## DEPARTMENT OF HEALTH SERVICES COUNTY OF LOS ANGELES

## SUBJECT: REGIONAL EMS SURGE ASSISTANT PLAN

## **CHANGE LOG**

| Published<br>Date | Status   | Section and<br>Subsection Affected | Description of Change(s)                                                                                                                                                            |
|-------------------|----------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 01/01/2024        | Revision |                                    | <ul> <li>Reference No. 855 Hospital EMS<br/>Surge Assistance Plan:COVID-19<br/>Response has been revised to<br/>Reference No. 1114 Regional EMS<br/>Surge Assistant Plan</li> </ul> |