

## **Rock Falls High School Sports Medicine Emergency Action Plan**

Emergency situations may arise at any time during athletic events. The development and implementation of an emergency plan will help ensure that the best care will be provided in the quickest manner possible. As athletic injuries may occur at any time and during an activity, the sports medicine team must be prepared. This preparation involves formulation of an emergency plan, proper coverage of events, maintenance of appropriate emergency equipment and supplies, utilization of appropriate emergency medical personnel, and continuing education in the area of emergency medicine and planning. Proper preparation on the part of the sports medicine team should enable each emergency situation to be managed appropriately. This plan should serve as a guideline for such emergencies during athletic events at Rock Falls High School.

### **Component of the Emergency Plan**

These are the basic components of this plan:

1. Emergency personnel
2. Roles of the sports medicine team
3. Emergency communications
4. Emergency equipment
5. Venue directions with map
6. Emergency action plan checklist for non-medical emergencies

### **Emergency Personnel**

The sports medicine team is comprised of a licensed athletic trainer, athletic training students, and athletic director and in the absence of the before-mentioned personnel, the head coach who is CPR certified. It is in this order that the responsibility lies. The athletic trainer should take control of all athletic-related emergencies and delegate the appropriate duties to the appropriate personnel. If the athletic trainer is not present, the head coach will take control of all athletic-related emergencies and delegate the appropriate duties to the appropriate personnel. A Athletic Trainer (AT) will be readily available during games and practices of high-risk interscholastic sports. When an AT is not present, or when awaiting his or her arrival, the coaching staff is responsible for delivering first aid. Under these circumstances, there should be a reliable form of communication (cell phone or radio) between the coach and first responder personnel. When forming the emergency team, it is important to adapt the team to each situation. Assigning multiple persons to each role is necessary in the event the one person is unable to complete his/her task a backup is available to take over.

### **Roles of the Sports Medicine Team**

1. Establish scene safety and immediate care of the athlete.
2. Activation of the Emergency Medical System
  - a. If 911 is required, the athletic trainer is to designate another member of the sports medicine team to call 911. Usually this is performed by the athletic director or one of the coaches present.

## **Roles of the First Responders/AT**

First Responders/AT should be well versed on the EAP (Emergency Action Plan) and their roles beforehand. The following outline serves to detail the behaviors required of those involved with the execution of the EAP.

### **1. Activate the emergency medical system (EMS)**

- a. To dial from a campus phone DIAL 911
- b. To dial from a cell phone, DIAL 911
- c. Convey all relevant information such as:
  - i. Name, address and phone number of the caller
  - ii. Nature of the emergency
  - iii. Number of athletes injured
  - iv. Condition of the athlete(s)
  - v. First aid treatment initiated by the sports medicine team
  - vi. Specific directions to the location of the emergency
  - vii. Other information requested by the dispatcher
  - viii. Name of the victim
  - ix. Victim's location
  - x. Description of the type of injury
  - xi. Description of the care being provided

### **2. Provide immediate care to the injured or ill individual(s).**

- a. The most qualified person on the scene should initiate the emergency care. Those individuals with lesser qualifications should yield to those with higher qualifications as they arrive.
- b. The following should be monitored:
  - i. Air, Breathing, and Circulation
  - ii. Pupils
  - iii. Skin Color
  - iv. Temperature
  - v. Level of consciousness
  - vi. Movement
  - vii. Abnormal neurological responses (i.e. numbness, tingling)

### **3. Directions to EMS to scene**

- a. One member of the sports medicine team will be at the gate in order to make sure it is open and be present to guide EMS to the appropriate field. This is usually the athletic director.

### **4. Depending on the circumstances of the situation an individual may need to be assigned to crowd control.** Persons who are in or can assume a position of authority are recommended for this role (ie: administrator that is on duty).

## **EAP Review**

In order to ensure appropriate and direct behaviors in an emergency situation, the EAP should be reviewed with everyone who may be called upon. This should be done each time a new member joins the group and at least once each sports year. Coaches and

other personnel can demonstrate preparedness by holding current credentials in CPR and First Aid. All district coaches will complete a CPR/AED course every two years.

## **1. First Aid Equipment and Supplies**

AT, coaches and the facility must be well versed in the use of emergency equipment available at each venue. Examples include latex gloves, disinfectant, gauze, bandages, splints, braces, and crutches. Personnel should demonstrate preparedness by ensuring that first aid kits are stocked at all times. Medical kits are available for teams that are traveling. Each team has a designated kit in the athletic training office. Returning the kit after every event will ensure the kit is properly stocked by the athletic training staff.

Many emergency situations involve bleeding or spilling of body fluids. These substances can carry contagious diseases so it is of primary importance that “First Aid Responders” protect themselves while rendering first aid. As it is the hands that are most likely to come into contact with blood and body fluids, it is imperative to wear a pair of latex gloves. Another example is the use of a protective guard mask for rescue breathing. Avoid splashing of fluids in order to protect other areas such as the eyes and nose.

The skills and techniques involved in protecting oneself from contagious diseases (OSHA Standards) should be reviewed during First Aid and CPR training.

## **2. Emergency Equipment Retrieval**

The athletic trainer is to designate a member of the sports medicine team to retrieve appropriate medical equipment needed. In most cases this will be an ATS. There should be emergency first aid supplies on the sidelines of all varsity competitions.

### **Emergency Communication**

Communication is the key to quick emergency response. Athletic trainers and emergency medical personnel must work together to provide the best emergency response capability. Communication prior to the event is a good way to establish boundaries and to build rapport between groups of professionals. If emergency medical transportation is not available on site during a particular sporting event, then direct communication with the emergency medical system at the time of the injury or illness is necessary. In addition, direct communication with the student-athlete’s parent/guardian is necessary unless they are not reachable and the injury requires emergency treatment. Proper paperwork signed by the parent/guardian must be available to ensure that emergency treatment can be expedited.

Access to a working telephone or other telecommunications device, whether fixed or mobile, should be assured. At Genoa-Kingston High School, the sport medicine team utilizes cellular phones as the primary means of communication.

### **Emergency Equipment**

All necessary emergency equipment should be at the site and quickly accessible. Personnel should be familiar with the function and operation of each type of emergency

equipment. Equipment should be in good operating condition, and personnel must be trained in advance to use it properly. Emergency equipment should be checked on a regular basis and used rehearsed by emergency personnel. The emergency equipment available should be appropriate for the level of training for the emergency medical providers. It is recommended that a few of the members of the emergency team be trained and responsible for the care of the equipment. This is usually the athletic trainer. It should be readily available when the emergency situations arise. Rock Falls High School has an AED located in the southwest corners of the main and small gyms. One is mounted on the wall in the fitness center. Other AED units are located in the AD's office.

### **Medical Emergency Transportation**

Emphasis is placed at having an ambulance on site at high risk sporting events. EMS response time is additionally factored in when determining on site ambulance coverage. An ambulance will only be present at home varsity football games. In an emergency situation, the athlete should be transported by ambulance, where the necessary staff and equipment is available to deliver appropriate care. If the parent is not available to accompany the injured athlete, a school official should follow the ambulance to the hospital. Emergency care providers should refrain from transporting unstable athletes in inappropriate vehicles. Whenever possible, contact the parent/guardian prior to ambulance transportation. If the parent/guardian is present and the situation is deemed a non-emergency, then it is appropriate for the parents to transport the athlete to the nearest medical facility after the sports medicine team has appropriately stabilized the injury. Any emergency situation where there is impairment in level of consciousness, airway, breathing or circulation or there is neurovascular compromise should be considered a "load and go" situation by calling 911 and emphasis placed on rapid evaluation, treatment and transportation. Continue to attempt to contact parent/guardian.

### **Non-Medical Emergencies**

In the event of severe weather, the athletic director and school administration will direct spectators to the appropriate locations. All athletes are to leave the fields and go to the designated locker rooms immediately at outdoor home events. At away events, the athletes will be directed to appropriate structures by the host team or to the team bus if no appropriate structure is available.

### **Conclusion**

The importance of being properly prepared when athletic emergencies arise cannot be stressed enough. An athlete's survival may hinge on how well trained and prepared athletic health care providers are. It is prudent to invest athletic department "ownership" in the emergency plan by involving the athletic administration and sports coaches as well as the sports medicine personnel. The emergency plan should be reviewed at least once a year with all athletic personnel, along with CPR and first aid refresher training every two years. Through development and implementation of the emergency plan, the athletic emergency action team helps ensure that athletes will have the best care provided when an emergency situation does arise.

## **Emergency/Medical Personnel Contact List**

The following list of contact information is to be used to facilitate the care of the victim.

### **EMS**

Dial 911 from a cell phone

### **Urgent Care**

CGH Medical Center  
100 E LeFever Rd  
Sterling IL 61081  
2.3 Miles

### **Follow-up Care**

Physician of choice

### **Rock Falls High School Administration**

Athletic Director – Rich Montgomery  
Cell - 815-535-8199  
Principal – Mike Berentes  
Cell - 815-564-7993  
Assistant Principal – Vicki Dunphy  
Cell - 815-973-1709

### **Athletic Training Services**

Geoff Wright  
Cell – 815-590-8887

## **Rock Falls High School Sports Medicine Emergency Action Plan Outdoor Fields – Home Games and Practices**

### **Emergency Personnel**

- Athletic Trainer Geoff Wright
  - o Cell# 815-590-8887
- Athletic Director (Rich Montgomery)
  - o Cell# 815-535-8199
- Head Coach or the team involved in competition
- Athletic Training Students

### **Emergency Communications**

- Cell phones carried by each at above numbers; land-line phones in AD, Athletic Training & coaches offices

### **Emergency Equipment**

- Supplies maintained on sidelines during competition; otherwise supplies are located in the athletic training room.
- AED is located inside the gyms, fitness center and AD office or with AT on the sidelines.
- Additional emergency equipment (splint kit) accessible on sidelines or in the athletic training room.

### **Roles of the Sports Medicine Team**

- Immediate care of the injured or ill student-athlete – Athletic Trainer
- Activation of emergency medical system (EMS) – Athletic Trainer or Coach
  - o 911 call – provide name, address, phone number, number of individuals injured, condition of injured, first aid treatment, specific directions to location of injured athlete, and other information as requested by EMS operator.
- Emergency equipment retrieval – Athletic Training Students or Assistant Coach
- Direction of EMS to scene- Athletic Director or Administrator
  - o Open appropriate gates
  - o Designate individual to meet EMS and direct to scene
  - o Scene control – limit to first aid providers and move bystanders away from the area- Administrator or assistant coach
- Communication with the student-athlete’s parent/guardian – Athletic Trainer or Athletic Director/Administrator
- Traveling with an injured athlete to the hospital – Parent of injured athlete if available. If the parent is not available, the athletic director/administrator or designated coach should travel with the injured athlete.

### **Venue Directions – Outside**

*Football/Track facilities, Softball and baseball fields and Fitness Center* are located west of Rock Falls High School. Access to the football/track facility is located through the south entrance to the field. 508 15<sup>th</sup> Ave Rock Falls, 61071

*Golf* meets take place at Rock River Golf & Pool, located at 3901 Dixon Ave, Rock Falls, IL. 61071

*Cross Country* meets are held at Centennial Park , 510 E 11<sup>th</sup> Rock Falls IL 61071

### **Venue Directions to Hospital**

*From Rock Falls High School-*

Depart 12th Ave toward Avenue G Brg

Road name changes to Avenue G Brg

Road name changes to Avenue G

Turn right onto W 3rd St

Turn left onto Avenue D

Turn right onto W 9th St

Turn left onto IL-40 / Locust St  
Turn right onto E Lefevre Rd  
Arrive at E Lefevre Rd  
100 E Lefevre Rd, Sterling, IL 61081

*From Rock River Golf & Pool-*  
Depart Dixon Ave / CR-3 toward Melvin Rd / CR-31  
Turn right onto Melvin Rd / CR-31  
Turn right onto US-30 / E Rock Falls Rd  
Turn right onto IL-40 / 1st Ave  
Turn right onto IL-40 / Locust St  
Turn right onto E Lefevre Rd  
Arrive at E Lefevre Rd  
100 E Lefevre Rd, Sterling, IL 61081

*From Centennial Park-*  
Depart E 11th St toward Avenue C  
Turn right onto IL-40 / 1st Ave  
Turn right onto IL-40 / Locust St  
Turn right onto E Lefevre Rd  
Arrive at E Lefevre Rd  
100 E Lefevre Rd, Sterling, IL 61081

*From Rock Falls Football Stadium*  
Depart 15th Ave toward W 5th St  
Turn right onto W 5th St  
Turn left onto 14th Ave  
Road name changes to W 2nd St  
Turn left onto IL-40 / 1st Ave  
Turn right onto IL-40 / Locust St  
Turn right onto E Lefevre Rd  
Arrive at E Lefevre Rd  
100 E Lefevre Rd, Sterling, IL 61081

## **Rock Falls High School Sport Medicine Emergency Action Plan Indoor Facilities – Home games and Practice**

### **Emergency Personnel**

- o Athletic Trainer Geoff Wright
- o Cell# 815-590-8887
- Athletic Director (Rich Montgomery)  
Cell# 815-535-8199
- Head Coach or the team involved in competition
- Athletic Training Students

### **Emergency Communications**

- Cell phones carried by each at above numbers; land-line phones in AD & coaches offices

### **Emergency Equipment**

- Supplies maintained on sidelines during competition; otherwise supplies are located in the athletic training room.
- AED is located outside AT office.
- Additional emergency equipment (splint kit) accessible on sidelines or in the athletic training room.

### **Roles of the Sports Medicine Team**

- Immediate care of the injured or ill student-athlete – Athletic Trainer
- Activation of emergency medical system (EMS) – Athletic Trainer or Coach
  - o 911 call – provide name, address, phone number, number of individuals injured, condition of injured, first aid treatment, specific directions to location of injured athlete, and other information as requested by EMS operator.
- Emergency equipment retrieval – Athletic Training Students or Assistant Coach
- Direction of EMS to scene- Athletic Director or Administrator
  - o Open appropriate doors
  - o Designate individual to meet EMS and direct to scene
  - o Scene control – limit to first aid providers and move bystanders away from the area- Administrator or assistant coach
- Communication with the student-athlete's parent/guardian – Athletic Trainer or Athletic Director/Administrator
- Traveling with an injured athlete to the hospital – Parent of injured athlete if available. If the parent is not available, the athletic director/administrator or designated coach should travel with the injured athlete.

### **Inside Venues –**

*Basketball/Volleyball-* There are several different access points to the gymnasium. The most direct route is entering Rock Falls High School through the main gym entrance of Rocket Drive access can also be made through the east entrance and the west entrance.

*Wrestling room* access is located on the south side of the building, across from the street off of Ave G. Go through the double doors and the entrance to the wrestling room in on the right.

## **Rock Falls High School Sports Medicine Emergency Action Plan Away Games**

### **Emergency Personnel**

Athletic Trainer Geoff Wright

Cell# 815-590-8887 Athletic Director (Rich Montgomery)

Cell# 815-535-8199

- Head Coach or the team involved in competition
- Athletic Training Students

### **Emergency Communications**

- Cell phones carried by each at above numbers.

### **Emergency Equipment**

- Supplies maintained on sidelines during competition
- Additional emergency equipment (splint kit) accessible on sidelines

### **Roles of the Sports Medicine Team**

- Immediate care of the injured or ill student-athlete – Athletic Trainer
- Activation of emergency medical system (EMS) – Athletic Trainer or Coach
  - o 911 call – provide name, address, phone number, number of individuals injured, condition of injured, first aid treatment, specific directions to location of injured athlete, and other information as requested by EMS operator.
- Emergency equipment retrieval – Athletic Training Students or Assistant Coach
- Direction of EMS to scene- Athletic Director or Administrator
  - o Open appropriate gates
  - o Designate individual to meet EMS and direct to scene
  - o Scene control – limit to first aid providers and move bystanders away from the area- Administrator or assistant coach
- Communication with the student-athlete's parent/guardian – Athletic Trainer or Athletic Director/Administrator
- Traveling with an injured athlete to the hospital – Parent of injured athlete if available. If the parent is not available, the athletic director/administrator or designated coach should travel with the injured athlete.

## **Rock Falls High School Lightning-Safety Emergency Action Plan**

On the average, lightning kills 100 people in the USA each year. Lightning can strike from 10 miles away. The 30 second “flash to bang” method of predicting the danger of a storm mean the lightning is 6 miles away. This distance is well within the 10 mile strike zone. In order to ensure the safety and well-being of the student-athletes, coaches and spectators at practices and athletic events, it is necessary to establish a comprehensive action plan for lightning and other weather related emergencies. The following plan has

been adapted from the **NATA Position Statement: Lightning Safety for Athletics and Recreation**. This plan includes the chain of command, designated weather watcher, means of monitoring local weather, specific safe locations for each site, criteria for suspension and resumption of activity and use of recommended lightning-safety strategies.

**Chain of Command:**

1. If present, the Principal, Assistant Principal or the Athletic Director is the ultimate authority and has the duty of suspension of the practices or game if the weather conditions become unsafe.
2. If none of the above is present, the athletic trainer has the authority and duty of suspension of the practice or game if the weather conditions become unsafe.
3. If none of the above is present, the head coach of the team (or his/her designee) has the authority and duty of suspension of the practice or game if the weather conditions become unsafe.
4. If the game is already underway and the officials of the game are responsible for suspension of the game, it is the responsibility of the school officials listed above to inform the officials of the weather conditions and request suspension of the game. If the school officials feel that the weather conditions are unsafe, the field should be evacuated to a safe location immediately.

**Designated Weather Watcher:**

1. The designated weather watcher is the athletic director if present at the practice or games.
2. If the athletic director is not available, the athletic trainer shall be the designated weather watcher.
3. If none of the above is present, the head coach or his designated assistant coach shall be the weather watcher. It is the ultimate responsibility of the head coach to be aware of unsafe weather conditions

**Weather Apps:**

1. Rock Falls High School does NOT have a Thor-guard Lightning detection system on site. Coaches should use the SPARK application on their phone to detect lightning. SPARK is a free app which comes with WEATHERBUG. SPARK is the app recommended by the IHSA Officials Association.

**Means of Monitoring the Weather:**

1. Before practices and games, athletic trainer, coaches, and athletic director should monitor the weather by weather reports and forecasts on television and on the internet.
2. The athletic director, athletic trainer, coaches, spectators, and student-athletes should be diligent in watching for signs for inclement weather especially if there is a forecast for such weather. If anyone sees signs of possible

inclement weather, such sightings must be reported to the chain of command for decisions about suspension of outdoor activity.

3. All individuals (coaches, student-athletes, or spectators) should have the right to leave an athletic site or activity, without fear of repercussion or penalty, in order to seek a safe structure or location if they feel they are in danger from impending lightning activity.

### **Specific Safe Sites for Each Location:**

1. The primary choice for a safe location from the lightning hazard is in any substantial structure that is frequently inhabited. These buildings should have electrical wiring, telephone wiring and plumbing pathways because these fixtures aid in grounding the building. Breezeways, overhangs of concession stands, dugouts, backstops and covered entrances are not safe structures. It is important that everyone is away from doorways and windows and not in contact with plumbing or wire during thunderstorms.
2. The secondary choice for a safe location from the lightning hazard is an enclosed vehicle. Cars or buses with metal roofs and windows closed afford protection from thunderstorms. Golf carts and convertibles do not provide protection from lightning. Individuals must not be in contact with the metal framework of the vehicle.
3. During home events and practices at Rock Falls High School, the following areas should be considered primary evacuation sites:
  - a) The **football/track game fields** – student-athletes and coaches should be evacuated to the locker rooms and/or hallway in the main building. This location would also be the evacuation site for the visiting teams.
  - b) The **softball and baseball fields** – student-athletes and coaches should evacuate to the locker rooms and/or hallways in the main building.
  - c) The **golf team** – student-athletes should evacuate to the clubhouse, lightning shelters on the course or to the school bus or cars.
  - d) The **cross country team** – student-athletes and coaches should evacuate to the closest safety structure listed above.
  - e) Coaches should have appropriate access to these safety sites.
  - f) Spectators should be directed to their vehicles or should be evacuated to the gymnasium or hallways in the main building under the supervision of the administrator in charge of the event.
4. During away events, student-athletes and coaches should evacuate to the closest safe structure as directed by the host team. If no safe structure is available, the student-athletes and coaches shall evacuate to the team bus.

### **Criteria for Suspension and Resumption of Activity:**

1. Teams should seek a safe structure or location at the first sign of lightning or thunder activity. Postponement or suspension of an activity or contest (regardless of whether lightning is seen or thunder is heard) should occur if signs of imminent thunderstorm activity are observed. These signs include darkening clouds, high winds, and thunder or lightning activity.

2. Once activities are suspended, the activity can not resume until 30 minutes after the last sound of thunder or lightning flash (IHSA Severe Weather Safety Guidelines).
3. A message over the public address system to the spectators and evacuation to safer locations such as cars and/or gymnasium should be made. Also, lightning-safety tips should be included in game programs alerting the spectators about what to do and where to go for a safer location during thunderstorm activity.

### **Use of Recommended Lightning Safety Strategies:**

Coaches and athletic trainers should educate the student-athletes and spectators of the lightning safety policy and strategies. The dangers of lightning should be explained and the plan of action should be understood by all coaches and student-athletes. Each student-athlete must know the nearest evacuation point and the importance of checking in with the appropriate coach. Additional safety measures that coaches and student-athletes must understand are:

1. Avoid being in contact with or near the highest point of an open field or on the open water. Do not take shelter under or near trees, flagpoles or light poles. Do take shelter in a structure that has electricity, plumbing and/or phone lines because this structure will be a grounded structure.
2. Avoid taking showers or using plumbing facilities and land-line telephones during a thunderstorm. Cordless or cell phones are safer to use when emergency help is needed.
3. Individuals who feel their hair stand on end or skin tingle or hear crackling noises should assume the lightning-safety position (i.e., crouched on the ground, weight on the balls of the feet, feet together, head lowered and ears covered). Do not lie flat on the ground.
4. If someone is struck by lightning, follow normal first aid procedures. However, survey the conditions because an ongoing thunderstorm can pose a threat to the emergency personnel. If possible, evacuate the injured person to a safe location as soon as possible.
5. All personnel should be CPR and first aid trained.
6. All individuals should have the right to leave an athletic site or activity, without fear of repercussion or penalty, in order to seek a safe structure or location if they feel they are in danger from impending lightning activity.

### **Heat Stress Prevention Recommendations By the American College of Sports Medicine**

1. Practices should be modified for the safety of the athletes in relation to the environmental heat stress on the practice field.
  - avoid midday practices
  - in high heat and humidity conditions, practices should be cancelled, moved into air conditioned setting or walk-through only sessions with no protective gear and regular breaks for fluid and rest

- adjust the work to rest ratio with increased time for breaks and less time in physical activity
  - many activities can be modified to perform in shorts and t-shirts only
2. Players should wear as little covering as appropriate and helmets should be removed whenever possible (during instruction or on sidelines).
  3. Players should wear light-colored clothing during practices.
  4. Regular breaks should be included in each practice session schedule.
    - rest, cooling and fluid replacement breaks at least every 30-45 minutes
    - more frequent as heat and humidity rises
  5. Fluid replacement should be readily available
    - chilled fluids with adequate time for ingestion
    - encourage sufficient fluid intake on the field
    - have fluid available on the field or ingestion between breaks
  6. During breaks, player should be in shade to reduce radiant heat.
  7. Practice parameters should be individualized for at risk athletes
    - heavy and very light athletes must be monitored for heat stress
    - athletes with acute gastrointestinal illness should not be allowed to participate
  8. Players should not use stimulants before practice such as high doses of caffeine or any other “energy” drink with high sugar content.
    - any athlete on protein supplements or any of the above must hydrate even more than other athletes.
  10. Any changes in player performance, personality or health should be sufficient reason to immediately stop practice for the affected players.
    - paleness, red flushing, dizziness, headache, excessive fatigue, fainting, vomiting, or complaints of feeling excessively hot or cold are warning signs.
  11. Players suspected of heat stroke should be stripped of equipment, cooled in tub or cold water or ice packs in armpits, groin and neck areas until emergency medical personnel arrive and evacuate athlete to nearest emergency medical facility.
  12. Weather conditions should be monitored on the field every 15 to 20 minutes during hot practices.
  13. Players with severe muscle pain or weakness after practice should monitor urine color.