



PREHOSPITAL MEDICAL ADVISORY COMMITTEE MEETING AGENDA (PMAC)

PMAC MEMBERS PER POLICY 8202:

Air Transport Provider Representative

11- Brian Harrison

American Medical Response

5- Jeremy Shumaker
Seth Dukes, MD

BLS Ambulance Service Representative

12- Lori Lopez

Cathedral City Fire Department

5- Justin Vondriska

Corona Regional Medical Center

1- Robert Steele, MD
4- Candy Tanamachi

County Fire Chiefs' Non-Transport ALS Provider

10- Jennifer Antonucci, Murrieta FD

County Fire Chiefs' Non-Transport BLS Provider

9- Anthony Gonzalez, Calimesa FD

Desert Regional Medical Center

1- Joel Stillings, D.O.
4- Paige Castaneda PLN

Eisenhower Health

1- Mandeep Daliwhal, MD (Ibanez)
4- Thomas Wofford, PLN

EMT / EMT-P Training Programs

6- Robert Fontaine, Moreno Valley College

EMT-at-Large

13 – Valerie Morris

Paramedic-at-Large

14- Patrick Anderson, Riverside City Fire

Hemet Valley Medical Center

1- Todd Hanna, MD
4- Cindy Blenkarn

Idyllwild Fire Protection District

5- Mark Lamont

Inland Valley Regional Medical Center

1- Zeke Foster, MD
4- Veronica Arellano, PLN

JFK Memorial Hospital

1- Timothy Rupp, MD
4- Robin Boardman, PLN

Kaiser Permanente Riverside

1- Eric Liao, MD
4- Barbara Coriell

This Meeting of PMAC on:

Monday, February 5, 2024

09:00 – 11:00 am

Towers at Riverwalk: 4210 Riverwalk Parkway, Riverside, CA 92505

Next meeting date: May 13, 2024

1. CALL TO ORDER & HOUSEKEEPING (3 Minutes)

Andrew Pachon, MD (Chair)

2. ATTENDANCE (taken based on participant sign in sheet)

Evelyn Pham (REMSA)

3. APPROVAL OF MINUTES (3 Minutes)

December 4, 2023 Minutes— Andrew Pachon, MD (Attachment A)

4. STANDING REPORTS

4.1. Trauma System—Shanna Kissel (Attachment B)

4.2. STEMI System— Leslie Duke (Attachment C)

4.3. Stroke System— Leslie Duke (Attachment D)

5. Other Reports

5.1. CATT/ Buprenorphine/ Leave Behind Naloxone – Sean Hakam

5.2. EMD Update – James Lee

6. DISCUSSION ITEMS, UNFINISHED & NEW BUSINESS

6.1. Unfinished Business –

6.1.1. PMAC Representation (Attachment E)

6.1.1.2. Paramedic Student position

6.1.1.3. Riverside County Police Association

6.2. CQI – Holly Anderson

6.3. Policy Update / Change requests – REMSA

6.4. 2024 Clinical Calendar updated (Attachment F)

6.5. Action Item Review

7. REQUEST FOR DISCUSSIONS

Members can request that items be placed on the agenda for discussion at the following PMAC meeting. References to studies, presentations and supporting literature must be submitted to REMSA three weeks prior to the next PMAC meeting to allow ample time for preparation, distribution and review among committee members and other interested parties.

Loma Linda University Med. Center Murrieta

- 1- Kevin Flaig, MD
- 4- Christopher Ward

Menifee Valley Medical Center

- 1- Todd Hanna, MD
- 4- Henry Javate

Kaiser Permanente Moreno Valley

- 1- George Salameh, MD
- 4- Kimberly McGranahan

Palo Verde Hospital

- 1- David Sincavage, MD
- 4- Katchya Currier

Parkview Community Hospital

- 1- Chad Clark, MD
- 4- Allan Patawaran

Rancho Springs Medical Center

- 1- Zeke Foster, MD
- 4- Janny Nelsen

Riverside Community Hospital

- 1- Stephen Patterson, MD
- 4- Sabrina Yamashiro, PLN

Riverside County Fire Department

- 5- Richard Harvey
- 8- Scott Phillipbar

Riverside County Police Association

- 7- Don Sharp

Riverside University Health System Med. Center

- 1- Andrew Pachon (Chair)
- 4- Lori Maddox, PLN

San Geronio Memorial Medical Center

- 1- Richard Preci, MD
- 4- Katie Phillippi

Temecula Valley Hospital

- 1- Pranav Kachhi, MD
- 4- Nicole Amadon

Trauma Audit Comm. & Trauma Program Managers

- 2- Stephen Kernop, TPD RUHS
- 3- Sara Edwards, TMD RUHS

Ex-officio Members:

- 1- Geoffrey Leung, MD, Public Health Officer
- 2- Reza Vaezazizi, MD, REMSA Medical Director
- 3- Bruce Barton, REMSA Director
- 4- Dan Bates, REMSA Administrator

Members are requested to please sit at the table with name plates in order to identify members for an accurate count of votes

Please come prepared to discuss the agenda items. If you have any questions or comments, call Evelyn Pham at (951) 358-5029 / or email REMSA_Clinical@rivco.org. PMAC Agendas with attachments are available at: www.RivcoReady.org/remsa. Meeting minutes are audio recorded to facilitate dictation for minutes.

8. ANNOUNCEMENTS (15 Minutes)

This is the time/place in which committee members and non-committee members can speak on items not on the agenda but within the purview of PMAC. Each announcement should be limited to two minutes unless extended by the PMAC Chairperson.

9. NEXT MEETING / ADJOURNMENT (1 Minute)

—May 13, 2024- Location: RUHS

PMAC Draft Minutes
December 4, 2023

TOPIC	DISCUSSION	ACTION
1. CALL TO ORDER	PMAC Chair Dr. Andrew Pachon called the meeting to order at 9:07 a.m.	
2. Virtual Attendance	Attendance taken based on sign-in list	
3. Approval of Minutes		The February 6, 2023 PMAC meeting minutes were approved with no changes.
4. STANDING REPORTS		
4.1. Trauma System Updates	<ol style="list-style-type: none"> 1. 2023 Trauma System Plan update in progress, 2022 update pending approval from EMSA. 2. The trauma system would like to welcome to Inland Valley Medical Center, Charlie Hendra as the new Trauma Program Director. 3. RUHS will go through ACS Level 1 verification in December 2023. 4. REMSA will perform trauma center audits for regulatory compliance. 	Information only.
4.2. STEMI System Updates	<ol style="list-style-type: none"> 1. STEMI System Plan update submitted to EMSA, pending approval. 2. The STEMI dashboard posted on new website, rivcoready.org was updated to reflect Q2 2023 data related to the ImageTrend Patient Registry 3. STEMI E2B project (ongoing): continued data feedback of pre-activated vs activated after arrival of incoming STEMI patients disseminated to each facility program manager for their review to increase pre-activation percentage. 4. Cardiac Patient Registry: Development of a report to review over-triage rate. 5. STEMI Manager onboarding: review of REMSA specialty designation policy and data requirements with one new STEMI manager. 	Information only.
4.3. Stroke System Updates	<ol style="list-style-type: none"> 1. Stroke System Plan update submitted to EMSA, pending approval with EMS plan submission. 2. The Stroke dashboard posted on new website, rivcoready.org was updated to reflect Q2 2023 data related to the ImageTrend Patient Registry 3. Project (ongoing): Stroke Hospital Interfacility Transport (HIFT) Education is being completed by all 12 stroke designated hospitals and will be executed on a county level to paramedics as soon as the LMS platform is ready. Projected completion date of February 28th, 2024 is the goal. 4. Stroke Patient Registry: developing a report to review the mimic rate 5. Stroke Manager onboarding: review of REMSA specialty designation policy and data requirements with one new stroke manager 	Information only.

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	6. State stroke data reporting: Riverside County Q1 and Q2 2023 stroke facilities will be imported into the Cal CEMSIS ImageTrend registry when the ImageTrend link is repaired, expected November 28, 2023.	
5. OTHER REPORTS		
5.2. Tele-911	Tabled to next meeting.	Information only.
5.3. EMD Update	<ul style="list-style-type: none"> In June, Cathedral City launched their EMD program The three long running agencies are working towards becoming accredited centers of excellence International Academy launched an update with protocol 40 in regards to medical transports, and in the upcoming EMD meeting, there will be discussion on how to implement that best and what centers would be utilizing it Protocol 41 still has not come out yet, until protocol 40 has finalized 	Information only.
6. DISCUSSION ITEMS, UNFINISHED & NEW BUSINESS		
6.1 Unfinished Business		
6.1.1 PMAC Representation 6.1.1.1 EMT Student position 6.1.1.2 Riverside County Police Association 6.1.1.3 Riverside County Police Association	<p>EMT Student Position PMAC discussed having an EMT Student position added and clarified that a Paramedic student would be a better candidate as they are in the program longer, therefore allowing time for the student to attend PMAC meetings. Bob Fontaine clarified further that if a Paramedic student position was added, to ensure a smooth transition and predictability, that the position would be filled with the class president along with alternating years between Moreno Valley College and NCTI. After reviewing the benefits and drawbacks of having a student position, PMAC decided to table the vote for the position until after the discussion of the new PMAC representation proposal (Attachment E) was discussed first, since it relates to membership positions as well.</p> <p>Riverside County Policy Association Tabled</p> <p>PMAC Representation (Attachment E) As the current membership stands, there are 49 voting members. Tim Buckely proposed a new membership structure based on feedback from the EMS Officers group that would condense the voting members to 37. Attachment E lists the newly proposed voting members, allocating 1 vote each to air providers, als providers, bls providers, individual fire agencies, individual hospitals, training programs and police association. PMAC deliberated between how to properly balance the votes but was unable to come to a consensus. Suggestions were</p>	Discussion.

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	<p>brought up to create a sub-committee to work on modifying the proposal. Zeke Foster, MD motioned to move forward and vote to approve the new membership structure (Attachment E) with the amendment to review changes in 1 year. Patrick Anderson, Riverside City Fire, seconded the motion. PMAC voted: 6 – in favor. 9 – opposed. 2 – abstained. Motion does not pass. PMAC proposed for a sub-committee of 5 constituents to work together to modify the proposal.</p>	
<p>6.2. Recognitions</p>	<p>Recognizing outstanding performance from our providers, REMSA and PMAC congratulated and thanked first responders and their team for exceptional service in patient care. These incidents highlight community partnership along with great training in early response and triage.</p> <p>Awards of Excellence were given to the recipients below:</p> <p>Pediatric stroke case AMR Riverside</p> <ul style="list-style-type: none"> • Maria Garcia-Manzano, Paramedic • Mateo Alvarado, EMT <p>Cal Fire</p> <ul style="list-style-type: none"> • Devon Lariviere, Fire Captain • Jorge Celis, Paramedic-Engineer • Steven Van Meter, Firefighter <p>STEMI patient transport AMR Hemet</p> <ul style="list-style-type: none"> • Caryn Walter, Paramedic • Stacey Towns, EMT • Jeannette Leuty, Paramedic • Victor Mendieta, EMT <p>MICN destination triage Desert Regional Medical Center</p> <ul style="list-style-type: none"> • Morgan Pope, RN MICN <p>Patient Choking AMR Riverside</p> <ul style="list-style-type: none"> • Nestor Gonzales, Paramedic • Nicholas Rodriguez, EMT <p>Going forward, recognitions will be presented at EMCC to allow for the public and family members to attend.</p>	

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<p>6.3 CQI/Policy Update</p>	<p>SCV Updates REMSA sent a copy of the form that will be used moving forward for skills competency verification.</p> <p>Brainier (REMSA system level learning management system) is up and running. In January for CE Providers, when summaries are due, CE providers who participate in Brainier will no longer need to submit their summaries, it will be updated in Brainier.</p> <p>PMDR is pulled and REMSA is in the process of editing the policy manual in its entirety to reflect this change.</p> <p>QI Process Summary Items that are frequently QI in REMSA are:</p> <ul style="list-style-type: none"> • Medication error • Ketamine, Versed, Fentanyl • Policy 3308 violation, downgrade policy • ET tube placement and reverification of placement <p>REMSA has seen the number of case reviews go up but is unsure if it is due to more errors in incidents, or agencies are now reporting them more often. However, adequate review and feedback for education has always been given.</p>	<p>Information only.</p>
<p>6.4 Change request</p>	<p>Dr Foster requested from REMSA to have a change log documentation for policy changes that can be posted or shared to the agencies</p>	<p>Discussion.</p>
<p>6.5 Strategic Plan</p>	<p>AP Trident is working with REMSA to complete the strategic plan. There will be a survey coming out that REMSA would like for all agencies to participate in. The survey will only take a few minutes and will be broken up into five sections. Please forward the survey to your crews to increase participation.</p>	<p>Information only.</p>
<p>6.6. The use of the term “Excited Delirium”</p>	<p>The use of the controversial term “excited delirium” should no longer be used. California Governor signed the Assembly Bill 360, outlawing the term. The term has also been removed from our protocols.</p>	<p>Information only.</p>
<p>6.7. RODA/CATT</p>	<p>RODA (Riverside Overdose Date to Action) grant project review was presented.</p> <ul style="list-style-type: none"> • Reviewed sustainable outcomes • Leave Behind Naloxone (Narcan) kits distribution • Buprenorphine update and administration by EMS, paramedics administering the first dose in the field for withdrawal • Grant is renewed for the next 5 years <p>CATT (Community Assessment Transport Team) review</p> <ul style="list-style-type: none"> • Finished up their 1 year pilot program in Hemet • The intent of the pilot program is to better serve EMS patients coping with behavioral health and 	<p>Information only.</p>

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	<ul style="list-style-type: none"> • substance use related incidents through on-scene assessment and more appropriate resource referral. • Instead of traditional EMS system activation and transport to emergency departments, these individuals can instead be assessed on-scene by a behavioral health clinician, and if necessary, transported by CATT to a more appropriate facility. • Takeway from the program in regards to the homeless population, they make up about 10% of the patients, but just 5% of the calls. Many of those patients are 5150s 	
6.8. CARES	<p>2022 CARES data reviewed. Key highlights include:</p> <ul style="list-style-type: none"> • 33 states participate in CARES • A reduction of 4% of medical cardiac arrests in the region compared to 2020/2021 increases during the impacts of Covid-19 on patients in the healthcare system • Reduction of median age in 2021 has returned to pre-Covid-19 levels • The small but significant increase of in-home arrests during the Covid-19 response has returned to pre-Covid levels • Riverside County continues to have a lower rate of AED utilization prior to EMS arrival compared to the nation\ • Survival rates in Riverside County have improved since 2021 but is still below national and state levels 	Information only.
6.9. 2024 Clinical Calendar	<p>PMAC approved the REMSA 2024 clinical calendar dates, with one change to the May date to switch to the 13th instead of the 20th, due to a conflict with CFED. EMCC dates are pending and not finalized yet.</p>	Information only.
6.10. Action Item Review	<ul style="list-style-type: none"> • Sub-committee for PMAC membership structure 	
7. Request for Discussions	<ul style="list-style-type: none"> • Send in request for discussions/policy changes to Holly by December 15th to be added to the January CQILT agenda. The items that are agreed upon in CQILT will get put onto the agenda for PMAC. • Determination of death in the back of the ambulance 	Discussion.
8. Announcements	<ul style="list-style-type: none"> • New website, www.Rivcoready.org • Office of administrative law for state of California have inserted Ketorolac, Ketamine, TXA and acetaminophen under basic SCOPE for paramedics. Can now be added at a local level of SCOPE for Ketorolac and acetaminophen. • In 2024, REMSA is participating in Data Mart from ImageTrend, which allows us to move data to the appropriate constituencies. This will bring us towards merging data with DPSS for homelessness and create system level repeat patient functionality. • REMSIS will be adding for agency level validation, there will be assigned individuals from each agency that will 	Information only.

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	be able to write their own validity rules, but still comply with data standardization requirements	
9. NEXT MEETING/ADJOURNMENT	Monday, February 5, 2024 (9:00 – 11:00 a.m.) In-person	Information only.

DRAFT

FOR CONSIDERATION BY PMAC

DATE: January 22, 2024

TO: PMAC

FROM: Shanna Kissel, RN, Assistant Nurse Manager

SUBJECT: Trauma System

1. Continue to work on 2023 Trauma System Plan update. 2022 still pending EMSA approval
2. RUHS went through ACS Level I verification in December 2023, pending final report. IVMC to go through focused verification in April.
3. REMSA to send out 2024 trauma data dictionary to centers by beginning of February.,
4. REMSA will perform trauma center audits for regulatory compliance.

ACTION: PMAC should be prepared to receive the information and provide feedback to REMSA.

FOR CONSIDERATION BY PMAC

Attachment C

Page 1 of 1

Date: February 5, 2024

TO: PMAC

FROM: Leslie Duke, Specialty Care Coordinator, RN

SUBJECT: STEMI System

1. STEMI 2022 System Plan update submitted to EMSA, still pending EMSA approval.
2. The STEMI dashboard posted on Rivcoready website was updated to reflect Q3 2023 data related to the Image Trend STEMI patient registry.
<https://rivcoready.org/remsa/programs#2741959481-1182105694>
3. STEMI E2B project (ongoing): continued data feedback of pre-activated vs activated after arrival of incoming STEMI patients disseminated to each facility program manager for their review to increase pre-activation percentage.
4. STEMI Manager onboarding: review of REMSA specialty designation policy and data requirements with one new STEMI manager.

Next STEMI Committee meeting is on April 9th, 2024, via TEAMS conference

Action: PMAC should be prepared to receive the information and provide feedback to the EMS Agency

FOR CONSIDERATION BY PMAC

Date: February 5, 2024

TO: PMAC

FROM: Leslie Duke, Specialty Care Coordinator, RN

SUBJECT: Stroke System

1. Stroke System Plan update 2022 submitted to EMSA, still pending approval.
2. The Stroke dashboard posted on Rivcoready website was updated to reflect Q3 2023 data related to the Image Trend Stroke patient registry.
<https://rivcoready.org/remsa/programs#2741959481-1532242908>
3. Project (ongoing): Stroke Hospital Interfacility Transport (HIFT) Education continues to be completed by all 12 stroke designated hospitals. Riverside County paramedics have been assigned the same education through our Brainier learning management system on January 19th a with a completion date of April 30, 2024.
4. LAMS stroke education was assigned to paramedics on the Brainier platform. This short education was to reiterate the importance of relaying the LAMS score to all stroke designated hospitals prior to arrival.

Next Stroke Committee meeting is on February 1st, 2024, via TEAMS conference

Action: PMAC should be prepared to receive the information and provide feedback to the EMS Agency

8202 – Prehospital Medical Advisory Committee

PURPOSE

To describe the ~~role, function~~ and composition of the Prehospital Medical Advisory Committee (PMAC); including its rules of operation.

THE PREHOSPITAL MEDICAL ADVISORY COMMITTEE

The ~~purpose~~ function of the PMAC is to provide advice and expertise to the County of Riverside EMS Agency (REMSA) ~~related to the administrative, operational, and functional prehospital delivery of Emergency Medical Services~~, and to enhance ~~coordination and~~ cooperation between the multiple EMS providers who deliver care to the residents and visitors of Riverside County ~~system participants on administrative, operational, and emergency medical issues~~.

PMAC serves as an advisory committee to the REMSA Medical Director and will be open to the public.

~~Functions of the~~ PMAC will ~~include, but not be limited to:~~

1. ~~Provide~~ specialized advice to the REMSA Medical Director in carrying out the agency's statutory responsibilities to develop written medical protocols;
2. ~~Provide~~ specialized advice to the REMSA Medical Director in carrying out the agency's statutory responsibilities to maintain medical control of the EMS system;
3. ~~Provide physician representative to the REMSA Emergency Medical Care Committee (EMCC) Medical Advisory Committee (MAC) defined in Section 100145(b) of Division 9, Title 22, California Code of Regulations~~ for the approval of EMS prehospital treatment procedures or drugs on a trial basis;
4. ~~Provide~~ communication and coordination between REMSA and EMS system participants;
5. ~~Provide~~ other specialized ~~subject matter expertise advice~~ as deemed necessary and appropriate.

PMAC MEMBERSHIP

Active (voting) membership will consist of:

POSITION	#	APPOINTING AUTHORITY
Base Hospital Physician	1	Base Hospitals
Non-base Hospital Physician	1	Non-Base Hospitals
Non-Base Hospital RN	1	Non-Base Hospitals
Pediatric Critical Care Physician	1	Hospital Association of Southern California (HASC)
Stroke Hospital Coordinator- RN	1	Stroke Committee
STEMI hospital Coordinator- RN	1	STEMI Committee
Prehospital Liaison Nurse (PLN)	1	PLN workgroup
Trauma Program Medical Director	1	Trauma Advisory Committee
Public Transport Medical Director	1	Public Transport Providers
Private Transport Medical Director	1	Private Transport Providers

Fire Department Medical Director	1	Fire Chiefs Association
EMS Officers	1	EMS Officers
Public Transport Medical Rep (Paramedic/RN)	1	Fire Chiefs Association
Private Transport Medical Rep (Paramedic/RN)	1	Ambulance Association
Non-Transport Agency Rep (Paramedic/RN)	1	EMS Officers
Riverside County Police Association	1	EMS Officers
Tribal partner representative	1	EMS Officers
Private Air Transport Medical Director	1	Riverside County permitted air transport providers
EMS Training Program Representative	1	EMS Training Program Provider(s)

- ~~1. The Emergency Department Physician Director of each paramedic receiving center in Riverside County or his/her physician designee,~~
- ~~2. The chairman of the Trauma Audit Committee (TAC) or his/her designee,~~
- ~~3. A representative from the Trauma Program Managers committee,~~
- ~~4. The Prehospital Liaison Nurse (PLN) of each base hospital and the Emergency Department (ED) Nurse Manager of each non-base paramedic receiving center,~~
- ~~5. A representative from each Riverside County permitted emergency ALS ambulance service,~~
- ~~6. A representative elected from the EMS training program(s),~~
- ~~7. A representative from the Riverside County Police Chiefs' Association,~~
- ~~8. A representative from Riverside County Fire Department,~~
- ~~9. A representative from a non-transporting BLS fire department selected by the Riverside County Fire Chiefs' Association,~~
- ~~10. A representative from a non-transporting ALS fire department selected by the Riverside County Fire Chiefs' Association,~~
- ~~11. A representative elected from the Riverside County permitted air transport providers,~~
- ~~12. A representative elected from the Riverside County permitted BLS ambulance services,~~
- ~~13. An active field EMT elected by the committee (EMT-at-Large),~~
- ~~14. An active field paramedic elected by the committee (Paramedic-at-Large).~~

Ex-officio members (non-voting members) will include:

1. The county Director of Public Health / Health Officer,
2. The REMSA Medical Director or designee,
3. The REMSA Administrator,
4. The Deputy REMSA Administrator,
5. Representatives from other Riverside County departments/agencies (e.g. EMD, Behavioral Health, etc.),
- ~~6. A representative from the Hospital Association of Southern California (HASC),~~
7. The Emergency Department Physician Director(s) or their physician designees from out-of-county acute care hospitals impacted by Riverside County residents.

~~The committee elected membership positions of EMT-at-Large and Paramedic-at-Large will serve a two (2) year term. Elections will be at the last meeting of even-numbered years. Should either of the at-large members vacate their seat prior to the end of their term, a person who meets the qualifications will be elected by the committee for the remainder of that term.~~

Each position will be selected by the appointing authority above and individual agencies can only fill no more than two (2) positions. It is expected that each member should attend a minimum 75% of meetings each year or the appointing authority will be contacted to request a new representative be appointed.

The voting committee will elect from the membership a chairperson, who will be a physician, and a vice-chairperson, who will be a prehospital care provider, both of whom will serve a ~~two (2)~~ three (3) year term. Elections will be at the last meeting of ~~year of the third year of term-even-numbered years~~. Should either of the committee officers vacate their seat prior to the end of their term, a member who meets the qualifications will be elected by the committee for the remainder of that term. **A quorum for voting is defined by four (4) physicians, two (2) hospital-based nurses and three (3) field representatives from EMS being present at the meeting.** The position of Chairperson is a non-voting position except in cases where a tie vote must be broken. **The Chairperson shall also serve as the elected representative to REMSA Emergency Medical Care Committee (EMCC).**

REMSA **staff** will provide support for the PMAC, including but not limited to, the scheduling and recording of meetings, developing agendas, supplying needed **background**/research information, and the dissemination of information generated from PMAC.

The PMAC will meet at least quarterly **unless otherwise determined by the Chair and Vice Chair.**

2024 REMSA Clinical Meeting Calendar

January							February							March							April						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6					Stroke	2	3						1	2		1	2	3	4	5	6
7	8	STEMI	10	CQILT	12	13	4	PMAC/ EMCC	6	7	8	9	10	3	4	5	6	7	8	9	7	8	STEMI	10	CQILT	12	13
14	15	16	17	18	19	20	11	12	13	14	15	16	17	10	11	12	13	14	15	16	14	15	16	17	18	19	20
21	22	23	24	25	26	27	18	19	20	TAC	22	23	24	17	TtT	TtT	TtT- PLN	21	22	23	21	22	23	24	25	26	27
28	29	30	31				25	26	27	28	29			24	TtT	TtT	27	28	29	30	28	29	30				
														31													

May							June							July							August						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
			1	Stroke	3	4						1			1	2	3	4	5	6					Stroke	2	3
5	6	7	8	9	10	11	2	3	4	5	6	7	8	7	8	STEMI	10	CQILT	12	13	4	5	6	7	8	9	10
12	PMAC/ EMCC	14	TAC	16	17	18	9	10	11	12	13	14	15	14	15	16	17	18	19	20	11	12	13	14	15	16	17
19	20	21	22	23	24	25	16	17	18	19	20	21	22	21	22	23	24	25	26	27	18	19	20	TAC	22	23	24
26	27	28	29	30	31		23	24	25	26	27	28	29	28	29	30	31				25	PMAC/ EMCC	27	28	29	30	31
							30																				

September							October							November							December						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7			1	2	3	4	5						1	2	1	PMAC/ EMCC	3	4	5	6	7
8	9	10	11	12	13	14	6	7	8	9	CQILT	11	12	3	4	5	6	Stroke	8	9	8	9	10	11	12	13	14
15	16	17	18	19	20	21	13	14	STEMI	16	17	18	19	10	11	12	13	14	15	16	15	16	17	18	19	20	21
22	23	24	25	26	27	28	20	21	22	23	24	25	26	17	18	19	TAC	21	22	23	22	23	24	25	26	27	28
29	30						27	28	29	30	31			24	25	26	27	28	29	30	29	30	31				

TtT days

Riverside County Holidays

PUC documents to providers

Annual policy implementation date