



Inland Counties Emergency Medical Agency

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Serving San Bernardino, Inyo, and Mono Counties
Tom Lynch, EMS Administrator
Reza Vaezazizi, MD, Medical Director

DATE: December 27, 2018

TO: EMS Providers - ALS, BLS, LALS, EMS Aircraft

FROM: Tom Lynch
EMS Administrator

SUBJECT: REPORTING SUSPICIOUS INJURIES

On August 20, 2018, Section 11160 of the Penal Code relating to reporting suspicious injuries was amended to provide clarity. Any emergency medical technicians or paramedics that provide emergency medical services to a person for a wound or physical injury inflicted as a result of assaultive or abusive conduct, or by means of a firearm, must make a report by telephone immediately, or as soon as practically possible, to a local law enforcement agency.

A written report on a standard form shall be prepared and sent to the local law enforcement agency within two (2) working days of treating the person. A violation of these provisions is punishable as a misdemeanor. See attached Assembly Bill No. 1973 and suggested approved Mandated Suspicious Injury Report form (CAL OES 2-920). The form is available on the ICEMA website at ICEMA.net under Applications/Forms/Live Scan.

If you have any questions, please contact Suzee Kolodzik, EMS Specialist, at (909) 388-5820 or via e-mail at susan.kolodzik@cao.sbcounty.gov.

TL/SK/jlm

Attachments

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Assembly Bill No. 1973

CHAPTER 164

An act to amend Section 11160 of the Penal Code, relating to reporting crime.

[Approved by Governor August 20, 2018. Filed with Secretary of State August 20, 2018.]

LEGISLATIVE COUNSEL'S DIGEST

AB 1973, Quirk. Reporting crimes.

Existing law requires specified health practitioners who have knowledge of or observe a patient who the practitioner knows or reasonably suspects has suffered from a wound or injury inflicted by specified types of conduct to report to a law enforcement agency, as specified. A violation of these provisions is a crime.

This bill would extend those reporting duties to health practitioners, as defined, employed by local government agencies, including, among others, emergency medical technicians and paramedics, as specified, and to employees of entities under contract with local government agencies to provide medical services. By expanding the scope of an existing crime, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

The people of the State of California do enact as follows:

SECTION 1. Section 11160 of the Penal Code is amended to read:

11160. (a) A health practitioner, as defined in subdivision (a) of Section 11162.5, employed by a health facility, clinic, physician's office, local or state public health department, local government agency, or a clinic or other type of facility operated by a local or state public health department who, in his or her professional capacity or within the scope of his or her employment, provides medical services for a physical condition to a patient whom he or she knows or reasonably suspects is a person described as follows, shall immediately make a report in accordance with subdivision (b):

(1) A person suffering from any wound or other physical injury inflicted by his or her own act or inflicted by another where the injury is by means of a firearm.

(2) A person suffering from any wound or other physical injury inflicted upon the person where the injury is the result of assaultive or abusive conduct.

(b) A health practitioner, as defined in subdivision (a) of Section 11162.5, employed by a health facility, clinic, physician's office, local or state public health department, local government agency, or a clinic or other type of facility operated by a local or state public health department shall make a report regarding persons described in subdivision (a) to a local law enforcement agency as follows:

(1) A report by telephone shall be made immediately or as soon as practically possible.

(2) A written report shall be prepared on the standard form developed in compliance with paragraph (4) of this subdivision, and adopted by the Office of Emergency Services, or on a form developed and adopted by another state agency that otherwise fulfills the requirements of the standard form. The completed form shall be sent to a local law enforcement agency within two working days of receiving the information regarding the person.

(3) A local law enforcement agency shall be notified and a written report shall be prepared and sent pursuant to paragraphs (1) and (2) even if the person who suffered the wound, other injury, or assaultive or abusive conduct has expired, regardless of whether or not the wound, other injury, or assaultive or abusive conduct was a factor contributing to the death, and even if the evidence of the conduct of the perpetrator of the wound, other injury, or assaultive or abusive conduct was discovered during an autopsy.

(4) The report shall include, but shall not be limited to, the following:

(A) The name of the injured person, if known.

(B) The injured person's whereabouts.

(C) The character and extent of the person's injuries.

(D) The identity of any person the injured person alleges inflicted the wound, other injury, or assaultive or abusive conduct upon the injured person.

(c) For the purposes of this section, "injury" shall not include any psychological or physical condition brought about solely through the voluntary administration of a narcotic or restricted dangerous drug.

(d) For the purposes of this section, "assaultive or abusive conduct" shall include any of the following offenses:

(1) Murder, in violation of Section 187.

(2) Manslaughter, in violation of Section 192 or 192.5.

(3) Mayhem, in violation of Section 203.

(4) Aggravated mayhem, in violation of Section 205.

(5) Torture, in violation of Section 206.

(6) Assault with intent to commit mayhem, rape, sodomy, or oral copulation, in violation of Section 220.

(7) Administering controlled substances or anesthetic to aid in commission of a felony, in violation of Section 222.

(8) Battery, in violation of Section 242.

(9) Sexual battery, in violation of Section 243.4.

- (10) Incest, in violation of Section 285.
- (11) Throwing any vitriol, corrosive acid, or caustic chemical with intent to injure or disfigure, in violation of Section 244.
- (12) Assault with a stun gun or taser, in violation of Section 244.5.
- (13) Assault with a deadly weapon, firearm, assault weapon, or machinegun, or by means likely to produce great bodily injury, in violation of Section 245.
- (14) Rape, in violation of Section 261.
- (15) Spousal rape, in violation of Section 262.
- (16) Procuring any female to have sex with another man, in violation of Section 266, 266a, 266b, or 266c.
- (17) Child abuse or endangerment, in violation of Section 273a or 273d.
- (18) Abuse of spouse or cohabitant, in violation of Section 273.5.
- (19) Sodomy, in violation of Section 286.
- (20) Lewd and lascivious acts with a child, in violation of Section 288.
- (21) Oral copulation, in violation of Section 288a.
- (22) Sexual penetration, in violation of Section 289.
- (23) Elder abuse, in violation of Section 368.
- (24) An attempt to commit any crime specified in paragraphs (1) to (23), inclusive.

(e) When two or more persons who are required to report are present and jointly have knowledge of a known or suspected instance of violence that is required to be reported pursuant to this section, and when there is an agreement among these persons to report as a team, the team may select by mutual agreement a member of the team to make a report by telephone and a single written report, as required by subdivision (b). The written report shall be signed by the selected member of the reporting team. Any member who has knowledge that the member designated to report has failed to do so shall thereafter make the report.

(f) The reporting duties under this section are individual, except as provided in subdivision (e).

(g) A supervisor or administrator shall not impede or inhibit the reporting duties required under this section and a person making a report pursuant to this section shall not be subject to any sanction for making the report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established, except that these procedures shall not be inconsistent with this article. The internal procedures shall not require any employee required to make a report under this article to disclose his or her identity to the employer.

(h) For the purposes of this section, it is the Legislature's intent to avoid duplication of information.

(i) For purposes of this section only, "employed by a local government agency" includes an employee of an entity under contract with a local government agency to provide medical services.

SEC. 2. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because

this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.

SUSPICIOUS INJURY REPORT

STATE OF CALIFORNIA

California Office of Emergency Services

Cal OES 2-920

Confidential Document

Penal Code Section 11160 requires that if any health practitioner, within their scope of their employment, provides medical services for a wound or physical injury inflicted as a result of assaultive or abusive conduct, or by means of a firearm, shall make a telephone report immediately or as soon as possible. They shall also prepare and submit a written report within 2 working days of receiving the information to a local law enforcement agency. This is the official form (Cal OES 2-920) for submitting the written report.

This form is used by law enforcement only and is confidential in accordance with Section 11163.2 of the Penal Code. In no case shall the person identified as a suspect be allowed access to the injured person's whereabouts.

Part A: PATIENT WITH SUSPICIOUS INJURY

1. Name of Patient (Last, First, Middle)	2. Birth Date	3. Gender <input type="checkbox"/> M <input type="checkbox"/> F	4. SAFE Telephone Number ()
5. Patient Address (Number and Street / Apt – No P.O. Box)		City	State Zip
6. Patient Speaks English <input type="checkbox"/> Yes <input type="checkbox"/> No If No, identify language spoken: _____		7. Date and Time of Injury Date: Time: <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/> unknown	
8. Location / Address Where Injury Occurred, if Available. Check here if unknown: <input type="checkbox"/>			
9. Patient description of the incident. Include any identifying information about the person the patient alleges caused the injury and the names of any persons who may know about the incident.			<input type="checkbox"/> Additional Pages Attached
10. Name of Suspect, if Identified by the Patient		11. Relationship to Patient. <input type="checkbox"/> No Relationship	
12. Suspicious Injury Description. Include a brief description of physical findings, lab tests completed or pending, and other pertinent information. <input type="checkbox"/> Additional Pages			

Part B: REQUIRED – AGENCIES RECEIVING PHONE AND WRITTEN REPORTS

13. Law Enforcement Agency Notified By Phone (Mandated by PC 11160)		14. Date and Time Reported Date: Time: am pm	
15. Name of Person Receiving Phone Report (First and Last)	16. Title	17. Phone Number ()	
18. Law Enforcement Agency Receiving Written Report (Mandated by PC 11160)		19. Agency Incident Number	

Part C: PERSON FILING REPORT

20. Name of Health Practitioner (First and Last)		Title	Telephone
21. Employer's Name			Phone Number
22. Employer's Address (Number and Street)		City	State Zip
23. HEALTH PRACTITIONER'S SIGNATURE:			26. Date Signed: