
|--|---|--|---|
|  Green Zone (Lots A, B) |  Pink Zone (Lots I, J, P, Q) |  Blue Zone (Lots O, N) |  Rideshare (Drop off / Pick Up) |
|  Brown Zone (Lots C, D) |  Purple Zone (Lots K, L, M) |  Yellow Zone (VIP Parking) |  ADA Route (Drop off / Pick Up) |
|  Orange Zone (Lots E, F, G, H) |  Platinum Zone (Valet) |  Red Zone |  Entries |



Level 6 SE First Aid (Primary)



- N/A

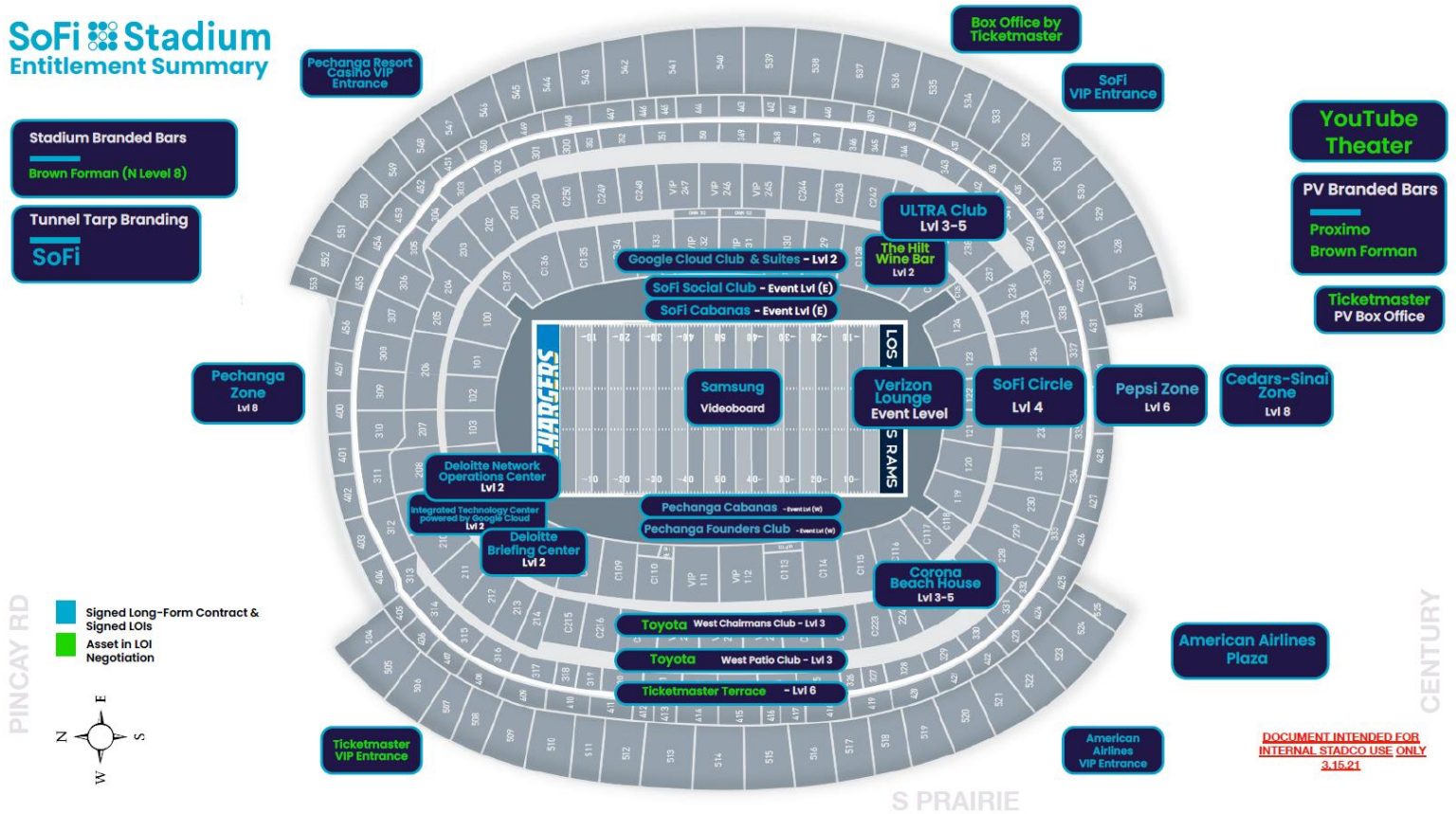
Stadium Partners

SoFi Stadium Entitlement Summary

Stadium Branded Bars

Brown Forman (N Level 8)

Tunnel Tarp Branding



SoFi Stadium

Seating Layout



ADDITIONAL INFORMATION

- Seating Section Breakdown - Level 2: 100 seating section, Level 3: 200 seating section except 227-236), Level 4: 227-236 seating sections, Level 6: 300 seating section, and Level 8: 400 and 500 seating sections
- Levels that go all the way around are levels for guests to use are levels 2 and 6. Level 3 has no south side, level 4 has no north side, and level 5 does not have a north or south.
- The clear bag policy will be in effect for non-credentialed staff. All noncompliant bags will be screened via X-Ray and tagged upon inspection.
- To access wifi use #sofistadium. Reminder: non-Verizon users need to access wifi calling in the building
- All elevators will be available for use. One (1) elevator at Entry 7 will be for Rams use from Level 1 to Level 5.
- All escalators except Entry 7 escalator from Level 2 to Level 6 (ESC 03/04, ESC 11/12, ESC 19/20, and ESC 29/30) will be in use.
- Guest Services Centers are located at Level 2 Southwest Level 3 North, Level 4 South, Level 6 Southeast, and Level 6 North Kiosk, and Level 8 Southwest Kiosk. Lost and Found items can be turned in at any center. Guests may contact guestservices@hollywoodparkca.com for inquiries.
- Sensory toolkits and assistive listening devices, will be available at VIP Entry 11 Guest Service Center.
- Mamava Pod at Northeast on Level 6 and Southeast on Level 4 Northeast are available to use.
- Four (4) bag valets are located outside for a \$20 fee at the following locations: Northeast on Touchdown Dr., Northwest on District St., Touchdown Dr., Southwest on Champions Way, and South/Southeast on Champions.
- Wheelchair escorting services will be available from the entries to seats and back.
- The following merchandise locations are available: The Equipment Room, Level 2: Northwest Section 106, Level 6: North Blooming Onion Portable Section 305, and Level 8: Northeast Section 506.
- The following concession stands will be available: Level 2: Northwest, Northeast, and South, Level 3: East and West Patio Club, Northwest, North, and Northeast, Level 4: Southwest and South, Level 6: East and West Terrace Club, Northwest, Northeast, Southeast, South, and Southwest, and Level 8: North, East, Southeast, Southwest, and West.
- Alcohol cutoff will be at 6:00pm for general admission and 6:30pm for VIP guests.

BREAKSPACES AND MEALS

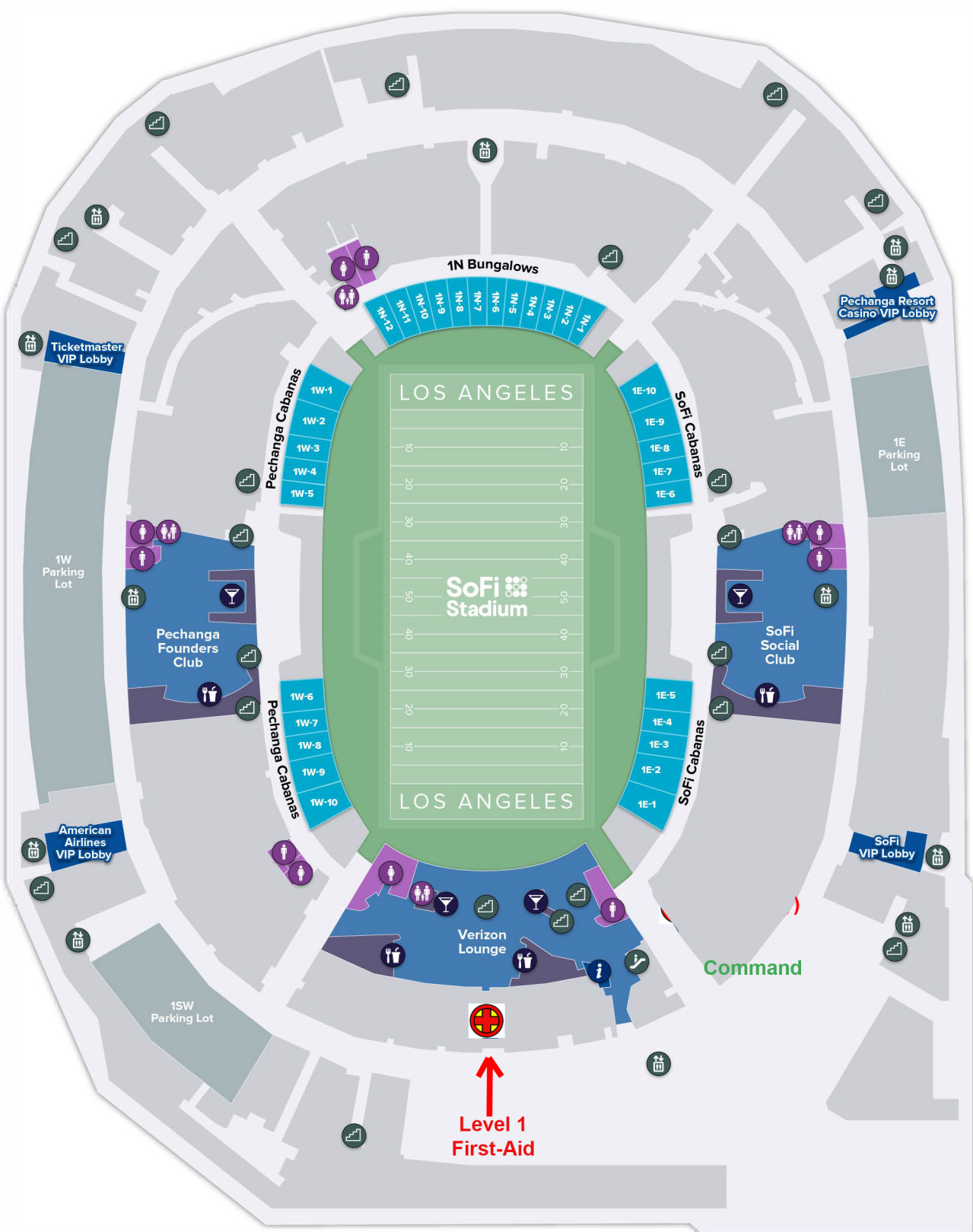
- Designated break location for all Media is on Southwest Level 7 inside Press Box.
- Please check with your Supervisor for specific designated break location information. All breakspaces and the Broadcast Compound will be in use for breaks.
- Complimentary meals are available to all Team Members from 4:30pm-6:30pm. If working on Levels 1-5 meals are to be picked up from only the Level 1 South Broadcast Compound. If working at the Entries or Levels 6-8 meals are to be picked up from one of the three (3) Level 6 breakrooms. Please do not remove meals from any break areas.
- Breakrooms are located at the following areas: Level 1: South Broadcast Compound, Level 2: Northeast 02.37G.01, Level 3: Southeast 03.05H.01 and Northwest 03.27G.01, Level 4: East 04.04H.01 and Southwest 04.17G.04, Level 5: Southwest 05.16G.05, Northeast 05.37G.01, Level 6: Southwest 06.16H.01, Northwest 06.28J.01, and Northeast 06.40H.01, and Level 8: 08.17H.01.

COMMUNICATION & EMERGENCY INFORMATION

Please use your dedicated channel to reach
Event Command Center

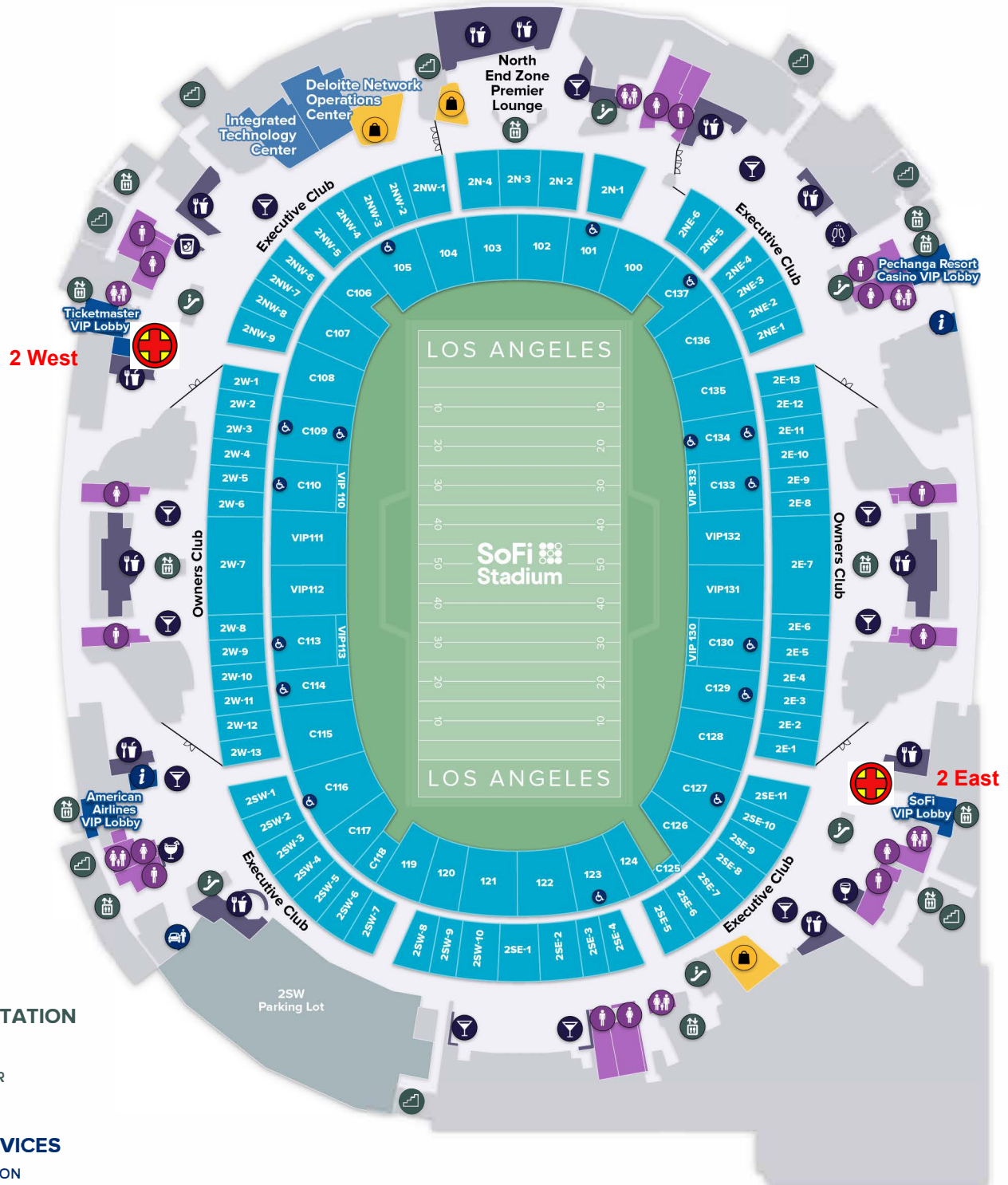
To reach Event Command Center (ECC) via
phone: (424) 541-7222





SoFi Stadium

LEVEL 2 (Executive Club, Executive Suites, Owners Club, Owners Suites, Premier Seats 100)



VERTICAL TRANSPORTATION

- ELEVATOR
- ESCALATOR
- STAIRS

GUEST SERVICES

- INFORMATION
- FIRST AID
- ADA SEATING
- VALET & VIP PARKING

RESTROOMS

- MEN'S RESTROOM
- WOMEN'S RESTROOM
- FAMILY RESTROOM

FOOD & DRINK

- BAR
- CHAMPAGNE BAR
- WINE BAR

- WHISKY BAR

- TEQUILA BAR

- SUSHI, ASIAN, DELI, PATTY MELT, BURGER, TACOS, BAJA BOWL, PIZZA, CHARCUTERIE

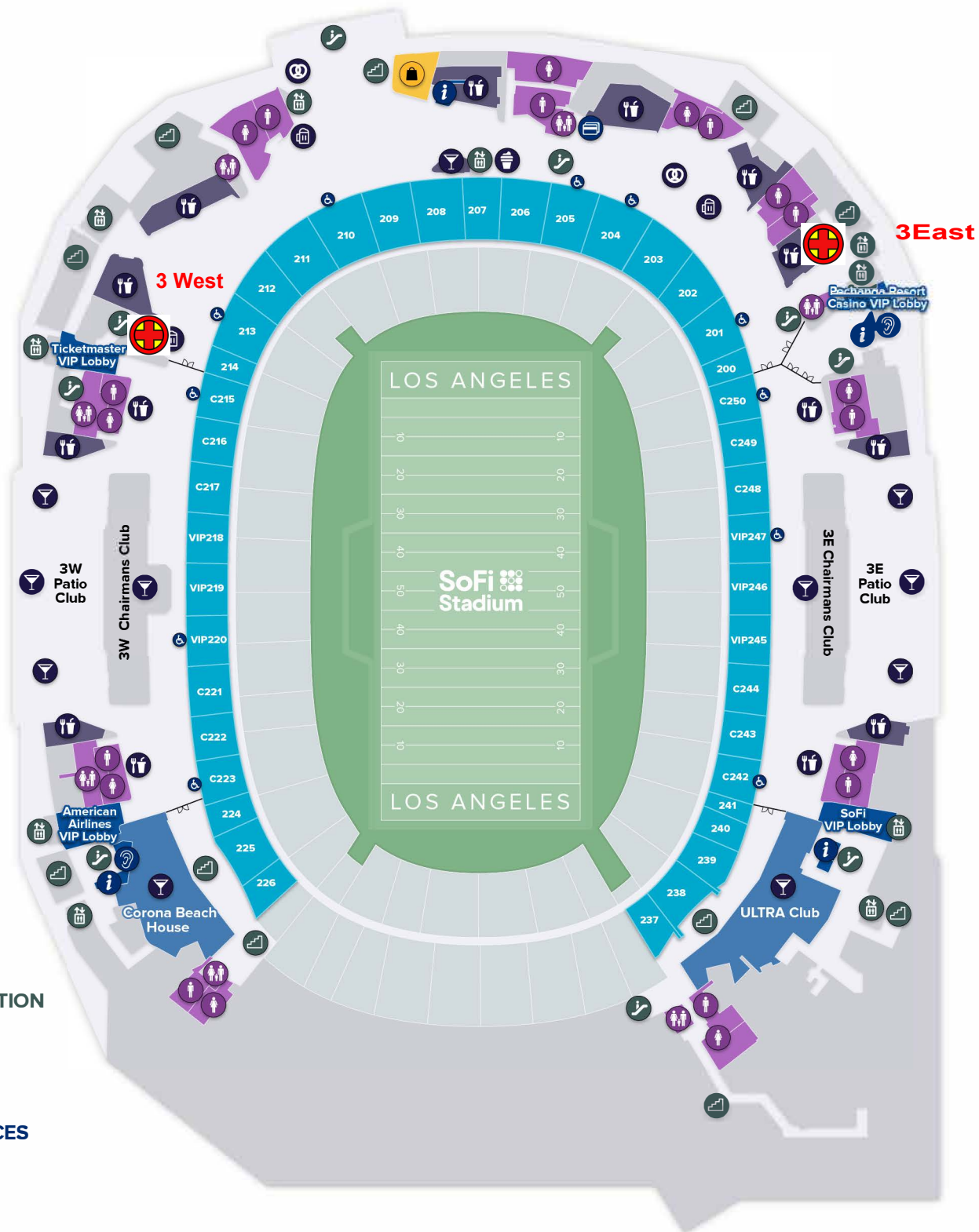
RETAIL

- TEAM STORE



SoFi Stadium

LEVEL 3 (Club Seats 200, Premier & Reserved Seats 200)



VERTICAL TRANSPORTATION

- ELEVATOR
- ESCALATOR
- STAIRS

GUEST SERVICES

- INFORMATION
- FIRST AID
- ADA SEATING
- SENSORY ROOM
- CASH-TO-CARD KIOSK

RESTROOMS

- MEN'S RESTROOM
- WOMEN'S RESTROOM
- FAMILY RESTROOM

FOOD & DRINK

- BAR
- BEER
- SNACKS
- POPCORN
- FROZEN SNACKS
- CHICKEN, BURRITO, PIZZA, BURGERS

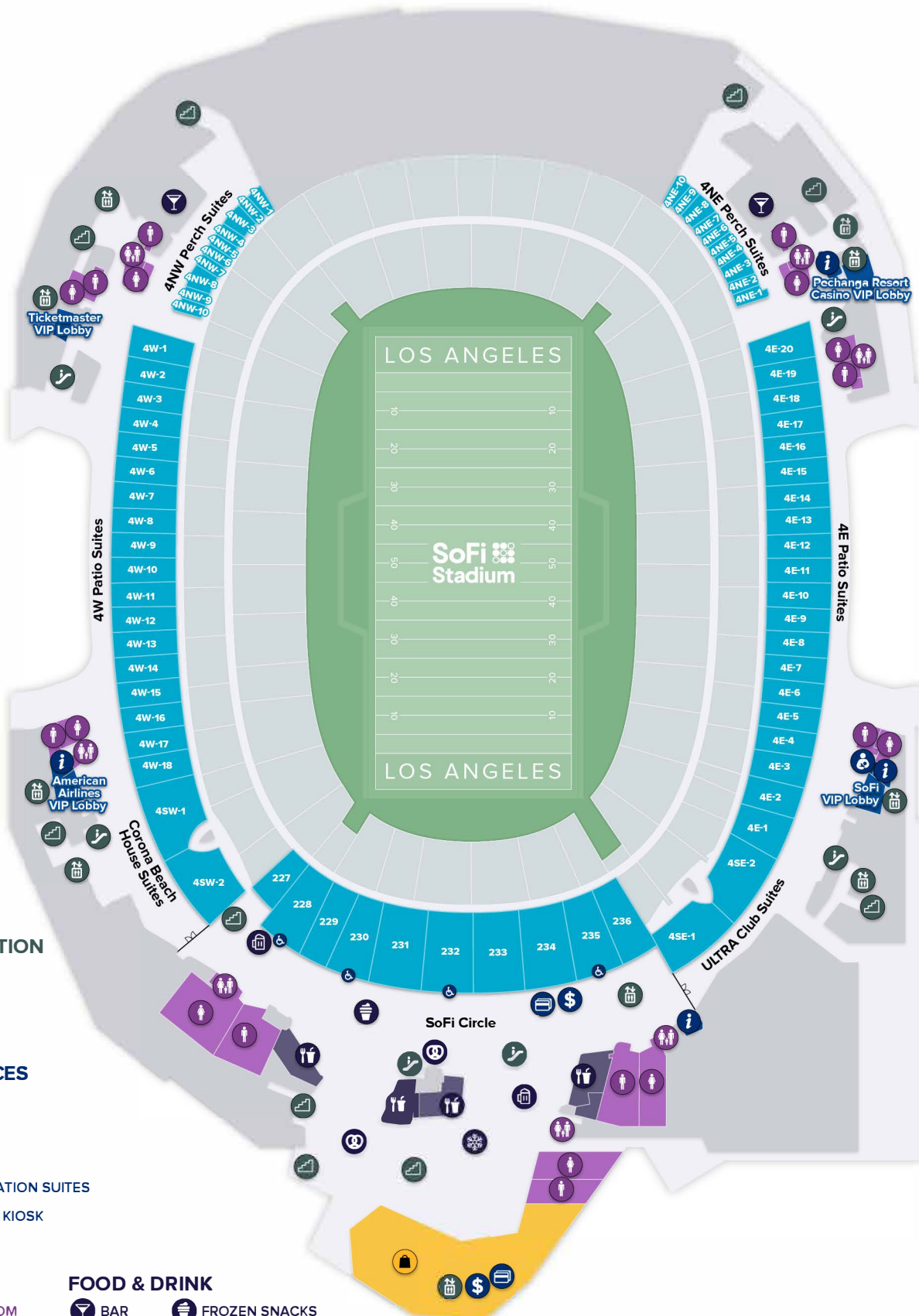
RETAIL

- TEAM STORE



SoFi Stadium

LEVEL 4 (Corona Beach House Suites, Patio Suites, Perch Suites, Reserved Seats 200, ULTRA Club Suites)



SoFi Stadium

LEVEL 5 (Corona Beach House Suites, Patio Suites, Perch Suites, ULTRA Club Suites)



VERTICAL TRANSPORTATION

- ELEVATOR
- ESCALATOR
- STAIRS

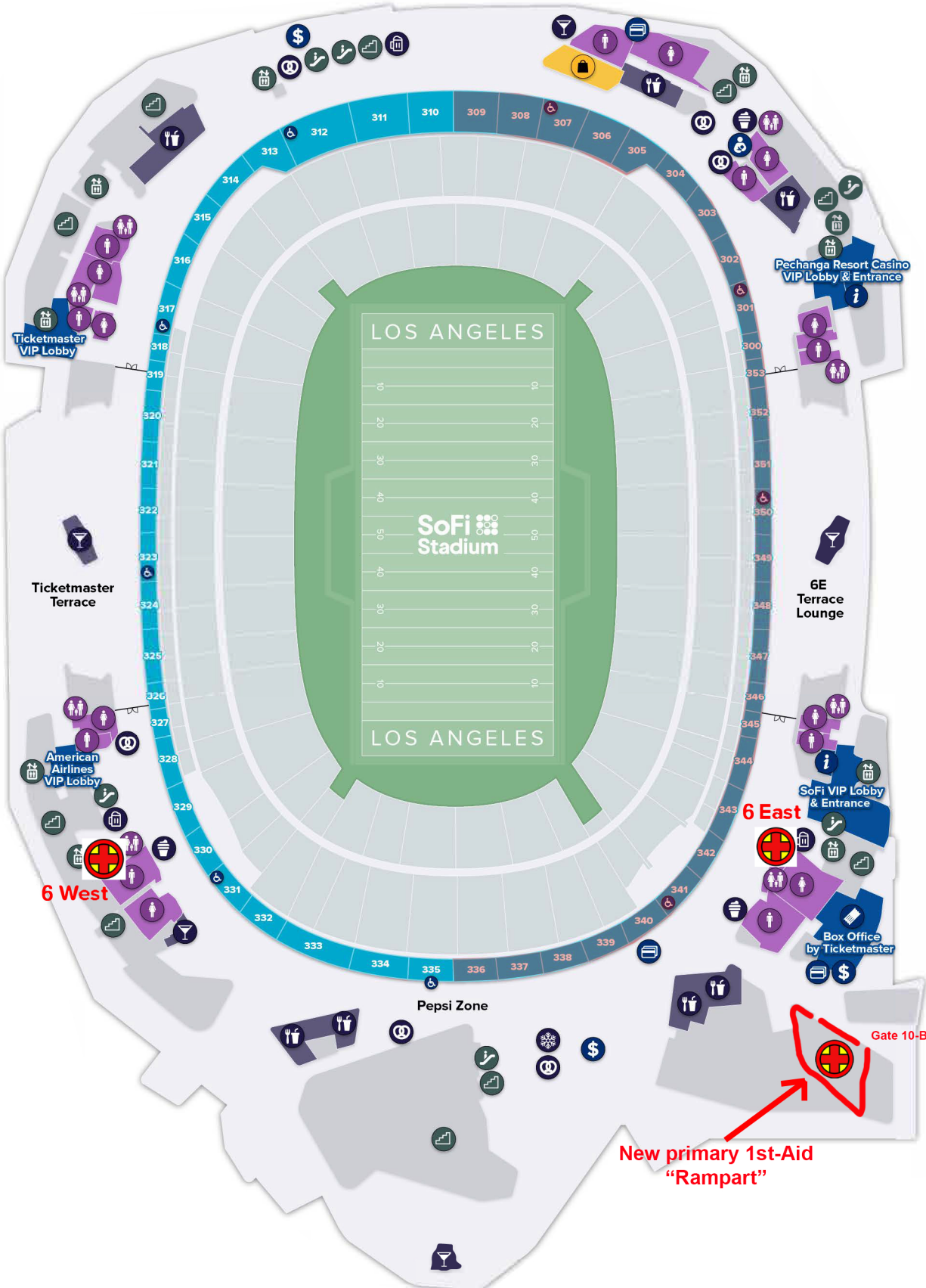
GUEST SERVICES

- INFORMATION
- BOX OFFICE

RESTROOMS

- MEN'S RESTROOM
- WOMEN'S RESTROOM
- FAMILY RESTROOM





LOS ANGELES

SoFi Stadium

LOS ANGELES

Pechanga Resort Casino
VIP Lobby & Entrance

Ticketmaster
VIP Lobby

Ticketmaster
Terrace

6E
Terrace
Lounge

American
Airlines
VIP Lobby

SoFi VIP Lobby
& Entrance

6 West

6 East

Box Office
by Ticketmaster

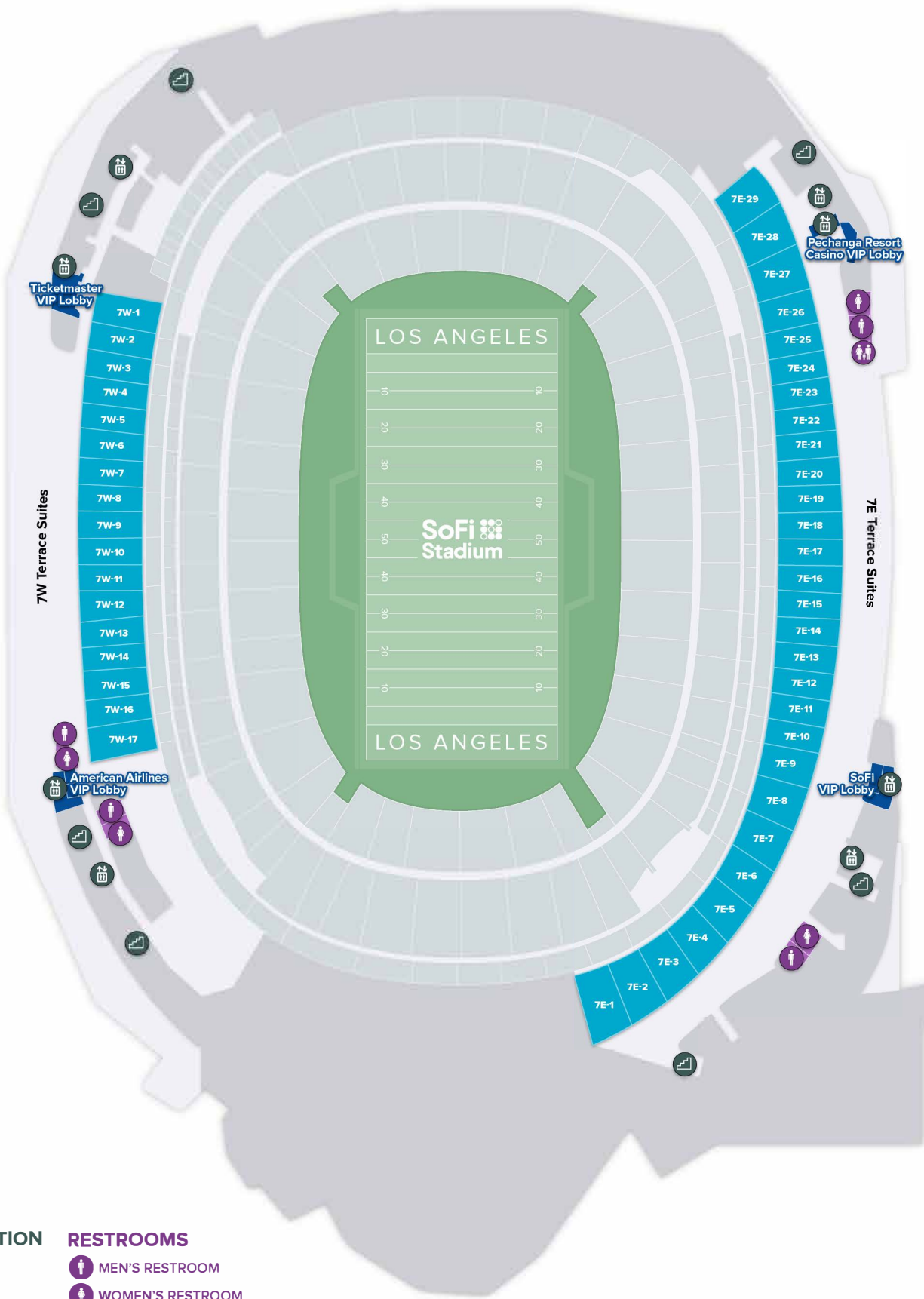
Pepsi Zone

Gate 10-B

New primary 1st-Aid
"Ramp"

SoFi Stadium

LEVEL 7 (Terrace Suites)



VERTICAL TRANSPORTATION

- ELEVATOR
- ESCALATOR
- STAIRS

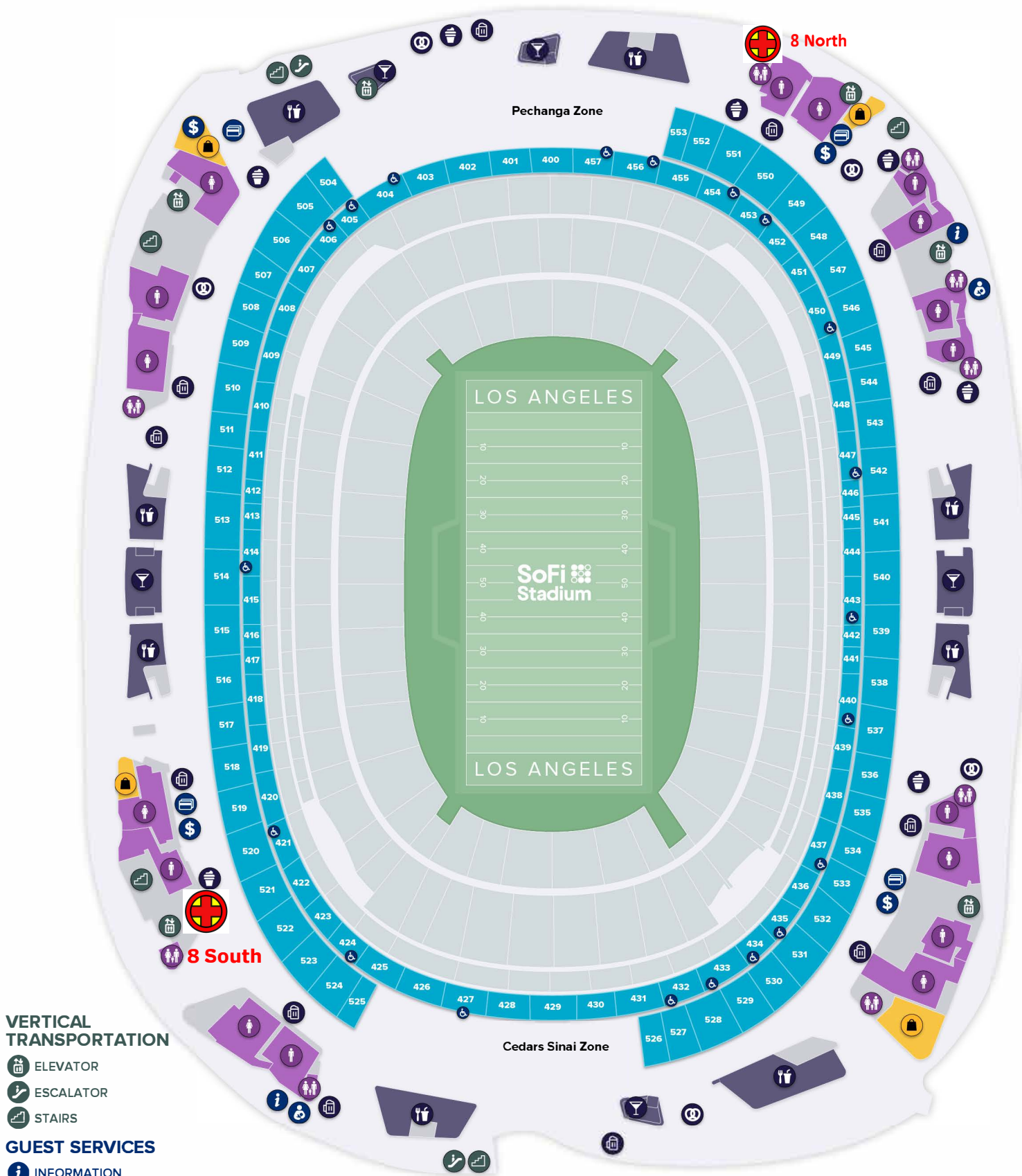
RESTROOMS

- MEN'S RESTROOM
- WOMEN'S RESTROOM
- FAMILY RESTROOM



SoFi Stadium

LEVEL 8 (Reserved Seats 400 & 500)

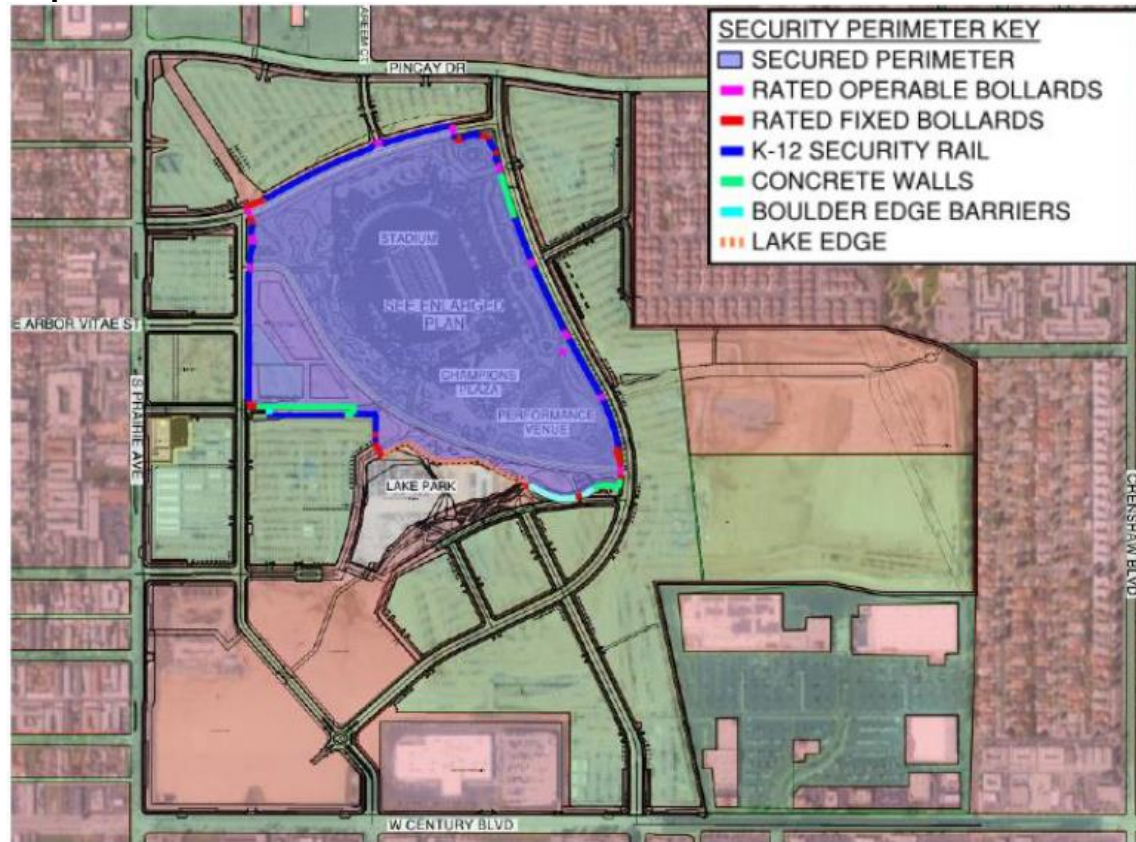


SoFi Stadium

Road Closures

Champions Way and Touchdown Drive are closed to vehicle traffic.

Map of Hardened Perimeter



SoFi Stadium

Bollard Locations



This map illustrates the layout of SoFi Stadium and its immediate surroundings. The stadium is centrally located, with the 'SoFi Stadium' logo prominently displayed. To the north of the stadium are parking lots C, D, and E. To the east are lots F, G, and H. To the south are lots I, J, K, and L. To the west are lots M, N, O, and P. The map also shows the 'PLATINUM ZONE' to the west of the stadium, the 'American Airlines Plaza' to the south, and the 'Performance Venue' to the southeast. Various entry points are marked, including 'Bag Check', 'VIP', 'StadCo Staff Entry', 'Chargers Staff Entry (VIP Entry 7)', 'Chargers Staff Parking (PS-1)', 'Chargers Players & Coaches Parking', 'NFL Media', 'Shuttle Lot', 'Performance Viewing Wristband Distribution', and 'Staff Check-In'. A numbered path (1-12) is shown starting from the top left and ending at the bottom right. The map also includes labels for 'TOUCHDOWN DR', 'VARUS DR', 'SCOP DR', 'VICTORY ST', 'CHAMPIONS WAY', 'MAYRUP AVE', and 'YUKON AVE'.



EVENT PATIENT CARE REPORT

DATE 10/19/21 EVENT RAMS VS RAIDERS VENUE SoFi Stadium 5758

NAME LAST BOWIE FIRST DAVID MI R TELEPHONE NUMBER 8188220960 SECTION 101 ROW 001 SEAT 057

AGE 080 GENDER ☒ M ☐ F DOB 01/08/47 DRIVERS LICENSE OR ID # C2155150 STATE CA PT CONTACT TIME: 1935

SEVERITY ☐ NONE ☒ MILD ☒ MODERATE ☐ SEVERE ☐ Security On Scene: ☒ YES ☐ NO

(R) EYE INJURY -> BLURRED VISION

ARRIVED ON SCENE TO FIND A 80yo M SITTING IN THE LEVEL 4 VERIZON PLAZA IN MILD DISTRESS COVERING HIS (R) EYE. PT STATES THAT ANOTHER GUEST POKED HIM IN THE EYE WITH A STRAW. UPON EXAM, (R) EYE IS RED BUT NOT BLEEDING. PUPIL IS DILATED AND UNRESPONSIVE. PT STATES VISION IS BLURRED IN (R) EYE ONLY. PT DENIES ANY OTHER MEDICAL COMPLAINTS. NKA. NO HX NO MEDS. PT WALKED TO

REASSESSMENT GUANEY AND T-PORTED TO FIRST AID W/O CHANGE.

PUPILS ☐ PERL ☐ Pinpoint ☐ Fixed&Dilated ☒ Unequal LOC ☒ ALERT ☐ Oriented x ☐ 1 ☐ 2 ☒ 3 ☐ Not Alert ☐ Combative ☐ Normal for Patient RESPIRATIONS ☐ Wheezes ☐ Rales ☐ Rhonchi ☐ Stridor ☒ CLEAR ☐ Unequal ☐ JVD ☐ APNEA ☐ Other: ☐ NORMAL rate/effort ☐ Labored ☐ Accessory Muscle Use TIDAL VOLUME ☐ Normal ☐ ↓ ☐ ↑ SKIN SIGNS ☐ NORMAL ☐ Hot ☐ Cyanotic ☒ Pale ☐ Flushed ☐ Cool/Cold ☐ Jaundiced ☐ Diaphoretic ☐ Cap.Ref.

GCS EYE OPENING ☒ 4 = Spontaneous ☐ 3 = To Verbal ☐ 2 = To Pain ☐ 1 = No Response BEST MOTOR ☒ 6 = Obedient ☐ 3 = Flexion ☐ 5 = Purposeful ☐ 2 = Extension ☐ 4 = Withdrawal ☐ 1 = No Response 2nd GCS:(if applicable) E ☐ M ☐ V ☐ BEST VERBAL ☒ 5 = Oriented ☐ 4 = Confused ☐ 3 = Inappropriate ☐ 2 = Incomprehensible ☐ 1 = No Response 3rd GCS:(if applicable) E ☐ M ☐ V ☐

VITAL SIGNS TIME 1939 B/P 120/80 PULSE 080 RR 12 SPO2% 098 TM# 2
2000 122/80 082 12 099 2
H H M M / /
H H M M / /
1ST PAIN SCALE 08 TIME 1937 2ND PAIN SCALE 07 TIME 2003

PATIENT TYPE ☐ VENUE EMPLOYEE ☒ PARTICIPANT ☐ STAGE CREW ☐ GUEST ☐ OTHER: PATIENT DISPOSITION ☐ Released Into Care of SELF ☐ Released Into Care of FRIEND/RELATIVE ☐ Released Into Care of SECURITY ☐ Released Into Care of LAW ENFORCEMENT ☒ TRANSPORTED TO ER ☐ ALS ☒ BLS TRANSPORTING UNIT # 111 REFUSED TREATMENT ☐ REFUSED TRANSPORT ☐ AMA OBTAINED ☐ EVAL BY FD-SQ #: OTHER: FIRST AID FACILITY NAME: CNT

TRANSPORT UNIT REQUESTED ☐ NO ☒ YES TIME: 2003 TRANSFER OF CARE TIME: 2015 TRANSPORT UNIT INCIDENT # 17563 TEAM MEMBER INFO NAME HENDERSON, MIKE BADGE# 106 TEAM DESIGNATION / LOCATION ☐ StageL ☐ StageR ☐ Roving ☒ First Aid 102 GRANADOS, DAVID 666 LAST, FIRST BADGE LAST, FIRST BADGE

REPORT COMPLETED BY: TM# 1 SIGNATURE: [Signature] McCormick Copy

RELEASED AT SCENE and REFUSAL AGAINST MEDICAL ADVICE FORM

| | | | |
|------------------------------------|------------------------|-------------------------|--------------------------|
| PATIENT NAME DAVID BOWIE | DOB 01-08-47 | DATE 10-19-21 | TAG/RUN # 5758 |
|------------------------------------|------------------------|-------------------------|--------------------------|

☐ RELEASED AT SCENE-After thorough assessment by EMS personnel, the individual does not appear to have a medical problem that requires immediate treatment and/or transportation.

☒ REFUSING AGAINST MEDICAL ADVICE

The following apply to myself or the patient on whose behalf I legally sign this document (check all that apply):

- ☐ I AM REFUSING MEDICAL ASSESSMENT.
☐ I AM REFUSING MEDICAL TREATMENT.
☒ I AM REFUSING MEDICAL TRANSPORTATION.
☐ I HAVE RECEIVED MEDICAL ASSESSMENT AND TREATMENT, BUT DECLINE MEDICAL TRANSPORTATION.
☐ I HAVE RECEIVED MEDICAL ASSESSMENT, TREATMENT AND TRANSPORT TO AN EMERGENCY DEPARTMENT, BUT DECLINE ASSESSMENT AND TREATMENT FROM THE HOSPITAL THAT I WAS TRANSPORTED TO. *Complete the documentation boxes below:*

| |
|-----------------------------|
| HOSPITAL NAME N/A |
|-----------------------------|

| |
|---|
| NAME OF FACILITY STAFF NOTIFIED N/A |
|---|

I understand that the EMS personnel are not physicians and are not qualified or authorized to make a diagnosis and that their care is not a substitute for that of a physician. I recognize that I may have a serious injury or illness which could get worse without medical attention even though I (or the patient on whose behalf I legally sign this document) may feel fine at the present time. I understand that the worsening of my injury or illness could result in further harm and possibly death.

I understand that I may change my mind and call 9-1-1 if treatment, transport and/or assistance is needed later. I also understand that treatment is available at an emergency department 24 hours a day or from my physician. I understand that I have been directed to contact my personal physician as to my present condition as soon as possible.

I acknowledge that this advice has been explained to me by EMS personnel and that I have read this form completely and understand its provisions. I agree, on my own behalf (and the behalf of the patient for whom I legally sign this document) to release, indemnify and hold harmless all EMS providers and their officers, members and the employees or other agents from any claims, actions, causes of action, damages, or legal liabilities of any kind arising out of my decision, or from any act of omission of the EMS providers or their personnel or the hospital or their personnel.

| | |
|---|--|
| SIGNATURE OF: <input checked="" type="checkbox"/> PATIENT <input type="checkbox"/> PARENT <input type="checkbox"/> LEGAL GUARDIAN DAVID BOWIE | PRINT NAME OF PARENT OR LEGAL GUARDIAN DAVID BOWIE |
| SIGNATURE OF WITNESS LUKE SKYWALKER | PRINT NAME OF WITNESS LUKE SKYWALKER |

PATIENT / GUARDIAN REFUSES TO SIGN: I attest that the patient / guardian has refused care and/or transportation by the EMS providers. The patient / guardian was informed of the risks of this refusal and refused to sign this form when asked by the EMS providers.

| | |
|----------------------|-----------------------|
| SIGNATURE OF WITNESS | PRINT NAME OF WITNESS |
|----------------------|-----------------------|

PATIENT RELEASED IN CARE OR CUSTODY OF: ☒ SELF ☐ RELATIVE/FRIEND ☐ LAW ENFORCEMENT
INTERPRETER USED: ☐ NO ☐ YES-NAME: _____



Declination of Evaluation



Print Name **X** DAVID BOWIE

Date 10-19-2021

Event RAMS VS RAIDERS

Time 14:37

Team 106

Location 6 WEST 1ST AID

At this time, I am making the informed decision to waive my right to be evaluated by a certified medical professional. I understand that I am requesting OTC medication or medical supply at this aid station and do not wish to be considered a patient or receive any medical evaluation at this time. I understand that I can change my mind and return to be medically evaluated at any time. I will not hold any member or organization affiliated with this aid station responsible for any adverse or unwanted reactions to the OTC medication or medical supply I am requesting.

Signature of requesting individual



X David Bowie

☒ Medication(s) or ☒ Supplies requested:

ASPIRIN - 160MG X 1
1 ICE PACK

Form completed by (Print) MIKE HENDERSON

This form is to be turned in to supervision at the end of every shift.

ACTIVE SHOOTER RESPONSE

ARRIVAL ONSCENE

- Hold & Communicate
- Forward Stage & prepare for entry as RTF
- I.C. or Engage
- Team with Force Protection & form RTF
- Identify CCP's
- Providing Life Saving Intervention
- Assignment of Litter Teams
- Triage patients
- Transport patients to hospitals via Established Treatment area

RESCUE TASK FORCE

- Assemble at forward staging area, brief & update intelligence frequently
- PPE'S, Move quickly with modified equipment (Chest Packs, T-bags, Canberra, etc.)
- Provide Triage and Life Saving Interventions
- ID Areas of danger (Conceal / Cover)
- Maintain Situational Awareness
- Maintain LCES, constantly evaluate.

COMMAND

- Establish Fire Staging in Safe Location
- Co-Locate and Communicate with Law Enforcement.
 - Dispatch
 - 1ST Patrol Officer
 - Ranking Officer
- Determine the type of Tactical Law Enforcement Incident
- Establish Unified Command w/ Law
- ID Priorities/Strategy/Objectives = IAP

Hot Zone

No Entry by non-Law Enforcement Personnel, Fire or EMS

FETF – Forcible Entry Task Force
 FTF – Fire Task Force
 LTF – Litter Task Force
 MAC – Medical Alert Center
 RTF – Rescue Task Force
 TEMS – Tactical Emergency Medical Support

Warm Zone

Potential Threat Exists, Cleared by Law for RTG's

CCP – Casualty Collection Point
 CONTACT TEAM – Law Personnel staffed to address the Threat (Hot Zone)
 ICP – Incident Command Post
 LSI – Life Saving Interventions
 SALT – Sort, Assess, LSI, Transport

Cold Zone

No Danger Exists
 ICP Staging
 Support MCI

ACTIVE SHOOTER RESPONSE

(Ver 1.2)

Incident# _____

Date: ____/____/____ Time: _____

| 1 st Alarm Resources | | |
|---------------------------------|--|--------------------------|
| UNITS | | |
| E- | CA- IC with Law | Crew- Rescue TF#1 |
| E- | CA- Rescue Group | Crew- Rescue TF#2 |
| E- | Ambulance Coordinator | |
| E- | Litter Team 1 -Report to Rescue Group | |
| E- | Litter Team 2 -Report to Rescue Group | |
| Sq- | Med-Comm. (Both PM's) | |
| Sq- | Report to Medical Group | |
| Hvy Sq- | Report to Medical Group | |
| T/LF/Q- | Treatment Unit Leader | |
| T/LF/Q- | Medical Group Supv. | |
| USAR TF- | | |
| HM TF- | | |
| Air Sq- | Air Transportation | |
| BC- | IC, Unify with Law | |
| BC- | OPS /Deputy OPS with Law | |
| 2 nd Alarm Resources | | |
| UNITS | | |
| E- | Command Post Support & Staging | |
| E- | Litter Team 3 -Report to Rescue Group | |
| E- | Litter Team 4 -Report to Rescue Group | |
| E | Fire Group Supv. | |
| E- | Landing Zone Coordinator | |
| Sq- | Report to Medical Group | |
| Sq- | Report to Medical Group | |
| Sq- | Report to Medical Group | |
| Hvy Sq- | Report to Medical Group | |
| T/LF/Q- | Forcible Entry Group Supv. | |
| T/LF/Q- | | |
| USAR- | | |
| HM- | | |
| Air Sq- | Air Transportation | |
| BC- | Supervise Rescue Group | |
| BC- | Supervise Medical Group | |
| AC- | Fire Branch | |
| DC- | | |
| | | |
| | | |
| | | |

Incident Information

INCIDENT NAME: _____
 ICP LOCATION: _____
 HELISPOT: _____ Eng: _____
 Lat _____ Long _____
 FIRE STAGING: _____ Mgr: _____
 AMB STAGING: _____ Mgr: _____

Communications Plan

ADMIN: UHF _____ ZONE _____ CH _____
 COMMD: VHF _____ ZONE _____ CH _____
 TACTICAL: VHF _____ ZONE _____ CH _____
 TACTICAL: VHF _____ ZONE _____ CH _____
 AIR/GRND: VHF _____ ZONE _____ CH _____
 (Monitor Cell and Satellite phones)

Checklist

Enroute:

- Request MCI Response & Notify MAC
- Request Comm. Plan & Name Incident
- Designate Landing Zone for Air Squad

On Scene:

- Hold in safe location for PD
- Co-Locate /Unify with Law & Coordinate

Size Up Report:

- Location and Current Situation
- Approx. number of Patients _____

Follow Up Report:

- State ICP and Staging locations
- Req. PIO, Safety and Move-ups
- Req. Additional Resources (2nd Alarm MCI)
- Req. Additional Air and Ground Amb.
- Req. Emergency Medical Support Vehicle
- Req. Amb. Supv's to ICP & Amb. Staging

Command:

- Establish Fire and Amb. Travel Routes
- Establish Hot, Warm, Cold Zones with Law
- Develop Objectives, Strategies and Tactics

Assign:

- Resources with law for force protection

Provide Status Reports: (Every 15 Min.)

- Situation, Progress, Needs.
- Maintain Cell Communications with CCBC

Heat Illness Prevention

Guidance for Workers

Awareness of heat illness symptoms can save your life or the life of a co-worker.

- If you are coming back to work from an illness or an extended break, or you are just starting a job working in the heat, it is important to be aware that you are more vulnerable to heat stress until your body has had time to adjust. Let your employer know that you are not used to the heat. It takes about five to seven days for your body to adjust.
- Drinking plenty of water frequently is vital to workers exposed to heat. An individual may produce as much as two to three gallons of sweat per day. In order to replenish that fluid, the worker should drink three to four cups of water every hour, starting at the beginning of the shift.
- Taking your breaks in a cool, shaded area and allowing time for recovery from heat during the day are effective ways to avoid heat illness.
- Avoid or limit the use of alcohol or caffeine during periods of extreme heat. Both dehydrate the body.
- If you (or a co-worker) start to feel symptoms, such as nausea, dizziness, weakness, or unusual fatigue, let your supervisor know and rest in a cool, shaded area. If symptoms persist or worsen, seek immediate medical attention.
- Whenever possible, wear clothing that provides protection from the sun but allows airflow to the body. Protect your head and shade your eyes if working outdoors.
- When working in the heat, be sure to pay extra attention to your co-workers and be sure you know how to call for medical attention.

For more information, call Cal/OSHA or visit our website at:

www.dir.ca.gov



Dr. Clairese Retino

Medical Education:
St. George's University

Emergency Medicine Training:
Maimonides Medical Center

ED Practice Location:
Huntington Memorial Hospital

Interests:
*Exploring with my golden doodle (Alfie),
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Dr. Jamie Chang

Medical Education:
Harvard Medical School

Emergency Medicine Training:
Stanford Hospital and Clinics

ED Practice Location:
Kaiser West LA and South Bay

Interests:
*Wrestling my kids, grilling, football,
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Dr. Nima Moradian

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ED Practice Location:
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*Sports, dining out, Star Wars, stand-up
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