Woodbury High School Athletic Emergency Action Plan

The Emergency Action Plan (EAP) is a guide to responding to emergency situations. The plan is helpful to identify the role of the members of those who may be involved in an emergency.

Emergency Personnel

The Certified Athletic Trainer is to provide leadership in the health care of the athlete. This includes emergency management of injuries/illnesses during participation in school-sponsored activities. As part of the emergency personnel, the coaches, security personnel, event supervisors, and student aids are encouraged to be trained in first aid and CPR; currently, this is not mandatory. Their role is to provide support to the ATC in an emergency.

1. Immediate Care

The Athletic Trainer’s hours are posted outside of the Athletic Training Room (hours are subject to change). The Certified Athletic Trainer will be on the grounds for all varsity football games and practices. Game coverage for each sport and level varies according to the contract between Woodbury High School and NovaCare Rehabilitation.

The level of emergency medical training of the coaches, security personnel, event supervisors, and student aids (Bethel University Athletic Training Student interns), will vary and their action must be in accordance with their level of certification.

1. Emergency Equipment

Appropriate equipment will be on hand for all games, and centrally located in the Athletic Training Room during the remainder of the time. Emergency personnel should be adequately educated on the location of equipment. Each team will be given a stocked first aid kit at the beginning of the season, and it is required that the kit be with the team at all practices and games. It is the responsibility of the coach to inform the Athletic Trainer if at any time throughout the season more supplies are needed for the first aid kit. In the case of an emergency, the appropriate emergency equipment (AED, crutches, splints, etc…) will be brought to the scene by the designated member of the emergency team.

1. Activation of the Emergency Medical System (EMS) and Directing to the Scene

One member of the emergency care team will be directed to activate the EMS. It is desirable that this individual should be trained in activating EMS, and that they be knowledgeable of the situation and location of the venue and entrances. In the case that security persons are present, that is their primary role.

Emergency Communication

A cellular phone, land line, or two-way radio is available at practices and games, which is means of contact with EMS when dealing with a life-threatening or serious injury.

In the event that the Athletic Trainer is not available for a practice or non-contract game, the head coach or other designated person is to have a two-way radio, cellular phone, or close access to a land-line for emergency situations.

Numbers

Activating EMS from a land-line within school grounds, the “8” button is pressed before dialing 9-1-1

Main line for Woodbury High School is 651.768.4400

Athletic Training Room 651.768.4470

Athletic Trainer (Anna Charpentier) cell 651.303.5608

Woodbury Police: 651.714.3600

Woodbury EMS: 651.714.3600

Woodbury Fire: 651.714.3550

Transportation

Emergency transportation of a seriously injured individual to the Emergency Room will be done by the activated EMS ambulance in a life-threatening injury/illness (as situation warrants). With non-life-threatening injuries/illnesses the parent/guardian of the athlete will be notified of the situation and asked to provide transportation to the ER. A member of the Emergency Personnel may provide transportation if the parent/guardian are not available. If more than one WHS coach is at an event when a student needs to be transported to the ER and the student’s parent(s)/guardian(s) are not in attendance, it is required that one WHS coach rides with the student to the emergency room. **Students and Student Aids may not transport athletes.**

Heat Acclimatization & Heat Illness

The early warning signs of heat illnesses include:

 - Exhaustion - Headache

 - Muscle cramping - Dizziness

 - Nausea - Thirst

 - Decreased athletic performance

The key to management is early recognition of symptoms, and immediate and effective treatment and referral. Symptoms of heat illness represent a continuum, and can worsen quickly if proper care is not rendered. In all cases, appropriate actions include:

* Cessation of activity
* Remove the athlete from the sun at the first sign or symptom of heat illness
* Assist in cooling the body – use ice packs on sides of the neck,, armpits, groin and crease at the top of the thigh
* Administer fluids; cool water or an electrolyte drink with low sugar content
* Monitor vital signs
* Under no circumstances should an athlete with symptoms be allowed to return to play the same day
* **The best management of heat related illness is PREVENTION**

Steps to prevent heat illnesses include:

* Ensure the athlete is well hydrated prior to the start of any and all activity
* Allow frequent periods of rest and hydration during activity
* Allow unrestricted fluid replacement; encourage fluids before, during and after activity
* Gradually increase activity in the heat over a period of 7-10 days to allow adequate acclimatization
* Wear light-weight and light-colored clothing
* Schedule activities at the coolest time of day
* Routinely monitor changing weather conditions with close attention to temperature and humidity
* See diagram below



Lightning

A member of the emergency care team is designated to monitor threatening weather conditions and make the decision to remove an individual or team from a venue or event. Monitor how close lightning is occurring. Count the seconds using the flash-to-bang method (count the seconds after the thunder before the lightning and divide by five, which gives the distance in miles the lightning is away). When the count is 30 seconds (6 miles) everyone should be moved to safety. Ideally, 30 minutes should pass following the last flash of lightning or thunder under or at the count of 30 seconds (6 miles) before returning to play.

Injury/Illness Emergency Protocol

The following procedures are to be carried out by a Certified Athletic Trainer, or appropriately trained Athletic Training student. In the event that an ATC is not available, the head coach/designee is to perform duties listed below, as their training allows.

A. For contests and practices occurring at Home

1. MEDICAL EMERGENCIES (no breathing, severe bleeding, concussion with loss of consciousness, suspected neck or spinal injury, fracture, dislocation, eye or face injury, heat related illness, any other injury or illness resulting in poor vital signs such as decreased blood pressure, weak pulse, or signs of shock).
	1. Follow the Emergency Action Principles (first aid principles) and provide appropriate care.
	2. Activate EMS at 911. Provide EMS with the following information:
		* 1. Identify yourself and your role in the emergency
			2. Specify your location and telephone number (if calling by phone)
			3. Give name(s) of injured/ill athlete(s)
			4. Give condition of injured/ill athlete(s)
			5. Give time of accident
			6. Give care being provided
			7. Give specific directions to the scene of the emergency
			8. Do not hang up until directed to do so by the EMS dispatcher
	3. Monitor vital signs.
	4. Calm and reassure the athlete.
	5. If there is more than one WHS coach at the contest, designate a coach to ride with student to emergency room if a parent/guardian is not in attendance at the contest.
	6. Notify an ATC as soon as possible.
	7. Complete an Injury/Illness Report or Accident Report (if ATC not present).
	8. Provide follow-up care as necessary.
2. NON-EMERGENCIES (sprains, strains, concussion [with no loss of consciousness], illness, abrasions, minor cuts, contusions, etc…).
	1. Provide appropriate first aid care.
	2. Notify the ATC.
	3. Send the athlete to the appropriate medical care facility (if unable to contact an ATC and/or unsure of the severity of the injury).
	4. Complete an Injury/Illness Report and Accident Report (if ATC not present).
	5. Provide follow-up care as necessary.
3. In the event an athlete is ill or injured and is transported to a hospital/emergency facility while participating in a school sponsored event off campus, the following guidelines should be followed:
	1. Notify parent(s)/guardian(s) and refer them to the hospital/emergency facility as appropriate.
	2. It is the responsibility of the hospital/emergency facility to notify the athlete’s parent(s)/guardian(s) with the latest and most accurate information concerning his/her condition.
	3. Notify the Athletic Trainer.
4. NOTE: When a team practices or hosts contests at Home sites which are located off-campus, the same guidelines as outlined above should be followed. It is imperative that the ATC, or in the absence of the ATC, the head coach locate the nearest accessible telephone on-site prior to beginning the practice or contest. In the event of a medical emergency, dial 911 (or appropriate emergency telephone number) to summon EMS personnel and follow Medical Emergency guidelines listed below. If injury appears to be non-emergent, make arrangements to have the athlete transported back to the Athletic Training Room for further assessment and treatment as soon as possible, but provide necessary first aid immediately on-site.

B. For contests and practices occurring Away

1. MEDICAL EMERGENCIES
	1. Follow the Emergency Action Principles (first aid principles) and provide appropriate care.
	2. Ask for the host ATC and follow the host institution’s emergency action plan.
	3. If athlete must be transported to an emergency facility, find out what facility they will be going to and how to get there.
	4. Find someone to travel via EMS transport to the emergency facility with the athlete (assistant coach or parent). Staying with the rest of the team is the priority.
	5. Complete an Injury/Illness Report as necessary.
2. NON-EMERGENCIES
	1. Provide appropriate first aid care.
	2. Return to WHS and follow-non emergency management protocols established for home events.
	3. Notify an ATC.
	4. Complete Injury/Illness Report.

C. Miscellaneous

1. In the event of hospitalization or surgery, hospital personnel or the ATC would notify the athlete(s) parent(s) or guardian(s) as necessary and appropriate. Medical confidentiality will and must be maintained in all cases.

2. Athletes who have been referred to a health care provider will not be allowed to return to participation until the attending health care provider has given appropriate clearance.

\*The above emergency plan and protocol was adapted from the University of Southern Maine Athletic Training Program.