



PO BOX 114, Dillsburg, PA, 17019

EMERGENCY ACTION PLAN BEFORE PRACTICE BE PROACTIVE

- Equipment
- Field Conditions
- Roster
- Weather Conditions
- First Aid Kit for Supplies
- Athletes *(if applicable)* that they have their inhaler or EpiPen
- Emergency Action Plan (EAP) for updates****

**WHEN A CATASTROPHIC INJURY
HAPPENS WOULD YOU KNOW WHAT
TO DO?**





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EMERGENCY ACTION PLAN

What exactly is an Emergency Action Plan (EAP)?

It's a systematic process ideally completed prior to the start of a sport season that maps out how to manage crisis situations and identifies chain of command during each situation. It establishes policy and procedures that fits the needs of a specific organization. It normally covers but not limited:

- Sudden Cardiac Arrest
- Exertional Heat Stroke
- Brain and Neck Injuries
- Inclement Weather (i.e. lightening and heat index)

Consensus statement recently published in the Journal of Athletic Training titled "*The Inter-Association Task Force Document on Emergency Health and Safety: Best Practice Recommendations for Youth Sports Leagues*". This document is a great place to start when developing your organizations EAP.

Who writes the EAP?

- Youth Organization Committee
- Medical Personnel (Athletic Trainer, Physician, EMS, Nurse etc.)
- A representative from the facility where fields are located
- A coach from each age level and field location.

Where does it go?

- In your First Aid Kit and Coaches' Bag
- On Youth Organization Website
- In Parent Packets
- Strategic locations throughout the site

When should it be completed or updated?

Should be completed prior to the start of sports, reviewed yearly and after each sport season

How do you implement it or even get started?

- Utilized the suggested documents your league has provided.
- Practice the management of each policy and procedure.
- Once the coaches feel comfortable they should then review with the athletes as well as the parents.

Why is an EAP important?

When and if a catastrophic injury does happen everyone will know how to react and the focus will be placed on the appropriate steps to save the athletes life. It takes the guessing out of who, what, when, where, and how.



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EMERGENCY ACTION PLAN

**Completed before season and check with club safety officer*

Team Name:

Head Coach:	Phone:
Assistant Coach:	Phone
Team Manager:	Phone:
Director of Player Development:	Phone: 717 891 5241
Emergency Medical Services Phone Number:	

Emergency Task Assignment	Person Completed the Task
Immediate care of the injured or ill athlete	
Emergency equipment retrieval (AED, Splint bag etc)	
Call EMS	
Unlock and open doors/gates for EMS	
Flag down EMS and direct to scene	
Contact Injured Athletes Emergency Contact	
Follow up with Club Director post emergency	

****Assignments should be for persons always at practices or games****

****Keys for any locked areas should also be noted on EAP****



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EMERGENCY ACTION PLAN

Chain of Command:

- Head Coach
- Assistant Coach
- Once EMS arrives they will take over the scene

Scene control:

Limit scene to first aid responders and move bystanders away from area.

Identify Emergency:

- Cardiac
- Orthopedic
- Head + Neck
- Medical (Asthma; Diabetic; Allergic Reaction)

When You Call EMS:

1. Provide your name and Position
2. Current address
3. Telephone number
4. Number of individuals injured
5. Condition of injured
6. Any first aid treatment
7. Specific directions to current field
8. Any other information requested

Do not hang up until EMS hangs up

When Speaking with Emergency Contact

1. Ensure them the athlete is being taken care of
2. Explain to them what happen
3. Explain the steps taken
4. Instruct the location the injured athlete is being taken
5. Identify the adult with the injured athlete and their contact number



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FACILITY ADDRESSES

Name	Address	Landmarks	Cross Streets
Century Lane / Upper Franklin	124 Century Lane, Dillsburg, PA, 17019 / 168 Century Lane		
Ponderosa Park	Ponderosa park, Water Street Dillsburg PA, 17019		
Harmony Church	1 Clear Spring Rd, Dillsburg, PA 17019		
Chestnut Park	Chestnut grove road / Ridge road, Dillsburg, PA, 17019		
Logan Park	172 Logan Road, Dillsburg, PA, 17019		

Urgent Care

Name	Address	Landmarks	Cross Streets
Geisinger Holy Spirit Dillsburg Center	126 E Church St, Dillsburg, PA 17019	M & T Bank	
OSS Health Mechanicsburg Orthopedic Urgent Care and clinic	856 Century Dr, Mechanicsburg, PA 17055		

Hospital

Name	Address	Landmarks	Cross Streets
UPMC Pinnacle Harrisburg	111 S Front St, Harrisburg, PA 17101		
Geisinger Holy Spirit	503 N 21st St, Camp Hill, PA 17011		

****Attach Map/Directions****





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SPORTS CLEARANCE NOTE

Athlete Name: _____

Date: _____

I have examined the above named athlete who was injured while participating in the following

sport or activity:

_____.

Diagnosis: _____

Please Check:

___ Athlete may return to activity on: _____ (Date)

___ Athlete is not cleared to return to activity

___ Athlete is cleared for limited activities which include:

Medical Provider's Signature

Medical Provider Printed Name

**Please return completed note to your coach*





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FIRST AID ESSENTIALS

In sports, injuries are inevitable. Having a basic first aid kit available can really come in handy for quick and effective relief of minor bumps and bangs.

MUST HAVES:

- Band-aids
- White sports tape
- Pre-wrap
- Gauze
- Zip-loc bags (for ice)
- Non-latex gloves
- ACE wraps
- Scissors
- Hand sanitizer
- **Juice box if any diabetics**

OTHER USEFUL ITEMS:

- Insect Sting relief
- Triple antibiotic
- Eye wash
- Tweezers
- Antiseptic wash
- Multiple size bandaids (strips, knuckle, patch, 4-corner, blister)
- Mole skin
- Electrolyte tablets
- Sun screen
- Tums
- Chap stick

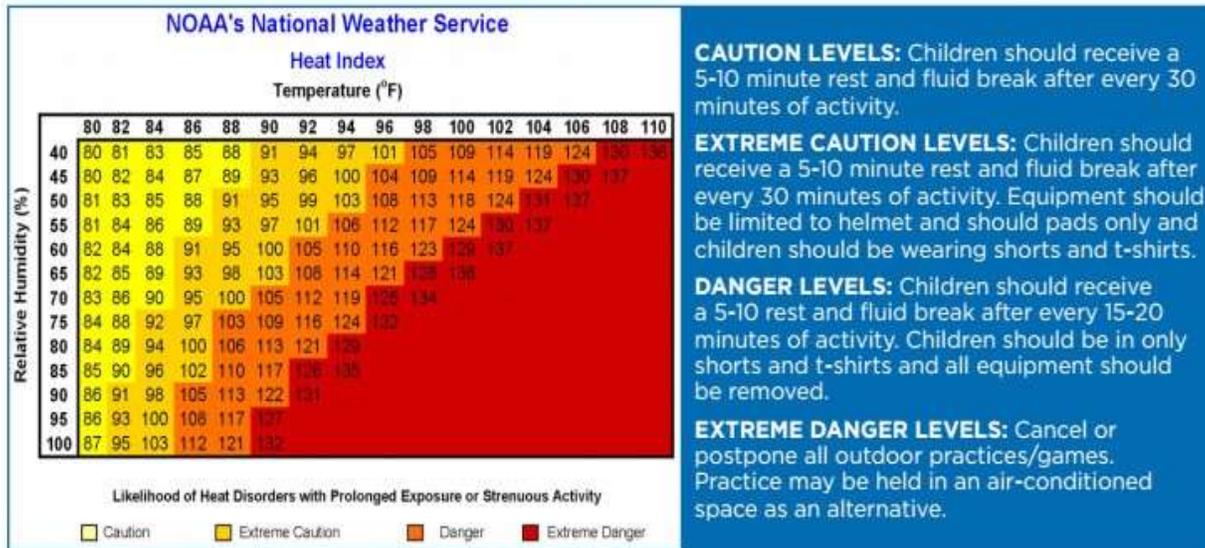
WHERE TO FIND THESE PRODUCTS:

- Any local sporting good store
- Any general store (CVS, Shop Rite, Walmart, Target etc)



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HEAT



Condition	Symptoms	What to do
Heat Cramps	Cramping (usually in legs), flushed, moist skin	Stop activity, rest, move to cool area, drink sports drinks (sugar and salt is important) and water, gently stretch cramps
Heat Exhaustion	Cramping, pale, moist skin, nausea, vomiting, headache, dizziness, fever	Stop activity, move to cool place, use cold towels, drink cool sports drinks, if unable to drink or no improvements, take to emergency room immediately
Heat Stroke Life Threatening Emergency	Warm, dry skin, headache, nausea, vomiting, confusion, rapid head rate, seizure	Move to cool place, call 911, remove excess clothes, use ice packs in groin and armpit, IF ALERT athlete may drink sports drinks

Heat Illness Prevention:

- Acclimatize athletes in hot seasons
- Make sure athletes have plenty of water and fluids available during games and practices
- Provide enough breaks during games and practices in relation to heat
- Go to a shaded area during breaks



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LIGHTNING SAFETY

**If you see lightning, flee it.
If you hear thunder, clear it.**

In general, a significant lightning threat extends outward from the base of a thunderstorm cloud about 6 to 10 miles.

Where should you go for safety?

- Any large structured building will make a good shelter.
 - Refer to safe locations in your EAP
 - **Note that small outdoor buildings including dugouts, rain shelters, sheds, etc., are NOT SAFE.**
- If a building is not available, a vehicle with closed windows will provide good protection.
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When should activity be resumed?

Outdoor activities should be resumed 30mins after the **LAST** thunder/lightning witnessed.

Tracking thunder and lightning app:

Accuweather





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RETURN TO PLAY - CONCUSSION

Once the athlete sustains a concussion, it is important for them to be cleared by a trained physician before returning to activity.

They cannot return to sport unless:

1. You have a clearance note from a physician stating they are able to return to full activity.
2. They have completed Steps 1-3 prior to their first practice.
 - a. *An example of this process is outlined below.*
 - i. Each step of this process should be done 1 day after the last. If signs or symptoms returning, the athlete should rest until symptom free, then return to the previous stage. If the athlete is unable to move past a step, they should return to their physician.

It's important to remember an athlete MUST have a FULL contact practice prior to playing in a game.

Step	Exercise
1	<i>Light Aerobic Activity</i> <u>Goal:</u> Initial movement and increase heart rate <u>Restrictions:</u> No jogging/running; no resistance training <u>Activity:</u> Stationary bike, walking, 15-20 minutes total;
2	<i>Sport Specific Exercise</i> <u>Goal:</u> Add multidirectional movement, head movement; <u>Restrictions:</u> No sprinting, resistance training, contact exercises <u>Activity:</u> body weight exercises; jogging;
3	<i>Non-Contact Training Drills</i> <u>Goal:</u> complex training drills, coordination, cognition <u>Restrictions:</u> NO CONTACT, no heading <u>Activity:</u> Running drills, footwork drills, cardio stations and agility drills; Begin Resistance Training;
4	<i>Full Contact Practice</i> <u>Goal:</u> Restore confidence and assess functional skills by coaching staff <u>Restrictions:</u> First practice back- allow breaks as needed <u>Activity:</u> normal training activity
5	<i>Game Day/ Continue full practice</i> <u>Goal:</u> integrate athlete back into game play <u>Restrictions:</u> None <u>Activity:</u> Game Play; If 6 th day is not on game day, continue with unrestricted practice.