



County of Santa Clara
Emergency Medical Services System

REFERENCE EMS-818

EMS COMMUNICATIONS SYSTEM GUIDE

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EMS COMMUNICATIONS SYSTEM GUIDE

Resources

Policy 501: Hospital Radio Reports

Policy 504: County EMS Communication System

Policy 506: Internet Based EMS Communication System

I. Introduction

The EMS Communications System Guide is designed to provide standards for the operation of the Santa Clara County EMS Communications System. This guide does not replace the need for department/company provided training and orientation to the use of the Santa Clara County EMS Communications System.

II. Authorized Users

The County EMS Agency and County Communications must authorize users of the EMS Communications System.

Authorized users include:
Emergency Medical Services Agency
All Santa Clara County Permitted Ambulance Services
Santa Clara County Public Health Department
Santa Clara County Public Safety Partners (fire, law, public service)
Santa Clara County Coroner's Office
Santa Clara County Acute Care Hospitals

III. Users Responsibility

All users of the EMS Communications System are required to adhere Prehospital Care Policy and to the provisions contained within this guide.

IV. Authorized Radio Terminology

The use of clear-text (plain English) has replaced the use of radio codes in accordance with the National Incident Management System .

Verbal Response	Description
<i>"Responding"</i>	Enroute to a call for service
<i>"On Scene"</i>	Arrived at the scene
<i>"Transporting"</i>	Transporting a patient
<i>"Available"</i>	Ready for response
<i>"Scene Secure"</i>	On-scene personnel have determined that the scene has been deemed safe to enter.
<i>"Emergency Traffic"</i>	Channel is cleared and made available for emergency communication
<i>"On Scene Investigating"</i>	On scene of an incident – investigating circumstances
<i>"Report on Conditions"</i>	Scene size-up, status of an incident
<i>"Unable to Locate"</i>	Unable to locate
<i>"Off Duty"</i>	Off Duty (used when requesting status)
<i>"Code 2"</i>	Response without lights/sirens
<i>Code 3</i>	Response with lights/sirens
<i>"No Further Assistance Needed"</i>	Crew is safe and requires no assistance
<i>"Rest Break"</i>	Out of Service for non-emergency response/ In Service for emergency response.
<i>The following radio codes and terms that may no longer be used in the EMS Communications System.</i>	
Old Codes / Terms	Description
<i>"952"</i>	Not NIMS Complaint
<i>"956"</i>	Not NIMS Complaint
<i>"10-19"</i>	Not NIMS Complaint
<i>"10-21"</i>	Not NIMS Complaint
<i>"Code 9"</i>	Not NIMS Complaint
<i>"Radio"</i>	Old Term Eliminated
<i>"Extended"</i>	Old Term Eliminated
<i>"Delayed"</i>	Old Term Eliminated
<i>"No Fire"</i>	Old Term Eliminated
<i>"MED-91"</i>	Old Term Eliminated
<i>"Radio"</i>	Old Term Eliminated
<i>"Code 4"</i>	Not NIMS Complaint
<i>"Code 7"</i>	Not NIMS Compliant

V. Resource Radio Identifiers

Resource Radio Identifiers	Call Sign
County Health Officer	"Health Officer"
County Service Area 9-1-1 Ambulance Operations Managers	"Operations" followed by "unit #"
County Service Area 9-1-1 Ambulances	"County Medic" followed by "unit #" ("County" is only necessary when other non-County units are operating on the frequency, when operating out of County, or on other providers radio systems.
County Service Area 9-1-1 Field Supervisors	"County Supervisor" followed by "unit #"
EMS Agency Staff	"EMS" followed by "unit #"
EMS System Director	"Chief 1"
EMS System Duty Chief	"Duty Chief"
EMS System Section Chief	"Chief 2"
EMS System Support Units/Personnel	"Support" followed by "unit #"
MCI/Field Treatment Sites [FTS] trailers; Disaster Medical Support Units [DMSU]; etc.	"Utility" followed by "unit #"
Non 9-1-1 System ALS Ambulances	"Provider", "Medic" followed by "unit #"
Non 9-1-1 System BLS & CCT Ambulances	"Provider Name", "Ambulance" followed by "unit #"
Specialized EMS Unit	"Squad" followed by "unit #"

VI. System Configuration

The County's EMS Radio System is built on a 800MHz conventional platform and is comprised of eight channels. Five channels are simulcast (duplex) and three of the channels are non-repeated (simplex). The repeated channels are used as the primary dispatch channel, hospital ring-down channel, command channels and one interoperability command channel. The three remaining non-repeated "direct" channels share the same receive frequencies as the three command channels and consequently, they cannot be utilized concurrently with their related command channel. The non-repeated channels provide unit-to-unit transmission abilities and have been assigned as tactical channels.

VII. Primary Dispatch Channel

- A. **"County EMS"** or **"County"** is the primary EMS dispatch channel. All responses are dispatched on this channel as well as a simulcast on a UHF radio frequency that sends an alert and voice dispatch to radio pagers.

- B. A verbal alert is issued prior to each dispatch. The radio user will hear a portion of call information followed by a few second pause (this is the period that inaudible tones are being routed to radio pager devices) and then a full dispatch. Users should wait for completion of a full dispatch prior to communicating on the radio.
- C. Unit-to-unit traffic should not occur on this channel.
- D. Non-contracted ambulance services will operate on “County” or other channels (ie: Command 92) assigned by County when attached to 9-1-1 system calls including activations of Multiple Patient Management Plan, disaster, and/or during unusually high system volume. Under normal circumstances non-contracted ambulance services will not be a frequent user of this channel.

VIII. Command Channels

- A. The primary purpose for command channels is to provide for on-scene communications for command and control functions. Units may be assigned to a command channel (EMS Command 92, 93, or 94) when directed by the EMS Duty Chief, Chief 2, Chief 1, public safety partner, or EMS Field Supervisor (EFS).
- B. Under routine circumstances, a dispatcher does not monitor command channels. The EMS Agency may request that a command channel be monitored depending on the needs of an incident/response.
- C. Command channels may be reserved in advance for drills, exercises, special events, or mutual aid activities. The assignment of specific command channels will be determined by the County Communications and/or EMS Agency.
- D. Certain selected events will be immediately moved to a command channel. In such cases, the unit shall status (responding and on-scene) on “County EMS” but immediately monitor the assigned command channel for further information. Upon notification to “County EMS” that a unit is responding, the same notification should be made on the command channel.
- E. Command channels may be used as travel channels for ambulance strike team and task force responses/deployments.

- F. BAYMACS is a mutual aid channel that is used for the coordination of command and control functions of multi-jurisdictional, multidisciplinary, incidents within the County.
- G. Public safety partners, EMS Duty Chief, Chief 2, and/or Chief 1 may request EMS units switch to BAYMACS for command and control functions. The EMS Duty Chief, Chief 2, and/or Chief 1 may also move an incident to BAYMACS based on the needs of the incident; however this frequency is not routinely indicated for EMS field provider use.

Command Channel Use

Channel	Use
EMS Command 92	Countywide Command & Control
	System Coordination / Administration
	Field to hospital notifications
EMS Command 93	Command & Control
EMS Command 94	Command & Control
BAYMACS	Countywide, multi-jurisdictional/multi-disciplinary command & control – [Restricted Use]

IX. Direct Channels

- A. Direct channels may be used as “tactical channels” and assigned to an event when unit-to-unit communications are necessary to complete specific tasks or functions after arrival on the scene of a call. The EFS or EMS Duty Chief will identify an appropriate channel.
- B. The non-repeated channels (EMS Command 92-Direct, EMS Command 93-Direct and EMS Command 94-Direct) work only in a line-of-site mode. Please be advised that when selecting a tactical channel, EMS Command 92-Direct should be the last channel selected, as it is the non-repeated simplex channel of EMS Command 92. Communication on tactical channels is limited to on-scene communications, not communication with “County”.

Direct (“Tactical”) Channel Use

Channel	Use
EMS Command 92-Direct	Select only as last option for on-scene tactical channel use.
EMS Command 93-Direct	On-scene tactical channel use.
EMS Command 94-Direct	On-scene tactical channel use.
	Out of County Travel Channel

X. Audible Tones

- A. A steady alert tone is used anytime the dispatcher needs to announce a priority message such as “All Points Broadcast” (APB); “Be on the Look Out” (BOLO); hospital on “Internal Disaster; etc. The tone is not to be used to report changes in hospital timers; suspension of meal breaks; hospital status changes (except for Internal Disaster); etc. The tone may be initiated by County Communications or upon the request of EMS Duty Chief, Chief 2, and/or Chief 1.
- B. A warbler tone is a fast pace continuous “high-low-high” sound. When this alert is issued, all non-emergency traffic must stop until the broadcast is completed. The warbler is used when requested by EMS Command staff (EFS, EMS Duty Chief, Chief 2, and/or Chief 1, etc.), County Communications, or when emergency traffic requires an immediate action such as an evacuation, shelter in place order, eminent safety issue, etc.

XI. Dispatch Format & Unit Alerting Procedures

- A. 9-1-1 system units receive call notification via UHF radio pager, on the unit Mobile Data Console (MDC), and verbally on “County”. A brief verbal alert is made followed by the dispatch of call information. Radio users must refrain from transmitting from the time that the alert is issued until the completion of a full dispatch. Alphanumeric data is also sent to various devices the time of dispatch including location and other pertinent call details.
- B. The UHF radio pager is the primary notification device used for the dispatch of units. All other methods of notification are supplemental.
- C. Dispatch information includes code of response, location, nature of call (if known) and any necessary scene safety/staging information. All other details are sent to alphanumeric pagers or MDCs.
- D. Non 9-1-1 system units may be made available by their dispatch centers to assist with a 9-1-1 response. In such cases County Communications will dispatch non 9-1-1 system units to a response in the same method as 9-1-1 system units (alert via radio pager and over the air on “County”). Note: The private dispatch center will not directly dispatch the unit to the call.

- E. Once a unit receives a dispatch, the unit must immediately acknowledge the response verbally on “County” including the unit’s current location and on the MDC. Note: Non 9-1-1 ambulances do not have MDCs/CAD connectivity.

Example
“Medic 55, Responding from Moorpark and Bascom”

- F. Personnel assigned to 9-1-1 EMS System units are expected to continuously monitor radio traffic on “County” or other assigned channel unless in stationed quarters. Each 9-1-1 EMS System unit crew member is to carry a portable 800mHz radio, UHF radio pager, and authorized alphanumeric device at all times and without exception.
- G. Personnel assigned to non 9-1-1 EMS System units are expected to continuously monitor radio traffic on “County” or other assigned channel when operating in the EMS System (9-1-1 EMS event; 9-1-1 system coverage during low levels; and/or EMS special event standby). Each non 9-1-1 EMS System unit crew is to carry a portable 800mHz radio and UHF radio pager.
- H. Life-Hazards are defined as the existence of a process or condition that would likely cause serious injury or death to exposed persons.
 - 1. Life-Hazard notices may be included in initial dispatch information and require the responding unit to acknowledge the specific life-hazard threat.
 - 2. Life-Hazard notices that occur after dispatch, but do not present an eminent threat will be provided to the unit while in route to the call. If the unit does not immediately acknowledge, a steady alert tone will be executed followed by the life-hazard information.
 - 3. Life-Hazard notices that present with an eminent threat will be noticed by issuing a warbler tone followed by the life-hazard information.

Example 1
“Medic 55, Code Three, Moorpark and Bascom. Respond for a vehicle accident with a life hazard alert – wires down. Medic 55 on event 156”
“County EMS”; Medic 55, responding, copies life hazard alert – wires down”.

Example 2

[Warbler Tone] "Medic 55 – Life Hazard Alert. Suspect is in the area, evacuate the scene immediately".

"County EMS, Medic 55 copies suspect in area, evacuating"

XII. Ground Unit Status Keeping

- A. 9-1-1 EMS System Ambulances must track the unit's status via the MDC. In addition to MDC status keeping, a verbal status reported for "responding"; "on-scene"; and when "clearing an event". If the MDC fails, all status changes must be done verbally.
- B. 9-1-1 EMS System Ambulances are to provide patient destination, patient count, and code of transport via the MDC.
- C. Non 9-1-1 EMS System Ambulances must maintain status verbally with County Communications when attached to 9-1-1 EMS System responses. Patient destination, patient count, and code of transport must also be reported verbally.

XIII. Air Resources Response Call Acknowledgement & Status Keeping

- A. When attached to a Santa Clara County EMS event, the provider's air crew will provide a verbal radio status on "County" when the air resource:
 - 1. Enroutes to the scene (*air crew will provide ETA to the scene*).
 - 2. Arrives at the scene (*lands the aircraft*). CALCORD shall be the primary frequency to coordinate with on-scene ground units, unless another frequency has been identified.
 - 3. Enroutes to hospital (*air crew will provide destination and number of patients being transported*)
 - 4. Arrives at the hospital.
- B. Each permitted air resource provider agency is responsible for reporting to and maintaining current availability status with County Communications through EMResource. In the event of EMResource failure, voice communication shall be made to County Communications.

XIV. Updates Provided When Attached to a Response

- A. All critical updates will be provided via radio.
- B. Non critical updates will be provided to crews via the MDC and/or alphanumeric messaging. Crews are not to request updates for non critical issues such as patient condition, reason for up/downgrades, etc; County Communications will advise crews if any updates are received.
- C. Due to the nature in which ambulances are deployed and dispatched throughout the system, it is not feasible to advise each Public Safety Answering Point (PSAP) of which ambulance has been assigned or reassigned to an EMS event. Consequently, first responder units will not know which ambulance(s) has been attached to their event, making unit-to-unit contact difficult.
- D. There will be those occasions in which a first responder unit must provide critical information (scene safety, access information, travel & staging instructions) to the inbound ambulance, use of the EMS radio is the most efficient method in these circumstances. In such situations, the first responder may contact "County" and provide the following information after first monitoring radio traffic:

Required Information
1. Department Name
2. Unit Identifier
3. Event Location
4. Critical Message

Example
"County, San Jose MED 30"
"San Jose MED 30 go ahead"
"Advise the ambulance responding to 10 th & San Carlos to stage at San Carlos and 7 th – Scene is NOT secure".

XV. Emergency Traffic

- A. Use of the term "Emergency Traffic" shall be limited to the presence of eminently life-threatening conditions. An example is an assault in progress, immediate need to take a safety action, or the presence of a condition that could result in injury. "Emergency Traffic" should not be used for the reporting of traffic collisions, still alarms, and other events that do not immediately threaten safety.

- B. When an “Emergency Traffic” is requested, personnel shall:

Example
1. State “Unit <i>ID</i> , Emergency Traffic”
2. Provide unit’s location
3. State the nature of the emergency
4. Request resources needed
5. Continue to monitor the radio

XVI. Emergency Button Activation Procedures for 9-1-1 System Units

- A. Each radio (portable, mobile, or base) is equipped with an active emergency button feature. This feature is a standard programming function that works on “County” and “EMS Command 92” and is intended for use by 9-1-1 EMS System ambulances.
- B. Use of the Emergency Button provides a *secondary* means for users to broadcast a non-verbal emergency notification. The button should be used only when a verbal report of “Emergency Traffic” is not possible.
- C. In addition to the emergency button feature, 9-1-1 EMS System ambulances are equipped with automatic vehicle location tracking equipment. When a 9-1-1 system ambulance activates an emergency button push, County Communications may be able to quickly locate the unit and send appropriate resources (law & fire) to assist the requesting unit.
- D. Once activated, County Communications will attempt to contact the unit and attain further information. If the unit does not respond or does not provide an appropriate response to the dispatcher; fire, law enforcement, EFS, Operations 1 and 2, and the Duty Chief will be notified. 9-1-1 EFS, Operations 1 and 2, and the Duty Chief may modify responses to emergency button activations based on available information.
- E. In the event that an emergency button is activated accidentally, the unit must acknowledge the dispatcher with "**No Further Assistance Needed**". A response other than “No Further Assistance Needed” will mean that all responding units will continue.

XVII. Emergency Button Activations for All Other Providers

- A. Each radio (portable, mobile, or base) is equipped with an active emergency button feature. This feature is a standard programming function that works on “County” and “EMS Command 92” and is intended for use by 9-1-1 EMS System ambulances.
- B. Once activated, County Communications will attempt to contact the unit and attain further information. If the unit does not respond or does not provide an appropriate response to the dispatcher, County Communications will notify the provider’s communications center to determine if an emergency response is needed. The provider is responsible to resolve the activation.
- C. The automatic vehicle locator feature does not exist for other provider agencies (fire department apparatus, non EOA ambulances, hospitals, or Public Health Department,

XVIII. Personnel Accountability Report (PAR)

- A. A “PAR” is a safety check that includes confirmation that all members of a unit are accounted for and are safe at the time of the “PAR” (this includes observers, trainees, etc.). Any lack of an affirmative “PAR” query will result in an emergency action until the personnel are accounted for.
- B. Under most circumstances, the EFS shall coordinate an ambulance “PAR” with the public safety agency responsible for the event. However, it may be necessary to conduct independent “PARs” as necessary.
- C. When an EMS unit responds to a “PAR” request, the respondent will immediately:
 - 1. Make visual confirmation that all crewmembers are safe and are present. If all members are not visible, the unit does not have a PAR.
 - 2. Provide the unit ID.

3. State the “PAR” status including:
 - a. Provide the number of crewmembers assigned to the unit.
 - b. Provide the number of students, ride-a-longs, or other personnel.
 - c. Provide current location and/or assignment
4. Standby for instructions.

Example 1: Unit with a “PAR” “County Medic 40 has a PAR of two with one ride-a-long; unit is located in ambulance staging.”
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Example 2: Unit without a “PAR” “County Medic 40 does not have a PAR EMT partner last seen enroute to the ambulance for equipment unit is on-scene at Winchester and Moorpark.”
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XIX. EMS System Resource Roll Call

An EMS System Roll Call is conducted in cases where County Communications or EMS Management needs to verify the availability of units within the EMS System. A roll call may be implemented following a failure of a communications system, immediately following an earthquake or other potential disaster event, or when it is necessary to check the response readiness of EMS units. A roll call only assesses unit availability and does not assess the safety and welfare of an EMS crew as is the case of a Personnel Accountability Report (PAR).

When a “Roll Call” is requested, personnel shall
1. Respond to County Communications when requested
2. Provide unit ID, status (available / not available), and location.
3. Standby for assignment

XX. Use of Other Jurisdictions Radio Systems

- A. The utilization of other jurisdictions radio systems may occur during significant EMS events and disaster operations (ie: Activations of

Multiple Patient Management Plan). When working on another provider's system, it is imperative that the unit provides the company name and unit identifier in the beginning of each transmission. When working out of the County (ambulance strike team deployment, mutual aid, etc), the unit must preface each transmission with "Santa Clara County", their provider agency name, unit type and unit ID.

- B. 9-1-1 System Units are equipped with UHF and VHF radios programmed with public safety radio frequencies. The use of those frequencies will be initiated and directed by the public safety entity's Incident Commander or designee.

Example
"Santa Clara County Medic 23" <i>or</i> "Santa Clara County Westmed Ambulance 302"

- C. County Ambulance units responding to calls in San Benito, Monterey, and Santa Cruz County will maintain status on "County EMS" but will also establish communications with the county where the incident is located as soon as possible. If the incident requires additional resources, the County Ambulance should make the request directly to the county of origin whenever possible.
- D. Santa Clara County EMS units responding out of the County shall maintain status with "County EMS" by radio. When radio communication is not possible, units shall maintain status with "County EMS" by telephone. Units may be provided with other channel assignments based upon the mutual aid request.
- E. Unless otherwise directed, the designated travel channel (unit-to-unit) will be EMS Command 94-Direct.

XXI. Reporting EMS Events

- A. The term Emergency Traffic is used when an event may cause imminent injury to any person. The term Emergency Traffic should not be used for minor traffic collisions, non life-threatening conditions, or to report still alarms.

- B. When reporting EMS and other witnessed events, radio users shall provide the incident location, nature of incident, resources to dispatch, and code of response. It is not necessary to notify County Communications of non injury traffic collisions, disabled vehicles, etc. unless they are creating an imminent threat to the public's safety.

XXII. Report on Conditions

A "Report on Conditions" or "Scene Size Up" provides the EMS System with updated information about EMS events. This update should be provided to County Communications by the first on-scene ambulance or other first on-scene EMS units. The report should identify the nature of the event, number of injured approach/staging instructions and any pertinent safety information. This report is especially critical when multiple EMS units are responding to the events.

Example of 1st ambulance on-scene with conditions as reported in initial dispatch:

"County, Medic 20 on-scene"

Example of 1st ambulance on-scene with conditions *different* as reported in initial dispatch:

"County, Medic 20 on-scene of a traffic collision with rollover, there are 4 patients, 2 patients are trapped and require extrication."

XXIII. Reporting a 9-1-1 EMS System Unit Collision

When a 9-1-1 EMS System unit or other private ambulance has been involved in a collision, personnel shall make the following verbal notification on "County":

Required information

1. Advise that a collision has occurred
2. Confirm location of collision
3. Advise the nature of the collision, including: Injury or Non-Injury
4. Confirm if a patient is on board and triage category
5. Advise total number of Souls on Board (count all persons in the unit)
6. Number of Injured
7. Request resources
8. Continue to monitor "County EMS"

Example 1:

“County, Medic 35”

“*Medic 35*”

“County Medic 35, we have been involved in a collision at Race and San Carlos. We have an “immediate” patient on board, four souls and unknown injuries at this time.”

Example 2:

“County, Medic 47”

“*Medic 48*”

“County, Medic 47, we have been involved in a non-injury collision at Race and San Carlos. Two souls on board, no patient. Notify the supervisor”.

XXIV. Critical Disaster Medical-Health Notifications from the County to the Hospitals

- A. In addition to the web-based EMResource, local area hospitals will be alerted on EMS Command 92 of critical information notifications (activation of the Multiple Patient Management Plan, Standard Dispatch Orders implementation, Shelter-in-Place Orders, security and safety concerns, etc.).
- B. The alerting process will commence with a simultaneous group ring-down of all hospitals. During the informational broadcast from the County, it is imperative that each hospital refrains from transmitting on EMS Command 92 until the completion of the broadcast. Hospitals will then be directed as to how to respond to and acknowledge each broadcast (standby for roll call, view EMResource, etc).

XXV. Hospital Notification of Pending Ground Ambulance Arrival

- A. Notifications to hospitals are made as a means of providing a notification of pending ambulance arrival, not for the purpose of medical direction or for receiving approval to transport to the facility.
- B. Hospital notifications shall be conducted in accordance with Policy 501 (Hospital Radio Reports).
- C. Routine pending arrival notifications are to be made by telephone. 9-1-1 EMS System units should make verbal notifications by calling

the designated “9-1-1 hospital ring down” number for each facility. Non 9-1-1 ambulances are not to use the “9-1-1 hospital ring down” number with the exception of patients being transported from the 9-1-1 EMS System.

- D. In the case of multiple victim/multiple casualty incidents, the Patient Transportation Unit Leader/Group Supervisor or other designee will make hospital notifications if necessary.

XXVI. Hospital Notification of Pending Air Ambulance Arrival

All pending hospital arrivals and patient status notifications shall be conducted in accordance with Policy 501 (Hospital Radio Reports).

XXVII. Base Hospital Contact

Base Hospital Contact should be made via telephone. In the event that telephone communication is not available, contact may be made on EMS Command 92. However, the paramedic shall clearly state they are making Base Hospital Contact once the radio is answered by Base.

XXVIII. EMResource

- A. EMResource is a web-based system used to monitor hospital diversion status, trauma center bypass status, manage multi/mass-casualty medical-health incidents and to provide information to EMS System providers. Information from EMResource is provided to prehospital personnel by County Communications.
- B. Providers shall use EMResource in accordance with Policy 506 (Internet Based EMS Communication System).
- C. 9-1-1 System ambulances and EMS Supervisors are to use EMResource to determine:
 - 1. Hospital emergency department and trauma center status.
 - 2. To determine patient destination in multi-patient events.

XXIX: EMS Radio System Failure Procedure

In the event of radio system failure, "County EMS" units shall:

- A. Attempt to communicate with County on another portable radio on "County EMS".
- B. Attempt to communicate with County on a mobile radio on "County EMS".
- C. Attempt telephone communication with County. If contact is made, follow instructions provided by County.
- D. If contact is not made, begin moving to the closest muster station while proceeding through the next steps.
- E. Attempt communications with County on "County EMS UHF" (Frequency 9) on mobile radio.
- F. Attempt communication on "MED10" (UHF). If unable to contact County, then attempt contact on "MED 10-Direct".

Annex A.

EMS Channel Plan – 800MHz

Zone A	Channel Name	Display ID	Channel Description
	"COUNTY EMS"	COEMS	EMS primary dispatch channel [Unit-to-unit traffic should not occur]
	"EMS COMMAND 92"	CMD92	Countywide command & control
			Hospital notification channel
	"EMS COMMAND 93"	CMD93	Incident command use
	"EMS COMMAND 94"	CMD94	Incident command use
"BAYMACS"	BAYMACS	Countywide command & control	
Zone B	Channel Name	Display ID	Channel Description
	"8-CALL-90"	8CALL90	Statewide Mutual Aid
	"8-TAC-91"	8TAC91	Statewide Mutual Aid
	"8-TAC-92"	8TAC92	Statewide Mutual Aid
	"8-TAC-93"	8TAC93	Statewide Mutual Aid
	"8-TAC-94"	8TAC94	Statewide Mutual Aid
	"CAL-FIRE"	CAFIRE1	Statewide Mutual Aid
	"CAL-FIRE-2"	CAFIRE2	Statewide Mutual Aid
Zone C	Channel Name	Display ID	Channel Description
	"8-CALL-90-DIRECT"	8CALL90D	Unit-to-unit / Statewide Mutual Aid
	"8-TAC-91-DIRECT"	8TAC91D	Unit-to-unit / Statewide Mutual Aid
	"8-TAC-92-DIRECT"	8TAC92D	Unit-to-unit / Statewide Mutual Aid
	"8-TAC-93-DIRECT"	8TAC93D	Unit-to-unit / Statewide Mutual Aid
	"8-TAC-94-DIRECT"	8TAC94D	Unit-to-unit / Statewide Mutual Aid
	"CAL-FIRE-DIRECT"	CAFIRE1D	Unit-to-unit / Statewide Mutual Aid
	"CAL-FIRE-2-DIRECT"	CAFIRE2D	Unit-to-unit / Statewide Mutual Aid
	"EMS COMMAND 92-DIRECT"	CMD92D	Unit-to-unit <i>[use as last option]</i>
	"EMS COMMAND 93-DIRECT"	CMD93D	Unit-to-unit
	"EMS COMMAND 94-DIRECT"	CMD94D	Unit-to-unit

Annex B. Mutual Aid Channel Plan – VHF & UHF (only in 9-1-1 System Units)

Zone A / VHF	Channel Name	Display ID	Channel Description
	"XSC COMMAND 20"	XSCC20	Fire Countywide Command
	"XSC TACTICAL 40"	XSCT40	Fire Countywide Tactical
	"WHITE-1"	WHITE1	Fire Statewide Command & Travel
	"CESRS"	CESRS	Fire Statewide Travel
	"V-FIRE-22"	VFIR22	Fire Statewide Tactical
	"V-FIRE-23"	VFIR23	Fire Statewide Tactical
	"CALCORD"	CALCORD	Statewide Tactical
	"BAYMACS"	BAYMACS	Countywide command & control
	"COUNTY OES 10"	XSC10	OES Countywide command & control
	"COUNTY PARKS"	XSC12	County Parks
	"COUNTY ROADS"	XSCROAD	County Roads
	"WEATHER"	WEATHER	Weather Information [Receive Only]
	"SAN BENITO COUNTY EMS"	XBEEMS	San Benito Co. EMS Dispatch
	"SANTA CRUZ COUNTY EMS"	XCZEMS	Santa Cruz Co. EMS Dispatch
"MONTEREY COUNTY EMS"	XMYEMS	Monterey Co. EMS Dispatch	
Zone B / VHF-UHF	Channel Name	Display ID	Channel Description
	"OES-1"	OES1	Statewide Mutual Aid
	"OES-2"	OES2	Statewide Mutual Aid
	"V-CALL-10"	VCALL10	Statewide Mutual Aid
	"V-TAC-11"	VTAC11	Statewide Mutual Aid
	"V-TAC-12"	VTAC12	Statewide Mutual Aid
	"V-TAC-13"	VTAC13	Statewide Mutual Aid
	"V-TAC-14"	VTAC14	Statewide Mutual Aid
	"U-CALL-40"	UCALL40	Statewide Mutual Aid
	"U-TAC-41"	UTAC41	Statewide Mutual Aid
	"U-TAC-42"	UTAC42	Statewide Mutual Aid
	"U-TAC-43"	UTAC43	Statewide Mutual Aid
	"U-CALL-40-DIRECT"	UCALL40D	Statewide Mutual Aid
	"U-TAC-43-DIRECT"	UTAC41D	Statewide Mutual Aid
	"U-TAC-43-DIRECT"	UTAC42D	Statewide Mutual Aid
"U-TAC-43-DIRECT"	UTAC43D	Statewide Mutual Aid	
Zone C / UHF	Channel Name	Display ID	Channel Description
	"COUNTY EMS"	UXSCEMS	EMS dispatch [Received Only]
	"BAYMACS"	BAYMACS	Countywide command & control
	"MED-1-DIRECT"	MED 1D	Statewide Medical Mutual Aid
	"MED-2-DIRECT"	MED 2D	Statewide Medical Mutual Aid
	"MED-3-DIRECT"	MED 3D	Statewide Medical Mutual Aid
	"MED-4-DIRECT"	MED 4D	Statewide Medical Mutual Aid
	"MED-5-DIRECT"	MED 5D	Statewide Medical Mutual Aid
	"MED-6-DIRECT"	MED 6D	Statewide Medical Mutual Aid
	"MED-7-DIRECT"	MED 7D	Statewide Medical Mutual Aid
	"MED-8-DIRECT"	MED 8D	Statewide Medical Mutual Aid
"MED-9-DIRECT"	MED 9D	Statewide Medical Mutual Aid	
"MED-10-DIRECT"	MED 10D	Statewide Medical Mutual Aid	
"MED 10"	MED 10	Statewide Medical Mutual Aid	