



## **Riverside High School EMERGENCY ACTION PLAN FOR ATHLETICS**

### **Introduction:**

A high quality education is one of the most important things that we can provide a child. Exposure to a variety of topics, people, and adventures all contribute to a fulfilling school experience. In pursuit of this goal, Riverside High School (RHS) provides our students with a variety of athletic teams. We also realize that in athletics, emergency situations will occur. Expedient action must be taken to assure that RHS is providing our athletes the best possible care. The development of an emergency action plan will help to ensure that we are providing the best care we can.

RHS owes a duty to our athletes to have a staff that is prepared. We as a school also have a duty to provide a plan of action that may be implemented immediately when an emergency situation occurs. Athletic injuries may occur at any time and the staff must be prepared. This preparation involves the formulation and implementation of an emergency action plan. This includes maintenance of emergency equipment and supplies, utilization of local emergency personnel, EMT's, the school nurse, local doctors and others that may have medical and emergency training. Through training, physical screenings, safe practice techniques, and other safety measures some emergencies can be averted. However, we realize that accidents and injuries do occur as a result of athletic participation. With that said, we also believe that proper preparation on the part of the athletic staff, and administration that each emergency situation can be properly managed.

### **Components of the emergency plan**

These are the basic components of every emergency action plan for athletics

1. Emergency personnel
2. Emergency communication
3. Emergency Equipment
4. Roles of first responders, coaches and administrators
5. Venue photographs

### **Emergency Plan Personnel**

The type and degree of care depends on several factors such as, but not limited to the sport, the setting, and the type of training or competition. The first person on the scene in some instances may vary to include coaches, parents, administrators, security or bystanders. CPR training, first aid, prevention of disease transmission and emergency plan review is recommended for all athletics personnel.



The first part of an emergency action plan is the formation of an emergency team. The emergency team may consist of various health care providers including physicians, emergency medical technicians, athletic first responders, school nurses, coaches, parents and possibly bystanders. Roles of these individuals will vary depending on athletic venue and level of training. There are four basic roles of the team. The first role is to make sure that the scene is safe. Care in an emergency should be provided by the most qualified individual on the scene. The second role is to activate EMS if needed. This person should be able to remain calm in an emergency situation and provided details about the emergency. The third role is securing the necessary and available equipment. This person should have a good idea of the location of all medical equipment available to the team. The fourth role is the direction of EMS to the scene. Someone should be assigned to meet the EMS personnel at the venue. This person should have access to key to all gates and doors that may need to be opened so as not to hamper the arrival of medical personnel on the scene.

#### Roles within the Emergency Team

1. Establish scene safety and immediate care of the athlete
2. Activation of the Emergency Medical System
3. Emergency Equipment retrieval
4. Direction of EMS to the scene

#### Activating EMS

- Dial 911
- Name, address, telephone number of caller
- Nature of emergency, whether medical or non-medical
- Number of athletes
- Condition of athlete
- First aid treatment initiated
- Specific directions to the location
- Other information as requested by the dispatcher

#### Emergency Communication

Communication is the key to any successful emergency plan. Athletic personnel and emergency medical personnel must work together to provide the best care possible for the student athlete. Communication prior to an event is a good way to establish the roles of and build rapport between professionals. If emergency medical services are not available at the site of the practice or game then direct communication with the emergency medical system at the time of the injury or illness is necessary.



Access to a working phone, whether fixed or mobile is key to effective communication. The phone should be checked to make sure it is in proper working order before each practice or competition. A backup communication plan should be in effect should the primary form of communication fail. It is important for coaches and first responders to make sure they have access to a working phone, home and away.

### **Emergency Telephone Numbers**

Emergency Only	911
Williamston Fire Department	792-8151
Martin General Hospital	792-2186
Martin County Sheriff's Office	789-4500
Williamston Police Department	792-2124
North Carolina Highway Patrol	792-4101
Principal Jim Guard	799-8004
Assistant Principal: Jason Myers	902-4824
RHS Resource Officer Ashley Peed	661-3417
Athletic Director Kirby Maness	910-690-1881
Medical 1st Responder Del Locke	661-2305
Martin County Bus Garage	792-5067
Martin County Maintenance Dept.	792-6637
Gary Speller	217-3056

In case of emergency give the following information

1. Name
2. Location
3. Type of injury
4. How will you meet the rescue squad



## Lightning Policy

1. Lightning is the most frequent weather emergency that occurs in Eastern North Carolina. Advanced planning is essential for the safety of athletes and spectators alike.
2. It is the duty of individual coaches and the first responder to be aware of existing and potential weather that may produce lightning.
3. The coaching staff and first responder need to be aware of the closest safe shelter during games, and practices.
4. The most effective means of preventing lightning injury is to reduce the risk of casualties by remaining indoors during lightning activity. When thunder is heard or lightning is seen, people should vacate to a previously identified safe location.
5. People should remain entirely inside a safe building or vehicle until at least 30 minutes have passed since the last lightning strike or sound of thunder.

### RHS Teams

<b>Football</b>	<b>Gym Hallway – under locker room area.</b>
<b>Baseball</b>	<b>Fieldhouse</b>
<b>Cross Country</b>	<b>Gym Hallway – By health Classroom</b>
<b>Cheerleading</b>	<b>Gym Hallway – By health Classroom</b>
<b>Tennis</b>	<b>Nearest available safe shelter</b>
<b>Soccer</b>	<b>Gym Hallway at Riverside Middle School</b>
<b>Softball</b>	<b>Gym Hallway</b>
<b>Golf</b>	<b>RCC Clubhouse</b>
<b>Track</b>	<b>Gym Hallway</b>
<b>Volleyball</b>	<b>Gym Hallway – By health Classroom</b>

### Visiting Teams

<b>Football</b>	<b>Gym Hallway – By Health Classroom.</b>
<b>Baseball</b>	<b>Fieldhouse</b>
<b>Cross Country</b>	<b>Gym Hallway</b>
<b>Cheerleading</b>	<b>Gym Hallway – By health Classroom</b>
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6. During games, the game officials shall be in charge of clearing the playing fields. The coaches and first responder will help in any way possible in the decision to continue or discontinue play.
7. Stay away from tall trees, power poles, metal objects, fences, pools of water, and open fields. If there is no safe shelter crouch in the lowest place possible, for example a ditch, with only your feet touching the ground.
8. Fans should report to their vehicles or safe shelter.

\*During football games, fans should be encouraged to report to the gym.

### Riverside High School Tornado Safety Policy

The following steps are recommended:

1. It is the role of the first responder and/or coach to be aware of weather conditions in the area and any potential threats.
  2. The first responder and/or coach should be aware of the signs of a nearby Thunderstorm/Tornado Watch/Tornado warning. It is recommended that each coach check weather radar on the internet to determine the weather conditions before practices and games. Communication should occur between the coaches, principal, athletic director, and school resource officer by cell phone that a potentially threatening storm is approaching.
  3. Tornado Watch – is issued when weather conditions are favorable for the formation of severe thunderstorms that are capable of producing tornados.
  4. Tornado Warning – is an alert issued by government weather services to an area that a tornado may be imminent. It can be issued after either a tornado or funnel cloud has already been spotted, or if there are radar indications that a tornado may be possible.
- **When a Tornado warning is issued the first responder/coach will instruct their teams to report to their designated safe location.**



### **RHS Teams**

<b>Football</b>	<b>Gym Hallway – under locker room area.</b>
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### **Visiting Teams**

<b>Football</b>	<b>Gym Hallway – By Health Classroom.</b>
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**\*All spectators should report to the RHS gym, or to their vehicles at their own risk.\***



## **CONCUSSION MILD TRUAMATIC BRAIN INJURY**

**“Concussion is an injury involving an acceleration/deceleration force imparted to the head that results in temporary alteration in mental status”** (Guskiwicz MAATA 2003)

### **Recognizing Concussion**

Concussions do not always involve a loss of consciousness. ANY traumatic blow to the head or to another part of the body (which causes a whiplash effect to the head) should be considered as a mechanism of concussion injury. While headache is the most common symptom of concussion, all people will experience concussion differently. Therefore, all of the potential signs and symptoms of concussion should be considered. A symptom checklist can assist the evaluator in making a more objective return to play decision.

**The North Carolina High School Athlete Association policy for concussion states: any student-athlete with a suspected concussion is NOT permitted to return to participation-practice or play—until the student-athlete receives written release from a duly licensed physician using the Gfeller-Waller Concussion Clearance Form.**

The NCHSAA and Martin County Schools recommend high school athletes who have sustained a concussion be disqualified from participation for a period of one week to ensure the student-athlete is not at risk of second-impact syndrome.

### **Concussion Signs and Symptoms**

Amnesia	Poor concentration	Sensitivity to light
Loss of orientation	Easily distracted	Headache
Balance problems	Personality changes	Sluggishness
Memory problems	“Glassy Eyed”	Inappropriate emotions
“Bell rung”	Excessive sleep	change in personality
Nausea	ringing in the ears	Sensitivity to noise
Dazed or Confused	Fatigue	Irritability
Nervousness	Sadness	sleep disturbance
Depression	Feeling “in a fog”	Loss of consciousness
Numbness or tingling	Seeing “stars”	Vacant stare
Double vision	Feeling “slowed down”	Vomiting
Drowsiness		

**ALL ATHLETES WHO GET “ROCKED” AND EXHIBIT ANY OF THESE SIGNS OR SYMPTOMS SHOULD BE REFERRED IMMEDIATELY TO THE MEDICAL 1ST RESPONDER AND/OR A PHYSICIAN!!!**



## Catastrophic Traumatic Brain Injury

*“Cerebral concussion is classified as mild traumatic brain injury and often affects athletes in sports. **Severe catastrophic traumatic brain injuries** such as **subdural and epidural hematomas** and **malignant cerebral edema** (ie, **second impact syndrome**), result in more fatalities from direct trauma than any other sport injury. When these injuries do occur, **brain swelling or pooling of blood** (or both) **increases intracranial pressure**; if the condition is not relieved quickly, **brainstem herniation and respiratory arrest can follow.**” NATA Position Statement: Preventing Sudden Death in Sports 2012*

### **Epidural Hematoma: MEDICAL EMERGENCY** **or Hemorrhage** **(Football)**

Arterial bleeding = leads to rapid compression of the brainstem.  
Middle Meningeal Artery (under temporal bone) is damaged  
Can be FATAL unless pressure is relieved

**Signs/Symptoms:** Blow to the head with temporary loss of consciousness  
Athlete recovers and may appear normal  
“Lucid Interval” lasts minutes to 1-2 hours  
Headache that rapidly worsens, dizziness, nausea, vomiting  
Confusion: difficulty speaking/understanding speech, memory loss  
Poor balance, numbness & or weakness in 1 arm/leg  
Lapses into lethargy or unconsciousness  
May have seizures or rapid deterioration of function  
(ie, respiratory arrest, cardiovascular arrest)

Coach: Call 911

ATC: Check ABC's: Begin Rescue Breathing/ventilations CPR/AED as necessary  
Help EMS place athlete on spineboard & elevate head end 30\*

Ast. Coach: Goes with athlete

**Mathew Gfeller = Major epidural hemorrhage: knocked out & never regained consciousness**

**Subdural Hematoma:** Involves cerebral veins (slow bleed) between the dura and arachnoid  
**Hemorrhage** Athlete may/may not suffer loss of consciousness  
May be overlooked = signs/symptoms take days to develop

**Signs/Symptoms:** Blow to the head = may/may not suffer loss of consciousness  
**Over next few days:** Headache that gradually worsens, confusion, change in behavior  
Dizziness, nausea, vomiting, weakness, apathy  
Lapses into lethargy or unconsciousness, seizures

**Acute Subdural Hematoma: Athlete is knocked out and seldom regains consciousness**  
Treatment for Acute Subdural Hematoma = same as above

### **ATC (H. Coach if no ATC):**

Evaluates student athlete using the SCAT II & Removes them from play

Contact student athlete's parents: give oral & written specific observation instructions concerning concussions (what to do if...) Give parent GWCAA Form refer athlete to a physician or ER.

ATC is to monitor student athlete's post-concussion signs/symptoms daily at school & at home.



## **Catastrophic Traumatic Brain Injury Second Impact Syndrome**

*“Rapid brain swelling and herniation occurs following minor head injury in individual who still have symptoms from a prior head injury.” (Guskiwicz MAATA 2003)*

**Signs/Symptoms:**

- Direct blow, followed by 15 sec. where the athlete appears stunned
- Athlete initially does not lose consciousness
- Within several sec. – 1 minute Athlete collapses**
- Rapidly dilating pupils & loss of eye movement
- Evidence of respiratory failure
- Loss of autoregulation of the brain’s blood supply
- Increased intracranial pressure
- Herniation of medial surface of temporal lobe
- Brainstem Failure within 2-5 Minutes**

### **Medical 1st Responder is already at the venue: Activate the venue specific EAP**

#### **Medical 1st Responder:**

- Directs **Head Coach** to **Call 911** (give information listed below) then call the **Athletic Director**
- Directs **Assistant Coach** to Go get AED out of ATC’s truck
- Directs **Assistant Coach** to remove all bystanders from the scene
- ATC **Checks the victim’s ABC’s**
  - Begin CPR when necessary, use AED as soon as it arrives
  - Continue CPR/AED until EMS arrives & takes over

### **Medical 1st Responder is not at venue, Head Coaches: Activate Venue Specific EAP**

#### **Head Coach:**

- Directs **Assistant Coach** to **CALL 911**, then Call the **Medical 1st Responder 252-661-2305**
- Directs an **Assistant Coach** to remove all bystanders from the scene
- Check the victim’s ABC’s (Airway, Breathing, Circulation)
  - Not Breathing / No Pulse =                      Begin CPR & continue until Medical 1st Responder or EMS arrive.

#### **Assistant Coaches:**

- Call 911 & Provide the following information:
  - ✓ Provide name
  - ✓ Telephone number
  - ✓ Number of injured individuals
  - ✓ Condition of injured student-athletes
  - ✓ First aid treatment
  - ✓ Location of injured student-athlete at MHS, give specific directions
  - ✓ Information requested by EMS
  - ✓ DO NOT HANG UP FIRST

Call the Medical 1st Responder (252-661-2305), Call the Athletic Director, Call Athlete’s Parents  
If Medical 1st Responder is NOT AT SCHOOL, GO GET AED from the Athletic Training Room  
in gym

**IF FOOTBALL TEAM IS AWAY THE AED IS WITH THE MEDICAL 1ST RESPONDER**

#### **Athletic Director & School Administrators or Assistant Coaches:**

Unlock and open gated entrance to athletic complex;



Designate individual to “flag down” EMS and direct to scene;

## **Catastrophic Cervical Spine Injury Head Down Contact in Football**

*“A catastrophic cervical spinal cord injury occurs with structural distortion of the cervical spinal column and is associated with actual or potential damage to the spinal cord. The spinal injury that carries the greatest risk of immediate sudden death for the athlete occurs when the damage is both severe enough and at a high enough level in the spinal column (above C5) to affect the cord’s ability to transmit respiratory or circulatory control from the brain.”*

**NATA Position Statement: Preventing Sudden Death in Sports 2012**

### **Medical 1st Responder is already at the venue: Activate the venue specific EAP**

#### **Medical 1st Responder:**

Directs **Head Coach** to **Call 911 (give information listed below)** then call the **Athletic Director**

Directs **Assistant Coach** to Go get AED out of ATC’s truck (sidelines during game)

Directs **Assistant Coach** to remove all bystanders from the scene

**ATC Checks the victim: DO NOT MOVE ATHLETE/ALLOW ATHLETE TO MOVE**

- Monitor consciousness & breathing
- Stabilize the head & neck using head/shoulder technique
- Prone (face down) / Not Breathing = log roll immediately w/ EMS & coaches  
Prone & Breathing = log roll onto spineboard w/ EMS & coaches
- Remove mouthpiece & reassure athlete as to what is happening
- Remove facemask = cut loop-straps w/ Medical 1st Responder’s angel or remove screws cordless drill  
DO NOT MOVE ATHLETE’S HEAD
- Supine Not Breathing = EMS intubate/mask & ventilate / CPR /AED
- Prone & Breathing = Cut jersey & shoulder pad strings/straps
- Use Lift & slide technique to get athlete onto spineboard (EMS/coaches)

EMS Transports athlete to EMS Helicopter on soccer field then Pitt Memorial or Kings Daughters

An Assistant coach goes with student athlete

#### **Head Coach: EMS may be already on Scene during games = Signal/Motion EMS to come over**

Call 911 & Provide the following information:

- ✓ Provide name
- ✓ Telephone number
- ✓ Number of injured individuals
- ✓ Condition of injured student-athletes
- ✓ First aid treatment
- ✓ Location of injured student-athlete at MHS, give specific directions
- ✓ Information requested by EMS
- ✓ DO NOT HANG UP FIRST

Call Athletic Director (AD attends home games), Call Athlete’s Parents

Directs an assistant coach to unlock/open gated entrance to athletic complex & “Flag Down” EMS

Assists Medical 1st Responder & directs assistant coaches to assist as well (Lift & Slide onto spineboard)

#### **Athletic Director & School Administrators or Assistant Coaches:**

Unlock and open gated entrance to athletic complex;

Designate individual to “flag down” EMS and direct to scene;

Helps remove all bystanders from the scene



## **SUDDEN CARDIAC ARREST**

### **Medical 1st Responder is at the venue: Activate the venue specific Emergency Action Plan**

#### **Medical 1st Responder:**

Directs **Head Coach** to **Call 911 (give information listed below)** then call the **Athletic Director**

Directs **Assistant Coach** to Go get AED out of ATC's truck

Directs **Assistant Coach** to remove all bystanders from the scene

**Checks the victim's ABC's**

Begin CPR when necessary, use AED as soon as it arrives

Continue CPR/AED until EMS arrives & takes over

### **Medical 1st Responder is not at venue, Head Coaches: Activate Venue Specific EAP**

#### **Head Coach:**

Directs **Assistant Coach** to CALL 911, then Call the Medical 1st Responder 252-661-2305

Directs an **Assistant Coach** to remove all bystanders from the scene

**Check the victim's ABC's** (Airway, Breathing, Circulation)

Not Breathing / No Pulse =

Begin CPR & continue until Medical 1st Responder or EMS arrive.

#### **Assistant Coaches:**

Call 911 & Provide the following information:

- ✓ Provide name
- ✓ Telephone number
- ✓ Number of injured individuals
- ✓ Condition of injured student-athletes
- ✓ First aid treatment
- ✓ Location of injured student-athlete at MHS, give specific directions
- ✓ Information requested by EMS
- ✓ DO NOT HANG UP FIRST

Call the Medical 1st Responder (252-661-2305), Call the Athletic Director, Call Athlete's Parents  
If Medical 1st Responder is NOT AT SCHOOL, GO GET AED from the Athletic Training Room  
in gym

**IF FOOTBALL TEAM IS AWAY THE AED IS WITH THE MEDICAL 1ST RESPONDER**

#### **Athletic Director & School Administrators or Assistant Coaches:**

Unlock and open gated entrance to athletic complex;

Designate individual to "flag down" EMS and direct to scene;

Scene control: limit scene to sports medicine personnel and move bystanders (including players)  
away from area.



## **SPECIAL CONCERNS**

### **Allergic Reactions**

- If an athlete has an allergic reaction, it is important that he/she gets medical treatment immediately.
- If the athlete experiences breathing difficulty and and/or if he/she has an Epi-Pen, get it for them and have him/her give themselves an injection. Do not do it for them. If they cannot do it themselves, call 9-1-1.
- If the athlete's reaction is minor (hives, itching, irritation, etc.), contact parent. In most cases, a Benadryl will fix the problem but as a coach, you cannot give that medicine to the athlete.

### **Asthma**

- Only athletes who have been diagnosed with asthma should use inhalers;
- Athletes with asthma should only be allowed to use their own inhaler;
- If trouble persists, **CALL 911**.

### **Dental - Broken Tooth**

If an athlete gets a tooth knocked out (or broken off)

- Keep the tooth;
- Put the tooth in the save-a-tooth container found in the team's medical kit
- Have athlete chew gum and put over the exposed tooth in mouth to prevent nerve irritation;
- Send to dentist – don't forget to send the tooth.

### **Diabetics**

*Symptoms:* rapid onset of altered mental status, intoxicated appearance, elevated heart rate, cold and clammy skin, hunger, seizures, anxiousness

*What to Do:* Ask the athlete. The athlete will direct you (is he/she hypoglycemic or hyperglycemic?). Does he/she want juice? Sugar? Get him/her what they need.

If trouble persists, **CALL 911**.

### **Muscle Cramping**

- Poor hydration and low electrolyte count is the cause;
- Place affected muscle on a stretch, Administer Gatorade or other sports drink;
- Have the athlete chug some pickle juice (seriously!) and "chase" it with lots of water or Gatorade.
- Carefully observe athlete for signs of exertional heat illness

### **Seizures**

- Have athlete lie down. Remove any objects in hand or nearby;
- Loosen restrictive clothing;
- Allow the seizure to finish;
- After the convulsions have ended, protect the airway.
- If athlete is blue, lift chin and tilt head back. **CALL 911**



## **Special Concerns: EHS Exertional Heat Stroke**

*“Exertional heat stroke is classified as a core body temperature of greater than 104\*-105\*F with associated CNS dysfunction. **The length of time body temperature is above the critical core temperature 105\* F dictates any morbidity and the risk of death from EHS.**”*

**NATA Position Statement: Preventing Sudden Death in Sports 2012**

### **EHS Signs/symptoms:**

Hot wet skin, hyperventilation, low blood pressure, disorientation, confusion, dizziness, vomiting, diarrhea, loss of balance, staggering, irritability, irrational or unusual behavior, aggressiveness, hysteria, delirium, collapse, loss of consciousness, and coma.

**Evaluation: Rectal / Core Temperature Only = 104\*F or Higher**

**Treatment: Cold / Ice Water Immersion & Continuously stir water**

**Goal:** Lower the victim's core body temperature to 102\* F in less than 30 minutes

### **Medical 1st Responder is at the venue: Activate the venue specific Emergency Action Plan**

#### **Medical 1st Responder:**

Directs **Head Coach** to **Call 911 (give information listed below)** then call AD & Parents  
Directs **Assistant Coach** to Go get AED out of ATC's truck  
Directs **Assistant Coach** to remove all bystanders from the scene  
**Checks the victim's ABC's**  
**Checks Rectal Temperature**  
**Has athlete remove equipment and loosen clothing**  
**Helps athlete get into immersion tub w/ cold water**  
**Dumps coolers of ice into immersion tub & continuously stirs water**  
**Re-assesses rectal temperature ever few minutes while athlete is in cold water**  
(DataTherm II Continuous Temperature Monitor)  
**Consult EMS upon their arrival**  
**When athlete's core temperature is @/below 102\* F = Transport via EMS to ER**

### **Medical 1st Responder is not at venue, Head Coaches: Activate Venue Specific EAP**

#### **Head Coach:**

Directs **Assistant Coach** to CALL 911, then Call the Medical 1st Responder 252-661-2305,  
Call Athletic Director, Call Athlete's Parents  
Directs **Assistant Coach** to remove all bystanders from the scene  
**Has athlete remove equipment / loosen clothing & get into immersion tub w/ cold water / ice**  
**If no immersion tub = Help athlete to Air Conditioned locker-room & puts athlete in a Cold Shower until ATC arrives**

#### **Assistant Coaches:**

Call 911 & then call Medical 1st Responder  
Call Athletic Director, Call athlete's Parents  
Unlock / open gated entrance to athletic complex & “flag down” EMS and direct to scene



## Special Concerns: Exertional Sickling

*“Sickle cell trait is the inheritance of one gene for sickle hemoglobin and one for normal hemoglobin. During intense or extensive exertion, the sickle hemoglobin can change the shape of red cells from round to quarter-moon, or sickle. This change, exertional sickling, can pose a grave risk for some athletes. Asthma, altitude, dehydration, heat, and illness exacerbate red blood cell sickling” (Courson MAATA 2012)*

### ES Signs/symptoms:

Muscle cramping (atypical pain, not rolling around writhing in pain), swelling, weakness, tenderness, struggling in the first few minutes of training session (usually the 1<sup>st</sup> training session of the season), complains of “can not catch my breath”, athlete on their knees or lying down, athlete collapses

### **Medical 1st Responder is already at the venue: Activate the venue specific EAP**

#### Medical 1st Responder:

Directs **Head Coach** to **Call 911 (give information listed below)** then call the **Athletic Director**  
Directs **Assistant Coach** to Go get AED out of ATC’s truck  
Directs **Assistant Coach** to remove all bystanders from the scene  
**ATC Checks the victim’s ABC’s, monitor’s athlete’s vitals**  
Begin CPR when necessary, use AED as soon as it arrives  
Continue CPR/AED until EMS arrives & takes over. **Tell EMS athlete has SCT**

### **Medical 1st Responder is not at venue, Head Coaches: Activate Venue Specific EAP**

#### Head Coach:

Directs **Assistant Coach** to **CALL 911**, then Call the **Medical 1st Responder 252-661-2305**  
Directs an **Assistant Coach** to remove all bystanders from the scene  
**Check the victim’s ABC’s (Airway, Breathing, Circulation) Monitor athlete’s Vitals**  
Not Breathing / No Pulse = Begin CPR & continue until Medical 1st Responder or EMS arrive. **Tell EMS athlete has SCT**

#### Assistant Coaches:

Call 911 & Provide the following information:

- ✓ Provide name
- ✓ Telephone number
- ✓ Number of injured individuals
- ✓ Condition of injured student-athletes
- ✓ First aid treatment
- ✓ Location of injured student-athlete at MHS, give specific directions
- ✓ Information requested by EMS
- ✓ DO NOT HANG UP FIRST

Call the Athletic Medical 1st Responder (252-661-2305), Call the Athletic Director, Call Athlete’s Parents

If Medical 1st Responder is NOT AT SCHOOL, GO GET AED from the Athletic Training Room in gym

**IF FOOTBALL TEAM IS AWAY THE AED IS WITH THE MEDICAL 1ST RESPONDER**

#### Athletic Director & School Administrators or Assistant Coaches:

Unlock and open gated entrance to athletic complex;  
Designate individual to “flag down” EMS and direct to scene



## **RIVERSIDE EMERGENCY PLAN: Football** **Riverside High School Football Field**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  1. Provide name
  2. Telephone number
  3. Number of injured individuals
  4. Condition of injured student-athletes
  5. First aid treatment
  6. Location of injured student-athlete at MHS, give specific directions
  7. Information requested by EMS
  8. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

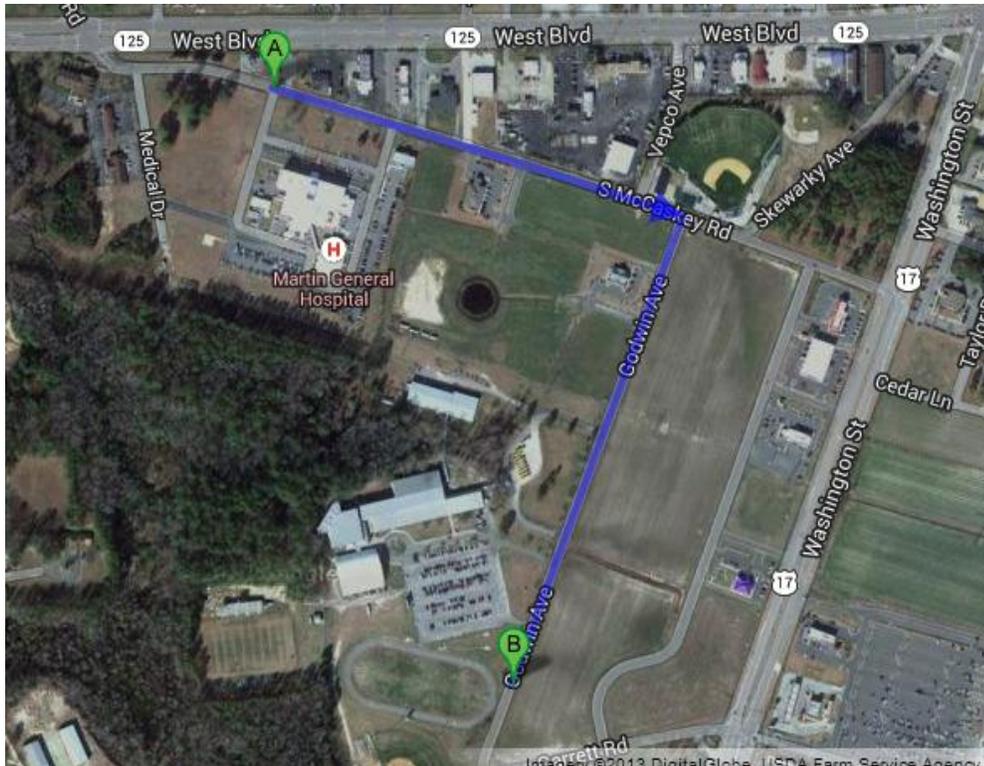
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Football Field:** Head east on S. McCaskey Rd toward Veeco Ave (0.3 miles), turn right onto Godwin Ave (0.4 miles) and turn right into Riverside High School. Continue to the left of the gymnasium and straight through the gates down to the football field.





## **RIVERSIDE EMERGENCY PLAN: BASEBALL**

### **Riverside High School Baseball Field**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include: AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

#### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  9. Provide name
  10. Telephone number
  11. Number of injured individuals
  12. Condition of injured student-athletes
  13. First aid treatment
  14. Location of injured student-athlete at MHS, give specific directions
  15. Information requested by EMS
  16. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above). Rehabilitation is to follow physician protocols.

#### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

#### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Baseball Field:** Start out going east on S. McCaskey Rd toward Veeco Ave (0.3 miles) and then turn left onto Skewarkee Ave (0.1 miles). Drive and park ambulance at the front gate. Field is accessible immediately to the right through visitor's side infield gate.





## **RIVERSIDE EMERGENCY PLAN: Volleyball** **Riverside High School Gym**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  17. Provide name
  18. Telephone number
  19. Number of injured individuals
  20. Condition of injured student-athletes
  21. First aid treatment
  22. Location of injured student-athlete at MHS, give specific directions
  23. Information requested by EMS
  24. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

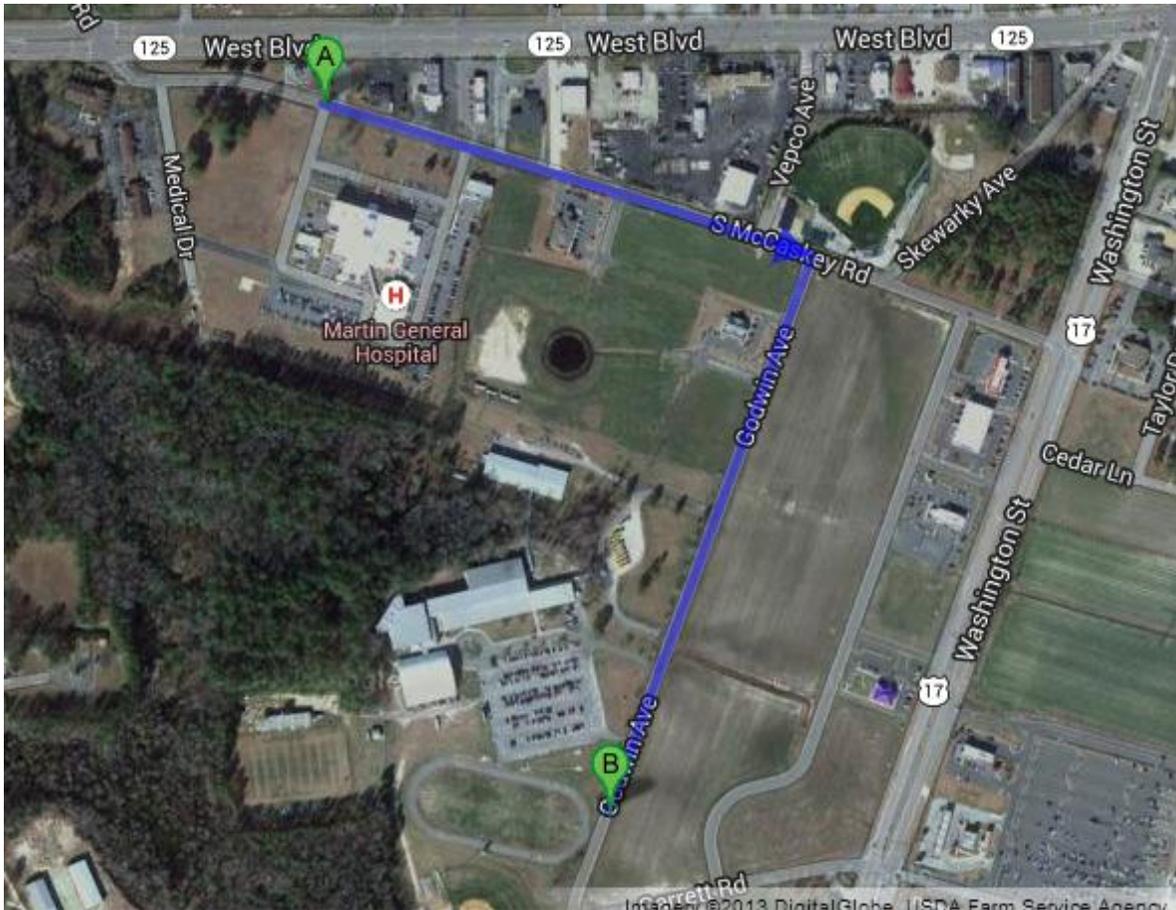
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Gym:** Head east on S. McCaskey Rd toward Vepco Ave (0.3 miles), turn right onto Godwin Ave (0.4 miles) and turn right into Riverside High School. Continue to the left of the gymnasium and park next to the gymnasium.





## **RIVERSIDE EMERGENCY PLAN: Cross Country** **Riverside High School Cross Country**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  25. Provide name
  26. Telephone number
  27. Number of injured individuals
  28. Condition of injured student-athletes
  29. First aid treatment
  30. Location of injured student-athlete at MHS, give specific directions
  31. Information requested by EMS
  32. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

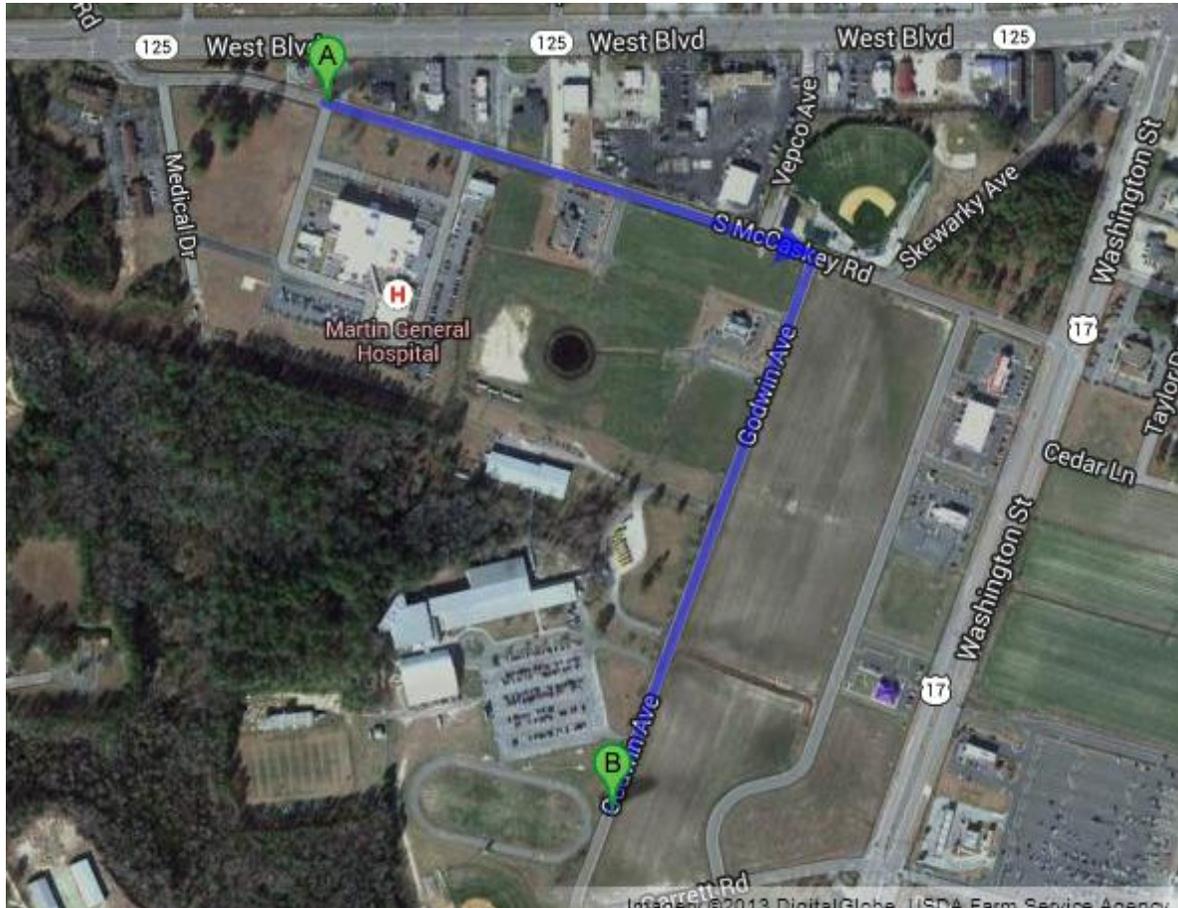
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Track:** Head east on S. McCaskey Rd toward Vepco Ave (0.3 miles), turn right onto Godwin Ave (0.4 miles) and turn right into Riverside High School. Continue to the left of the gymnasium and you will see the track on your left.





## **RIVERSIDE EMERGENCY PLAN: Cheerleading** **Riverside High School Gym**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  33. Provide name
  34. Telephone number
  35. Number of injured individuals
  36. Condition of injured student-athletes
  37. First aid treatment
  38. Location of injured student-athlete at MHS, give specific directions
  39. Information requested by EMS
  40. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

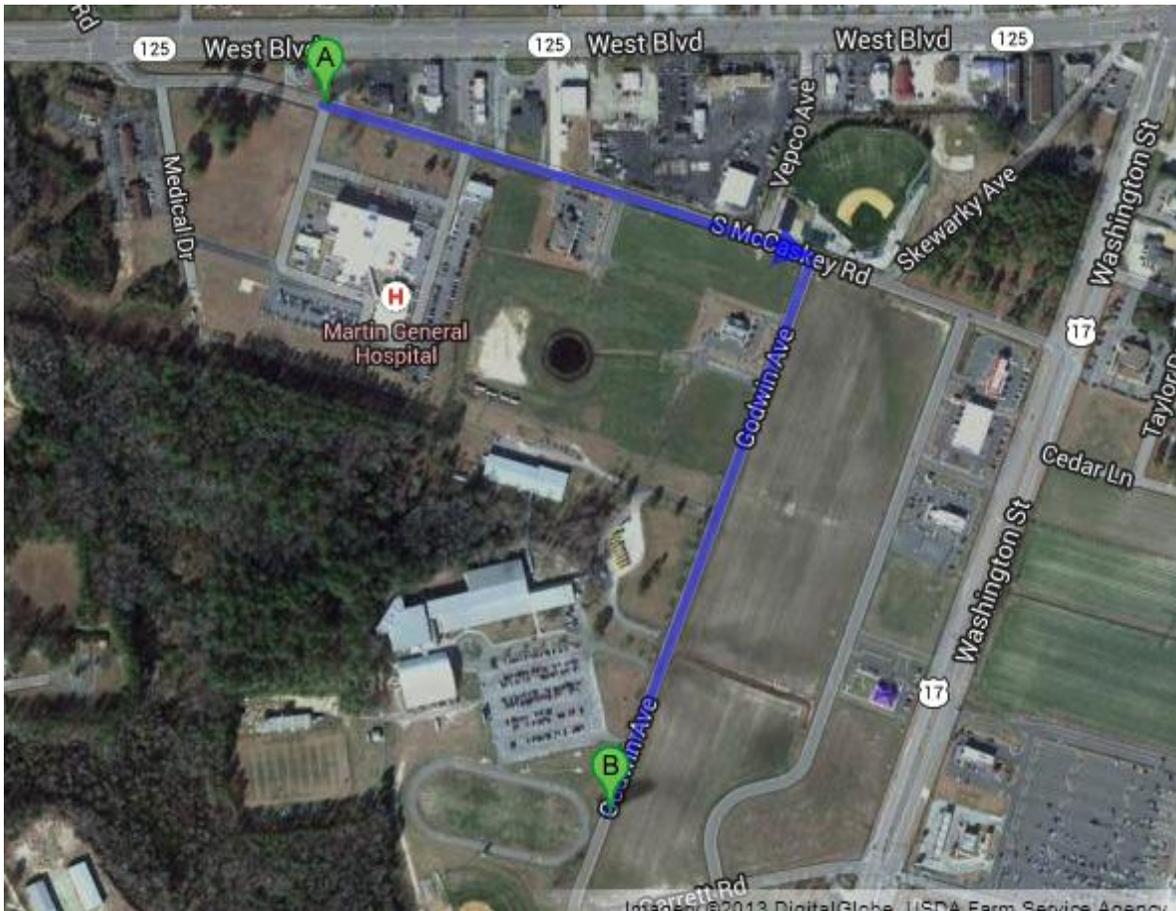
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Gym: Head east on S. McCaskey Rd toward Vepco Ave (0.3 miles), turn right onto Godwin Ave (0.4 miles) and turn right into Riverside High School. Continue to the left of the gymnasium and park on the backside of the gymnasium.**





## **RIVERSIDE EMERGENCY PLAN: Soccer** **Riverside Middle School Soccer Field**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  41. Provide name
  42. Telephone number
  43. Number of injured individuals
  44. Condition of injured student-athletes
  45. First aid treatment
  46. Location of injured student-athlete at MHS, give specific directions
  47. Information requested by EMS
  48. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

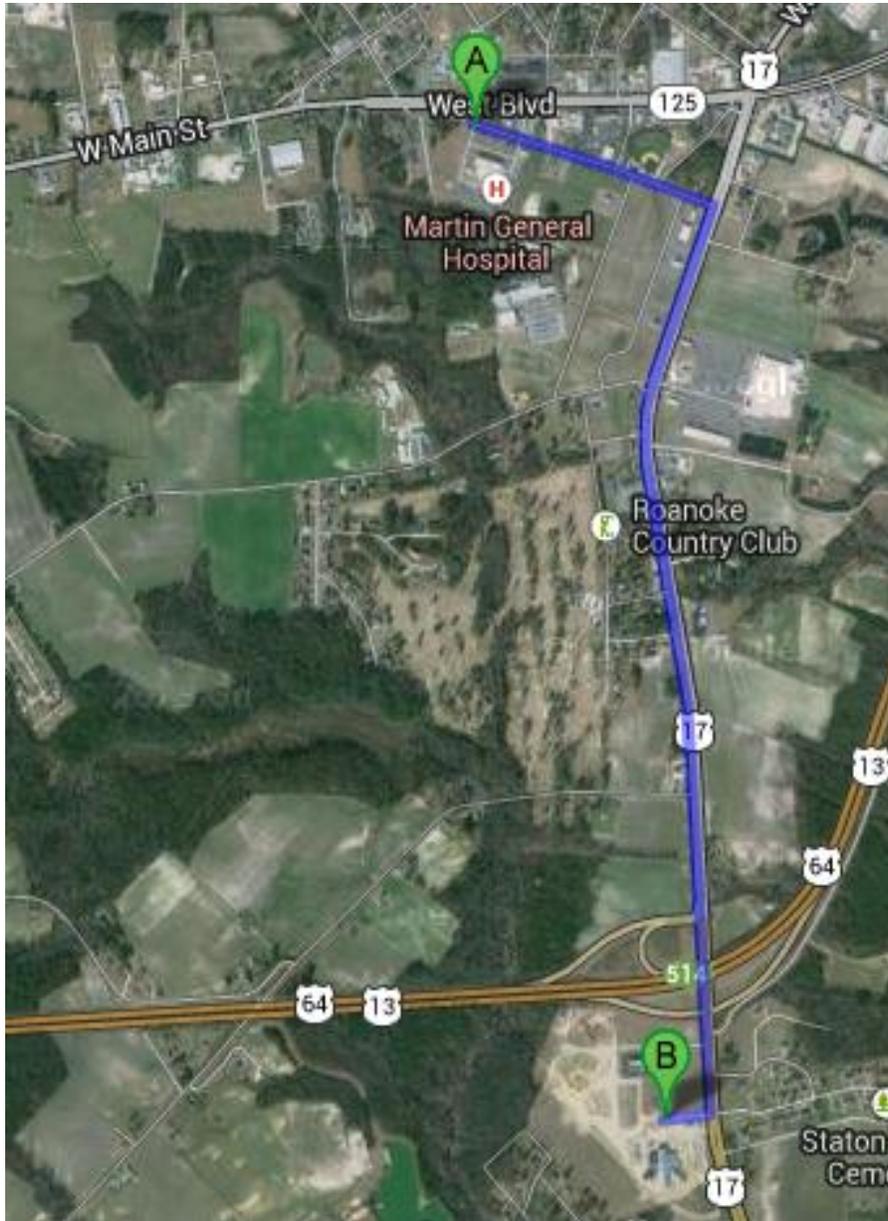
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside Middle School Soccer Field:** Head east on S. McCaskey Rd toward Veeco Ave (0.5 miles), turn right onto US 17 (1.6 miles), and turn right onto White Oak Dr (463 feet). Continue straight and the soccer field will be on your right.





## **RIVERSIDE EMERGENCY PLAN: Basketball** **Riverside High School Gym**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  49. Provide name
  50. Telephone number
  51. Number of injured individuals
  52. Condition of injured student-athletes
  53. First aid treatment
  54. Location of injured student-athlete at MHS, give specific directions
  55. Information requested by EMS
  56. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

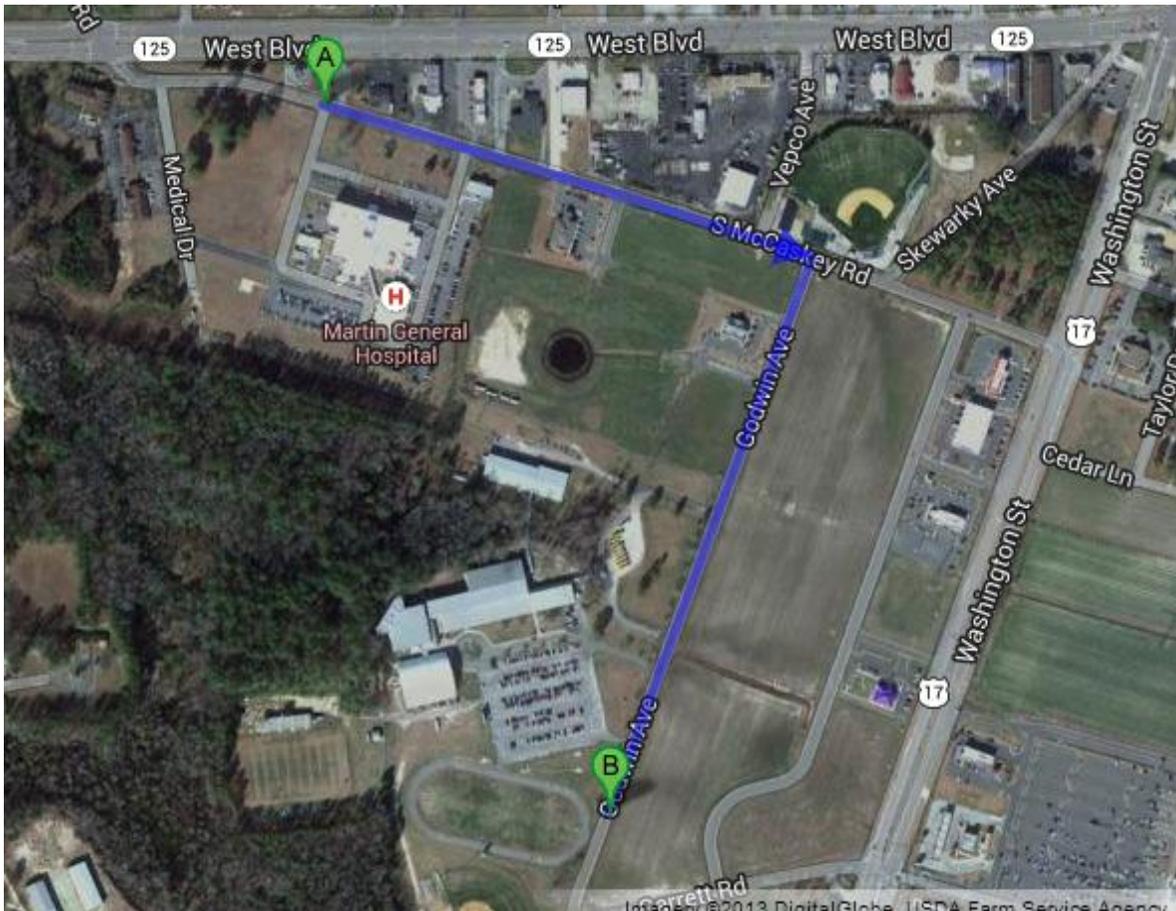
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Gym: Head east on S. McCaskey Rd toward Vepco Ave (0.3 miles), turn right onto Godwin Ave (0.4 miles) and turn right into Riverside High School. Continue to the left of the gymnasium and park on the backside of the Gymnasium.**





## **RIVERSIDE EMERGENCY PLAN: Tennis** **Riverside High School Tennis Courts**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  57. Provide name
  58. Telephone number
  59. Number of injured individuals
  60. Condition of injured student-athletes
  61. First aid treatment
  62. Location of injured student-athlete at MHS, give specific directions
  63. Information requested by EMS
  64. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

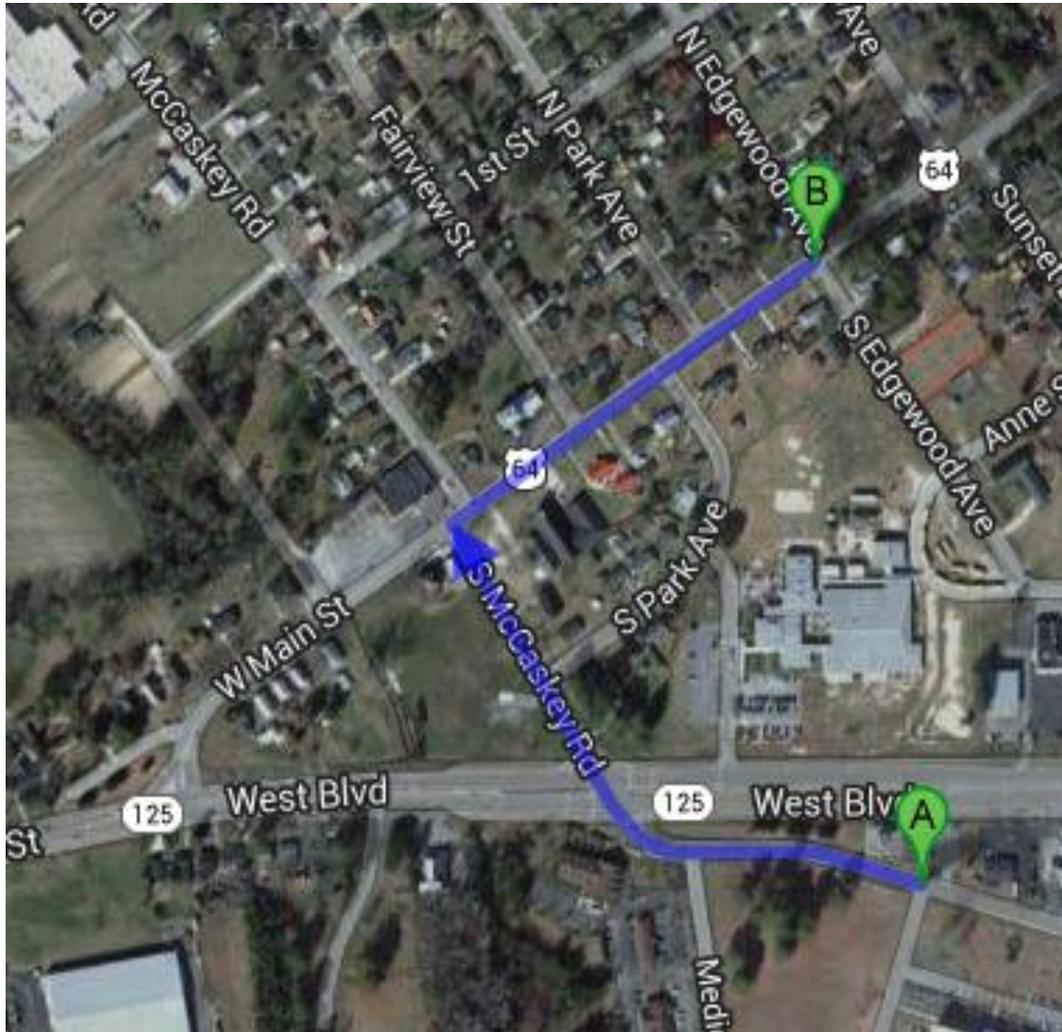
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Tennis Courts: Head west on S. McCaskey Rd. toward Medical Dr. (0.3 miles), turn right onto W. Main St (0.2 miles), and turn right onto S. Edgewood Ave. The tennis courts will be on your left.**





## **RIVERSIDE EMERGENCY PLAN: Softball** **Riverside High School Softball Field**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  - 65. Provide name
  - 66. Telephone number
  - 67. Number of injured individuals
  - 68. Condition of injured student-athletes
  - 69. First aid treatment
  - 70. Location of injured student-athlete at MHS, give specific directions
  - 71. Information requested by EMS
  - 72. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

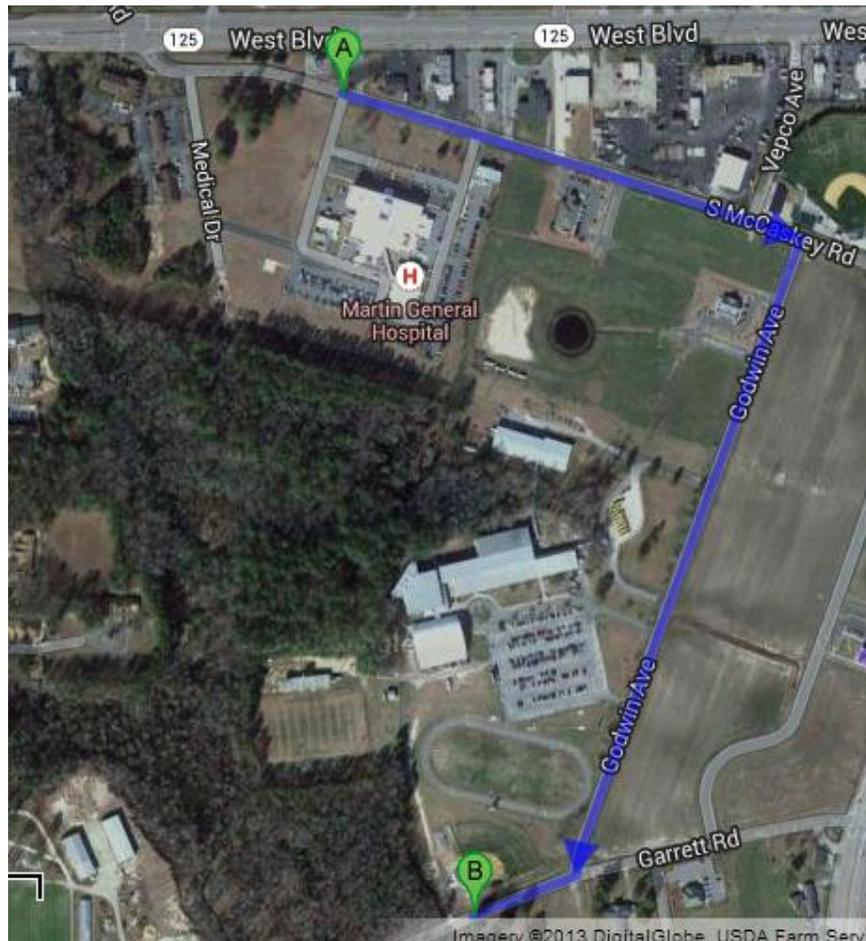
### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Softball Field:** Head east on S. McCaskey Rd toward Veppo Ave (0.3 miles), turn right onto Godwin Ave (0.4 miles), turn right onto Garrett Rd (367 feet). Turn in the gates on your right to the softball field and park behind the home dugout.





## **RIVERSIDE EMERGENCY PLAN: Track** **Riverside High School Track**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include:  
AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  - 73. Provide name
  - 74. Telephone number
  - 75. Number of injured individuals
  - 76. Condition of injured student-athletes
  - 77. First aid treatment
  - 78. Location of injured student-athlete at MHS, give specific directions
  - 79. Information requested by EMS
  - 80. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above).  
Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**Riverside High School Track: Riverside High School Football Field: Head east on S. McCaskey Rd toward Vepco Ave (0.3 miles), turn right onto Godwin Ave (0.4 miles) and turn right into Riverside High School. Continue to the left of the gymnasium and the track will be located on your left.**





## **RIVERSIDE EMERGENCY PLAN: Golf** **Riverside High School RCC**

**Emergency Personnel:** Certified Medical 1st Responder on school premises with cellular phone access during practices and home games.

**Emergency Communication:** The Medical 1st Responder (Del Locke) will carry his cellular telephone at all times and she can be reached by calling 252-661-2305. Riverside High School recommends the head coach of each of the baseball teams carry a cellular phone, in case of emergency.

**Emergency Equipment:** supplies stored in the Athletic Training Room include: AED with CPR mask, medical bags, rapid form vacuum immobilizer splints, crutches, sphygmomanometer, stethoscope, thermometer, various wound care necessities, and any other items deemed necessary by the team's physician.

### **Roles of the Medical 1st Responder:**

- Preventative care for all student-athletes (includes evaluation, consultation, taping, and the use of therapeutic modalities such as whirlpool, transcutaneous electrical nerve stimulation TENS, hot and cold therapy)
- Immediate evaluation and care of the more seriously-injured or ill student athletes = Activation of emergency medical system (EMS) 911 Call:
  81. Provide name
  82. Telephone number
  83. Number of injured individuals
  84. Condition of injured student-athletes
  85. First aid treatment
  86. Location of injured student-athlete at MHS, give specific directions
  87. Information requested by EMS
  88. DO NOT HANG UP FIRST
- Return to play decision-making on the injured student-athlete
- Physician referral of the injured student-athlete
- Contacting parent(s) of injured student-athlete
- Rehabilitative care for injured student-athletes (includes: same as above). Rehabilitation is to follow physician protocols.

### **Roles of Coaches / Assistant Coaches:**

- 911 Call and provide information above if directed by Medical 1st Responder;
- Go get AED if directed by Medical 1st Responder to do so;
- Direct EMS personnel (ambulance) to scene;
- Unlock and open gated entrance to baseball complex;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

### **Roles of Administrative Staff:**

- Ensure concrete driveway to press box is clear and accessible to emergency personnel
- "Flag down" EMS and direct to scene;



**Venue Directions:**

**RCC: Head east on S. McCaskey Rd toward Vepco Ave (0.5 miles), turn right onto US-17 (0.7 miles), turn right onto Country Club Dr (0.1 miles), and turn left onto Fairway Dr (184 feet). Drive and park at the front of the Club House.**

