

Submit form to: admin@edcjpa.org

Exception for Response Time Criteria Form

In the event that your medic unit exceeds the response time criteria for any of the reasons listed below, please check the appropriate box and provide an explanation.

	Disaster and mutual-aid situation (mutual-aid shall not be chronically used to avoid response time requirement	is).
	Additional units responding to large multi-casualty incident situations requiring more than two ambulances.	
	Incorrect or inaccurate dispatch information received at a 9-1-1 PSAP, public safety agency, or other direct so	urce.
	Material change in dispatch location (Volcanoville Road vs. Volcano Road).	
	Unavoidable communications failure.	
	Inability to locate address due to non-existent address (Number or Street Signage).	
	Inability to locate patient due to patient departing the scene provided that the unit has arrived at the	
	originally dispatched location within the response time standard.	
	Delays caused by extraordinary adverse traffic conditions.	
	Delays caused by road construction and/or closure.	
	Unavoidable delays caused by off-paved-road locations.	
	Severe weather conditions including dense fog, snow, orice.	
	Delays attributable to the County and not due to the JPA (including an inventory audit).	
	Delays attributable to geographic location (extreme remote location).	
	Delays attributed to limited or controlled access to patient locations.	
	Call was dispatched as "Code 2" or reduced to "Code 2" while in route.	
	Staging required until scene is secured by law enforcement units.	
Explai	n reason(s) for delay (required):	
Incide	nt #: Date of Incident: / / 20 Medic Unit Number:	
Location	on of Call:	
	on of Call: / / / /	
Location	on of Call: Time of Dispatch / / / / Response Time	
Location	on of Call: / / / /	
Location	on of Call: Time of Dispatch / / / / Response Time	nutes
Location	on of Call: Time of Dispatch Please Check Appropriate Response Area Below:	. nutes
Location Times	on of Call: Time of Dispatch Please Check Appropriate Response Area Below: an: 11 minutes Semi-Rural: 16 minutes Rural: 24 minutes Wilderness: 90 minutes	******
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Location Times Urb	in of Call: Time of Dispatch Please Check Appropriate Response Area Below: an: 11 minutes Semi-Rural: 16 minutes Rural: 24 minutes Wilderness: 90 minutes Inquiry: If the delay was caused by a move-up please explain (Example: Call was in an area we response)	******
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Location Times Urb Special from. V	in of Call: Time of Dispatch Please Check Appropriate Response Area Below: an: 11 minutes Semi-Rural: 16 minutes Rural: 24 minutes Wilderness: 90 minutes Inquiry: If the delay was caused by a move-up please explain (Example: Call was in an area we response)	******
Location Times Urb Special from. V	Time of Dispatch Arrival Response Time Please Check Appropriate Response Area Below: an: 11 minutes Semi-Rural: 16 minutes Rural: 24 minutes Wilderness: 90 minutes Inquiry: If the delay was caused by a move-up please explain (Example: Call was in an area were moved from Station# to Station# and:	******

NOT PART OF PATIENT MEDICAL RECORD

Revised 03.12.18

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