

Emergency Action Plans & Medical Policy and Procedures

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Mission:

As a sports medicine staff, we strongly believe in using education and communication as a means by which we relay safety guidelines and warning signs for emergent situations in order to ensure the overall protection of the athletes, coaches and spectators at any given time. Additionally, we strive to always successfully provide prevention, recognition, evaluation, and treatment services of acute and chronic injuries for the overall health of the athletes.

Purpose of EAP:

To provide Springdale Public Schools with an emergency action plan (EAP) in case of a serious or life-threatening condition that arises during practice or competitions. ATC, coaches, and others involved in athletics must constantly be on guard for potential injuries, and although the occurrence of limb-threatening or life-threatening emergencies is not common, the potential exists. Therefore, prepared emergency responders must have planned in advance for the action to be taken in the event of such an emergency.

Need for EAP:

The EAP has been categorized as a written document that defines the standard of care required during an emergency situation. Serious emergencies rarely happen but when they do, a quick, organized response can make a difference between a successful and unsuccessful reaction to an emergency. An EAP that is well planned and rehearsed will provide responders with the approach they need for an effective response. Also of significance is the legal basis for the development and application of an emergency plan. It is well known that organizational medical personnel, including certified athletic trainers, have a legal duty as reasonable and prudent professionals to ensure high-quality care of the participants.

Chain of Command EAP:

ATC is in charge of emergency until EMS arrives. Doctors will assist if summoned by ATC. Coaches and Athletic Training Students (ATS) are also available to assist ATC, but only if asked. The only exceptions are the visiting ATC, who is responsible for their team, and when ATC is not at games or practices the head coach is in charge until ATC or EMS arrives. <u>People</u> coming to help should be screened to help control the area and to help the ATC in charge. If someone arrives that can help the situation then they should be introduced to the Sports Medicine Team. This will allow all working the scene to know who is who.

Emergency Qualifications:

It is required that ATC, student athletic trainers, and coaches are all trained in CPR/AED and first aid. ATC for event may have student athletic trainer's onsite at competitions and practice as well as coaches to assist in providing emergency first aid as the ATC sees fit. New staff involved in athletic activities should comply with this rule within six months of employment. It is recommended that all personnel also be trained in the prevention of disease transmission. EMS will not be on site for every game or practices since they are located close enough to respond quickly to an emergency. Visiting teams should also be informed of EAP procedures.

Responsibilities of Emergency Team Members:

During home games, the home team ATC and the visiting ATC are responsible for their own teams but may assist the other ATC if needed. An AED will be carried by the ATC on his person for use as needed. Administrators, coaches, and student athletic trainers should know to get the

AED in case of emergency. Since there are only two ATCs on campus, all coaches are responsible for emergencies during practice and games until ATC, EMS, or doctor arrives on scene. Since insurance coverage varies among athletes, parents may decide how their athlete is cared for and where they are cared for. Parents are the primary person to accompany student to hospital. If parents are not around, a member of the sports medicine team or a member of the coaching staff will accompany athlete to hospital.

Equipment and Supplies:

All available supplies and equipment are stored in the AT room at each respective school. The AT room for Bulldog Stadium is located inside Pat Walker Field House. Access can be gained through the Turf Room or through the Weight Room. All available equipment will be on site for games and quickly accessible including a fully stocked and complete AT kit for all games and competitions ATC attends. ATC is not required to bring main bag to practice but is required to bring personal AT bag. Equipment should be in good condition and personnel must be trained, in advance, to use it properly. Keys for AT room are held by ATC, head coaches, and the athletic director. To ensure that emergency equipment is in working order, all equipment should be checked on a regular basis. In addition, medical records and emergency contacts for all athletes should be available both at the school and on the road.

Equipment List (minimum):

AED Checked Bi-Monthly (NEED minimum of 1 per athletic trainer) Vacuum Splint Bag: Checked on yearly basis for leaks (NEED minimum of 1 per athletic trainer) Med Bags: Stocked and checked weekly. Two way radios (NEED 4 per high school)

Emergency Care Procedures:

Apply basic emergency care as situation requires. Care might include:

- 1. Check life threatening conditions
 - a. Level of consciousness if unconscious call 911 immediately
 - b. Airway is airway blocked
 - c. Breathing is person breathing
 - d. Circulation does person have pulse
 - e. Bleeding is person bleeding severely
 - 2. Call 911 now if necessary
 - 3. Emergency equipment
 - a. AED, first aid kit
 - 4. Apply basic first aid as situation requires
 - a. Adult CPR: 30 compressions 2 breaths -- continue with compressions and breaths
 - b. Bleeding: direct pressure over injury; elevate injury over heart if possible; apply sterile dressing over injury
 - c. Splint fractures
 - d. Spine Injuries Hold head, neck, and back inline
 - e. Treat for Shock if necessary
 - 5. Any other emergency procedures as necessary
 - 6. Other things to consider during emergency situation:
 - a. Reassure and calm athlete
 - b. Don't move severely injured athlete unless he/she is in danger

- c. Don't reduce fractures
- d. Sufficient lines of vision between the medical staff and all available emergency personnel should be established and maintained
- e. Once the medical staff begins to work on an injured player, they should be allowed to perform services without interruption or interference
- f. Keep players, coaches, spectators away and prevent them from helping injured athlete

Triage Method:

The concept of triage is simply a method of quickly identifying victims who have immediately life-threatening injuries and who have the best chance of surviving so that when additional rescuers arrive on scene, they are directed first to those patients. When the situation arises where there is a need to treat multiple victims, the head ATC at the site will be in charge of determining the order of care for the victims. All victims will be identified using athletic tape as follows:

- <u>IMMEDIATE</u> 1 marks on a piece of tape or marks on Forehead for the serious, lifethreatening injuries that need immediate care. These patients are at risk for early death - usually due to shock or a severe head injury. They should be stabilized and transported as soon as possible.
- <u>DELAYED</u> 2 marks on a piece of tape or forehead for moderate injuries that aren't immediately life threatening. They should be reassessed when possible and those with the most serious injuries or any who have deteriorated should be top priorities for transport.
- <u>MINOR</u> 3 mark on a piece of tape or forehead for mild injuries that require the least amount of emergency care. Any of these patients could deteriorate if they had more serious injuries than originally suspected. They should be reassessed when possible.

As an ATC or first one on the scene, not starting CPR may be the hardest thing you must do at a multiple casualty scene. But if you perform CPR on one patient, many others may die. ATC will assign doctors, AT students, or coaches to assist in care until ATC or EMS can attend to athlete.

Emergency Contacts:

Cell phones are carried by ATC's, administrators, coaches, and athletic staff and even spectators if necessary. The following is a list of important phone numbers needed in case of emergency.

EMS, Fire, Police	911
Athletic Director Wayne Stehlik	479-601-1908
Har-Ber High Chris Wood (Assoc. Athletic Director HBHS, CJHS, SWJHS) Chad Fink, Head ATC (HBHS-CJHS) Karen Taylor, Assistant ATC (HBHS-SWJH) TBD (Asst. Athletic Director Men's HBHS) Sandy Wright (Asst. Athletic Director Women's HBHS)	479-409-5303 479-799-0121
Springdale High Shane Patrick (Assoc. Athletic Director SHS, GJHS) Katie Morrison, Head ATC (SHS-GJHS) Kristin Brown, Assistant ATC (SHS-LSJH) Dennis Debusk (Asst. Athletic Director Men's SHS) Brad Stamps (Asst. Athletic Director Women's SHS)	479-871-0429 479-544-1686 479-236-7413
Central Jr. High Kelly Koons (Asst. Athletic Director CJHS)	479-466-6333
Southwest Jr. High Steve Price (Asst. Athletic Director SWJHS)	479-236-9658
George Jr. High Todd Lofton (Asst. Athletic Director GJHS)	479-466-8631
Lakeside Jr. High TBD (Asst. Athletic Director LJHS)	
Poison Control Hotline National Suicide Prevention Lifeline Centers for Disease Control	1-800-273-8255 NFO (800-232-4636)

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

Environmental Conditions:

Reason for Weather EAP:

During the fall and spring months there is always a chance of significant weather activity. During the summer and early fall Arkansas can see high temperatures and humidity that can lead to heat illness. We as a school district need to have the best interest of the fans, athletes, and staff in mind when the weather turns bad. An EAP for significant weather is needed in order to help with the amount of fans and players that are attending the game or practice.

Types of Weather Alert:

Thunderstorm Watch

A Thunderstorm Watch means that the potential exists for the development of thunderstorms which may produce large hail or damaging winds. When a watch is issued, you should go about your normal activities, but keep an eye to the sky and an ear to the National Weather Service's weather radio or local radio and television stations for further updates and possible warnings.

• Thunderstorm Warning

A Thunderstorm Warning means that a severe thunderstorm is occurring or is imminent based on Doppler radar information. You should move indoors to a place of safety.

Tornado Watch

A Tornado Watch is issued by the National Weather Service when conditions are favorable for the development of tornadoes in and close to the watch area. Their size can vary depending on the weather situation. They are usually issued for time span of 4 to 8 hours. They normally are issued well in advance of the actual occurrence of severe weather. During the watch, people should review tornado safety rules and be prepared to move a place of safety if threatening weather approaches.

Tornado Warning

A Tornado Warning is issued when a tornado is indicated by radar or sighted by spotters; therefore, people in the affected area should seek safe shelter immediately. They can be issued without a Tornado Watch being already in effect. They are usually issued for time span of around 30 minutes.

Springdale Schools Weather Policy – SAFETY FIRST

Check the Springdale Schools website under "Athletics – Announcements" to see if the "Weather Policy" is in effect. Call, text, or e-mail the Athletic Director, Wayne Stehlik, if you have any questions. The "Weather Policy" is in effect when the following conditions occur:

Hot Weather Policy

Check the weather at <u>www.weather.com</u>, CoachSmart App (which will show humidity, heat index and temperature), or a reliable local weather source (i.e. 40/29, NOAA website) each day before noon. If the temperature is 100 degrees or the heat index is 102 or higher, practice will need to be cancelled. Any practice occurring while temperatures/heat indices are from 80-100 degrees must include water breaks at least every 20 minutes.

Cold Weather Policy

Check the weather at <u>www.weather.com</u> CoachSmart App (which will show wind chill factors), or a reliable local weather source (i.e. 40/29, NOAA website) each day before noon. All teams need to plan to practice inside when the temperature **or** wind chill is below 32 degrees.

No School/Snow Days/Impending Dangerous Weather

You may not play or practice without approval from the Athletic Director. Our current policy says that we do not play at all when school is cancelled. Dr. Rollins has said that on days that it may clear up, he will have a conversation with the Athletic Director and Dr. Compton to make a district wide decision. No mandatory practices will be allowed if we are out of school or go home early. If dangerous weather is approaching, cut your practice in half. The safety of our student athletes is our primary concern! Make sure you have your emergency phone chain--including the officials' numbers, custodian, gate workers (Athletic Administrative Assistant's #), concession stand, media, score table workers, and coach's number of the team you are playing with you at your house.

Cancelled/Rescheduling Games

No game may be rescheduled or cancelled without the approval of the Athletic Director and your principal first. You must have your check list ready of who to contact, including the media. If you are going to an event and they call it off or change the time please call the Athletic Director and the Athletics Office ASAP and we will post the notification on our web site <u>www.springdaleschools.org</u> under Athletics "Announcements". You also need to make sure your principal and the school office is notified. Allow your players to contact their parents ASAP and ask your parents to check the web site often for announcements and emergency information.

Hot Weather Guidelines (Football Only)

From the NATA Fluid Replacement Statement

Dehydration can compromise athletic performance and increase the risk of exertional heat injury. Athletes do not voluntarily drink sufficient water to prevent dehydration during physical activity. Drinking behavior can be modified by education, increasing fluid accessibility, and optimizing palatability. However, excessive overdrinking should be avoided because it can also compromise physical performance and health. We will provide practical guidelines regarding fluid replacement for athletes.

- Acclimatization will take place prior to Pre-Season Practice.
- Unlimited amounts of water will be made readily available and for events lasting >90 continuous minutes a sports drink will be made available to help replace electrolytes.
- It is recommended that 6-10oz of water be consumed every 20 minutes.
- Temperatures will be taken to determine training standards using a sling psychrometer or equivalent device (see table).

Temperature (F)	Humidity	Procedure
80 – 90	< 70	Watch Obese athletes, provide unlimited water
80 – 90	> 70	Breaks recommended every half hour
90 – 100	< 70	All athletes should be under careful supervision
90 – 100	> 70	Abbreviated practice with light equipment or suspended practice
> 100	> 70	Abbreviated practice with light equipment or suspended practice

- A 3% dehydration rule will be in effect using a weight chart to monitor athletes during the hot weather practices/competition.
- Athletes will be educated to self monitor hydration status by urine color.
- In the event of Exertional Heat Stroke "<u>Cool First, Transport Second</u>" will be the treatment.

Heat Injuries:

- Heat Cramps dehydration, thirst, sweating, muscle cramps, fatigue
- Heat Syncope (fainting) dehydration, fatigue, tunnel vision, pale or sweaty skin, decreased pulse rate, dizziness, lightheadedness, fainting
- Heat exhaustion normal or elevated temperature, dehydration, dizziness, lightheadedness, fainting, headache, nausea, diarrhea, decreased urine output, persistent muscle cramps, pale skin, profuse sweating, chills, cool/clammy skin, intestinal cramps, urge to defecate, weakness, hyperventilation
- Heat stroke high body-core temperature, central nervous system changes, dizziness, drowsiness, irrational behavior, confusion, irritability, emotional instability, hysteria, apathy, aggressiveness, delirium, disorientation, staggering, seizures, loss of consciousness, coma, dehydration, weakness, hot and wet or dry skin, fast heart beat, low blood pressure, hyperventilation, vomiting, diarrhea; cool athlete immediately in any way possible, <u>can lead to death</u>

NOAA's National Weather Service

Heat Index Temperature (°F)

- 1		80	82	84	86	88	90	92	94	96	98	100	102	104	106	108	110
	40	80	81	83	85	88	91	94	97	101	105	109	114	119	124	130	136
	45	80	82	84	87	89	93	96	100	104	109	114	119	124	130	137	
(%)	50	81	83	85	88	91	95	99	103	108	113	118	124	131	137		
Relative Humidity (%)	55	81	84	86	89	93	97	101	106	112	117	124	130	137			
idit	60	82	84	88	91	95	100	105	110	116	123	129	137				
E	65	82	85	89	93	98	103	108	114	121	126	130					
ī	70	83	86	90	95	100	105	112	119	126	134						
ive	75	84	88	92	97	103	109	116	124	132							
lat	80	84	89	94	100	106	113	121	129								
Re	85	85	90	96	102	110	117	126	135								
	90	86	91	98	105	113	122	131									
	95	86	93	100	108	117	127										
	100	87	95	103	112	121	132										

Likelihood of Heat Disorders with Prolonged Exposure or Streuous Activity

Caution

Extreme Caution

Extreme Danger

Danger

Emergency Weather Plan

Chain of Command

The decision to terminate a Springdale Schools Athletics activity in the event of lightning, severe weather, and/or storms will be made by a member of the Springdale Schools Sports Medicine Department present at a practice/game and/or the Springdale Schools Athletics Administrator on Duty (AOD).

Lightening Criteria for Evacuation of the Practice / Game Area:

The policy of the Springdale Schools Athletics will be as follows:

- A member of the Springdale Schools Sports Medicine will monitor one or more of the following for lightning, severe weather, and/or storms:
 - Coach Smart Smartphone App
 - National Weather Service and/or National Oceanic & Atmospheric Administration (NOAA) local weather radar (www.noaa.gov, www.weatherunderground.com, or www.weather.com);
 - <u>*"*Flash / bang"</u> count method has been proven invalid and is <u>no longer</u> deemed an acceptable form of lightning detection per the NATA.
- When an appropriate warning is received, i.e.;
 - Alert personnel at 30 miles (lighting)
 - Evacuate playing field / spectators at 12 miles (lighting)
- A member of the Springdale Schools Sports Medicine Department and/or a member of the Springdale Schools Athletics Administrator on Duty (AOD) will notify the following persons-
 - The Springdale Schools head coach and/or his/her designee;
 - The game official / umpire (at a break in the action);
 - The visiting team's athletic trainer and/or coach (if applicable); and

<u>If Lightning is detected within 30 miles</u> of the venue a member of the Springdale Schools Sports Medicine department will notify the AOD and Game Official.

If Lightning is detected within 12 miles of Venue the AOD and Game Official and/or designee will be notified at once to begin to clear the Venue. At this point, all outdoor game / practice activities are to cease *IMMEDIATELY*, and ALL personnel are to evacuate to a safe structure or location.

AAA Lightning Guidelines

AAA rules require a thirty minute delay of game from the last lightning strike and that the play area is considered safe before play resumes. Lightning activity will be monitored via radar, Thunderbolt, CoachSmart, or www.strikestarus.com. If radar, Thunderbolt, CoachSmart, or www.strikestarus.com is unavailable the 30/30 rule will go into effect.

30/30 Rule

If you see lightning and the thunder follows in less than 30 seconds then the lightning is too close. Sound travels 1 mile per 5 seconds. This is a good rule of thumb due to the fact that lightning can strike from over 10 miles away according to.

Lightning Guidelines:

National Weather Service Lightning Safety Outdoor Guidelines

In general, a significant lightning threat extends outward from the base of a thunderstorm cloud about 6 to 10 miles. Therefore, people should be in a safe place when a thunderstorm is 6 to 10 miles away. Also, Â plan's guidelines should account for the time it will take for everyone to get to safety. Here are some criteria that could be used to stop activities:

- If you see lightning. The ability to see lightning varies depending on the time of day, weather conditions, and obstructions such as trees, mountains, etc. In clear air, and especially at night, lightning can be seen from storms more than 10 miles away provided that obstructions don't limit the view of the thunderstorm.
- If you hear thunder. Thunder can usually be heard for a distance of about 10 miles provided that there is no background noise. Traffic, wind, and precipitation may limit the ability to hear thunder to less than 10 miles. If you hear thunder, though, it's a safe bet that the storm is within ten miles.

A safe structure or location is defined as- *"any sturdy, fully enclosed, substantial, and frequently inhabited building that has plumbing and/or electrical wiring that acts to electrically ground the structure".* Examples of locations that routinely *DO NOT* meet the criteria include-

- o Baseball / softball dugouts
- Baseball / softball -covered batting cages
- Convertible / -soft-top vehicles;
- o Golf carts / John Deere Gator vehicles
- o Outside storage sheds
- o Canopy / awning / tent
- In the absence of a sturdy, fully enclosed, substantial, and frequently inhabited location as described above, a secondary structure such as a fully enclosed vehicle with a hard metal roof, rubber tires, and completely closed windows can provide a measure of safety. Persons should not touch the sides of the vehicle! Convertible and "soft-top" vehicles and golf carts do no provide a high level of protection and cannot be considered safe from lightning.
- Persons should avoid taking showers and using plumbing facilities (including indoor and outdoor pools, whirlpools, Jacuzzis, and hot tubs) and land-line telephones during a thunderstorm.
- If no safe structure or location is within a reasonable distance, personnel should find a thick grove of small trees surrounded by taller trees or a dry ditch. Everyone should assume the —lightning-safe|| position- a crouched position on the ground with the feet together, weight on the balls of the feet, head lowered, and ears covered. *DO NOT LIE FLAT!* Minimize the body's surface area and minimize contact with the ground.
- If unable to reach safe shelter, persons should stay away from the tallest trees or objects (i.e. light poles, flag poles, etc.), metal objects (i.e. fences, bleachers, etc.), individual trees,

standing pools of water, and open fields. Persons should avoid being the highest object in an open field.

- If unable to reach safe shelter, persons should stay away from the tallest trees or objects (i.e. light poles, flag poles, etc.), metal objects (i.e. fences, bleachers, etc.), individual trees, standing pools of water, and open fields. Persons should avoid being the highest object in an open field.
- In situations where thunder and/or lightning may or may not be present, yet someone feels his/her hair stand on end and skin tingle, LIGHTNING IS IMMINENT! Therefore, all persons should assume the —lightning-safe|| position as described above.
- A cellular and/or portable remote phone is a safe alternative to land-line phones, if the person and the antenna are located within a safe structure or location, and if all other precautions are followed.

Weather Emergency Staff Responsibilities

Sports Medicine Department:

- Will meet with the visiting team Athletic Trainer and go over weather plan.
- Will monitor weather activity via radar, Thunderbolt, CoachSmart, or www.strikestarus.com. The assigned point person will keep sideline official updated and notify them of weather activity.
- If Lightning is detected within 30 miles of the venue a member of the Springdale Schools Sports Medicine department will notify the AOD and Game Official.
- If Lightning is detected within 12 miles of Venue the AOD and Game Official and/or designee will be notified at once to begin to clear the Venue.

Head Coaches/Directors of school groups (i.e., band, cheer, etc.):

- Will meet with visiting teams Head Coaches/Directors to advise them of plan.
- Will direct Spirit teams, dance teams and the band to the flat building to be supervised by their coaches and directors.
- The home head football coach will assure that the visiting team is safely inside the old field house locker room on the east side of the stadium where they will be supervised by their assistant coaches. Both teams' head coaches will then meet in the Sophomore Center office with AD, home team principal, visiting AD, visiting principal, head official, and Student Resource Officer ONLY.

Head ADM (Principal or designee):

- Will meet with officials and the visiting teams ADM pre-game and go over plan. They will be shown where the point person (Administrator) will be to end the game.
- ADM will notify all game security workers, gate workers and concession stand workers via two-way radio to move to unlocked buildings and meeting points. (There should be working flashlights in all gate areas, press box rooms and concession stands in case of a power failure.)
- The ADM (or designee) will radio the public announcer and the announcement will be at that time.

Asst. ADM:

- Will direct visiting fans to venue appropriate shelter.
- Will secure the officials. (Note: This applies to Friday night games).
- Junior high building administrator will direct visiting fans to the Sophomore Center
- Will open the Sophomore Center to the home fans and secure the home side stands. This applies to Friday night games. Junior High building administrator will direct fans to the Sophomore Center. Since the Sophomore Center is no longer a "Stand Alone" building, an Administrator from the home team will station himself at the doors of the Sophomore Center leading to the Bulldog Lobby to keep fans from entering the remainder of the building.)

Student Resource Officers:

- Will assist to assure visiting and home fans have cleared the stands and are safe.
- Will see that all gate workers go to the appropriate weather shelter.

Comment [i1]: Are we still going to use the Thurnderbolts?

Comment [t2]: Since they have purchased them, and most all of the coaches have them, it can still be one of the accepted forms of monitoring.

The following first aid will be observed for lightning strike victims:

- 1. Survey the scene for safety
- 2. Activate EMS
- 3. If necessary, move lightning victims to a safe shelter
- 4. Evaluate airway, breathing, circulation, and begin CPR, if necessary
- 5. Evaluate and treat for hypothermia, shock, fractures, and/or burns

Public Announcer:

• Will give an announcement that is short and to the point. The announcement will mandate that all individuals leave the stands, move to designated areas, including their cars, move with caution due to slick spots, and abide by the AAA 30 minute rule. Encourage individuals to leave the stadium in an orderly fashion. Each venue / announcer can 'tweak' the announcement to the spectators depending on the type of emergency; however below are four venues which overlap multi-schools and multi-sports.

JARRELL WILLIAMS - BULLDOG STADIUM

"Ladies and gentlemen, due to severe weather in the area, we are going under a weather delay at this time. We ask that you move in an orderly fashion to our designated weather shelter until further notice. The weather shelter is located in the SHS Auxiliary Gym for our Visiting Fans Located at the Southeast corner of the Stadium; if you need assistance event staff will help direct you to shelter. Thank you for your cooperation."

JB HUNT PARK & TYSON PARK

"Ladies and gentlemen, due to severe weather in the area, we are going under a weather delay at this time. We ask that you move in an orderly fashion to your vehicles. A vehicle is not a guarantee safety, yet being in the open or in dugouts IS NOT a safe location. If you do not have a vehicle to seek shelter in, please speak to any of the event staff and they will help direct you to shelter. Thank you for your cooperation."

JOE ROBERTS STADIUM - SWJH

"Ladies and gentlemen, due to severe weather in the area, we are going under a weather delay at this time. We ask that you move in an orderly fashion to our designated weather shelter until further notice. The weather shelter is located in the Auxiliary Gym for our Fans Located on the west side of the stadium through the main parking area; if you need assistance event staff will help direct you to shelter. Thank you for your cooperation."

Comment [t3]: I added an announcement per venue so they announce doesn't have to wing it. I also moved it to the bottom of the section so there was room and not split up the rest of the info.

Jerrell Williams Bulldog Stadium Weather Map



SWJH Joe Roberts Stadium Weather Map



JB Hunt Softball Park Emergency Weather Map



Tyson Sports Complex Emergency Weather Map



Concussion Guidelines:

Adapted from AAA June 7, 2012 Board of Directors statement:

- 1. Every coach and registered volunteer must receive training on concussions once every three years.
- 2. Every athlete and parent must read and sign a "Concussion Fact Sheet for Athletes and Parents".
- 3. Any athlete who is suspected by their school's personnel or school medical staff of having a concussion WILL NOT return to play or practice on the same day.
- 4. Any athlete suspected of having a concussion will be evaluated by an appropriate healthcare professional that day (Neuropsychologist, MD, DO, Advanced Practice Nurse, Certified Athletic Trainer, or Physician Assistant).
 - a. In most cases (No loss of consciousness), a 24 hour window of time is standard for same day evaluation.
- 5. Any athlete with a concussion should be medically cleared by an appropriate health-care professional prior to resuming participation in any practice or competition.
- 6. After medical clearance by a healthcare provider, return to play should follow a <u>minimum</u> 5 day step-wise protocol for delayed return to play based upon the return of any signs or symptoms.
 - a. RTP protocol shall be fashioned individually for each athlete; yet will have its basis grounded from the AAA Graduated RTP Protocol (Found at: <u>http://members.ahsaa.org/public/userfiles/SMAC/Conc__RTP3.pdf</u>)

TO: Arkansas Activities Association Member Schools

FROM: Joey Walters, Ed. D. Deputy Executive Director DATE: August 4, 2010

RE: Concussion Rule

Concussions at all levels of sports have received a great deal of attention in the past few years. The attention has increased even more so over the past year, culminating with the NFL, NCAA, and NFHS testifying before the U. S. Congress about what each organization is doing to protect athletes from concussions. Over the past year and a half the Arkansas Activities Association has taken a proactive stance by providing our member schools with educational resources dealing with concussions. During the 2009-2010 school year, the AAA Sports Medicine Advisory Committee recognized concussion as our Sports Medicine Point of Emphasis. Concussion awareness was included in all required sports rules meetings.

A concussion is a brain injury that results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a blow to the head or body. Most concussed athletes do not lose consciousness, yet they often show other common signs, symptoms and behaviors of concussion. Adolescent athletes are particularly vulnerable to the effects of concussion. Once considered little more than a minor "ding" on the head, it is now understood that a concussion has the potential to result in short- and long-term changes in brain function. Continued participation in any sport following a concussion can lead to worsening concussion symptoms, as well as further injury to the brain – and even death. The AAA strongly believes that student athletes who show signs/symptoms of a concussion should be removed from play.

The NFHS Sports Medicine Advisory Committee (composed of leading doctors, athletic trainers, research specialists and state association staff) developed new guidelines for concussion management of a student exhibiting signs, symptoms or behaviors consistent with a concussion. Those guidelines

will go into all NFHS rules books and will be in effect starting with the 2010 – 2011 school year. They have also been included in all required AAA sports rules meetings. The language will read:

Any athlete who exhibits signs, symptoms, or behaviors consistent with a concussion (i.e. loss of consciousness, headache, dizziness, confusion, or balance problems) shall be immediately removed from the contest and shall not return to play until cleared by an appropriate health-care professional, and completed a RTP stepwise protocol if concussion has been diagnosed.

Sports Medicine staff will conduct full evaluation of athlete to determine referral needs by using a recognized evaluation technique such as ACE (Acute Concussion Evaluation), SCAT2, or any other method outlined under standard industry protocols. (ACE form located on pg 23 of this document).

When the appropriate standard of care is followed by SPS Sports Medicine staff, and the athlete is not responding to the care plan established and is still consistently symptomatic after 5-7 consecutive days; *referral to outside specialist shall be required*.

Behavior or signs observed indicative of a possible concussion:

- Loss of consciousness
- Appears dazed or stunned
- Appears confused
- Forgets plays
- Unsure of game, score or opponent
- Moves clumsily
- Answers questions slowly
- Shows behavior or personality changes
- Cannot recall events prior to or after the injury
- Symptoms reported by a player indicative of a possible concussion:
- Headache
- Nausea
- Balance problems or dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish
- Feeling foggy or groggy
- Concentration or memory problems
- Confusion

The Arkansas Activities Association Board of Directors has adopted the following guidelines for dealing with a concussed student athlete:

1. No athlete should return to play or practice on the same day of a concussion.

2. Any athlete suspected of having a concussion should be evaluated by an appropriate healthcare professional that day (MD, DO, Nurse Practitioner, Certified Athletic Trainer, or Physician Assistant).

 Any athlete with a concussion should be medically cleared by an appropriate healthcare professional prior to resuming participation in any practice or competition.
 After medical clearance, return to play should follow a step-wise protocol with

provisions for delayed return to play based upon the return of any signs or symptoms.

The safety of the student athlete is of paramount concern during any athletic contest. The new rules adopted by the NFHS and the AAA should provide a framework for the effective recognition and management of a concussed student athlete. We encourage every coach and official to view the free new NFHS 20-minute online coaches education course – *Concussion in Sports* – *What You Need to Know*, it is a useful tool for providing concussion education, the course also contains supplemental information from the NFHS and the CDC. The free course is also appropriate for administrators, health-care providers, parents, and students. It can be found at www.nfhslearn.com.

In order for the NFHS rule to be effective coaches, officials, administrators, and health-care professionals must know and recognize their roles. The rule calls for the immediate removal of the participant from the contest. It is important to note that the responsibility of the official is limited to activities that occur on the field, court, or mat. Once the participant has been removed from a contest due to a suspected concussion, the coach or appropriate health-care professional(s) assumes full responsibility for the athlete's further evaluation and safety.

Physician release notes: Chain of Command

At times, the sports medicine staff will refer athletes to outside general practice physicians, orthopedics, and other specialists. When an athlete returns to practice, the athlete must give a copy of the physician's release to the athletic trainer before the athlete will be allowed to practice. Once the athletic trainer receives the note, they will then report to the head coach of the sport the athlete is participating in and any further special circumstances will be addressed immediately. The athletic trainer will keep the note on record for any follow up care, or future information that may be needed in regards to this injury/ illness. The coach may request and receive a copy of the document to keep in athlete file.

Acute Concussion Evaluation (ACE) PHYSICIAN/ CLINICIAN OFFICE VERSION Gerard Giola, PhD¹ & Micky Collins, PhD² ¹ Children's National Medical Center ²University of Pittsburg Medical Center

Patient Name:
DOD:

А.	Injury Characteristics	Date/ Time of Injury	Repor
1.	Injury Description		

ter: ___ Patient ___ Parent ___ Spouse___ Other__

Age:

1a. Is there evidence of a forcible blow to the head (direct or indirect)? __Yes __No __Unknown Yes __No __Unknown 1b. Is there evidence of intracranial injury or skull fracture?

- Ic. Location of Impact: __Frontal __Lft Temporal __Rt Temporal __Lft Parietal __Occipital __Neck __Indirect Force
- 2. Cause: __MVC __Pedestrian-MVC __Fall __Assault __Sports (specify)_____ __ Other__
- 3. Amnesia Before (Retrograde) Are there and events just BEFORE the injury that you/ person has no memory of (even brief)? __Yes __No Duration 4. Amnesia After (Anterograde) Are there and events just AFTER the injury that you/ person has no memory of (even brief)? __Yes __No Duration _Yes _No Duration
- 5. Loss of Consciousness: Did you/ person lose consciousness?

6. EARLY SIGNS: __Appears dazed or stunned __Is confused about events __Answers questions slowly __Repeats Questions __Forgetful (recent info) 7. Seizures: Were seizures observed? __No __Yes Detail__

B. Symptom Check List* Since the injury, has the person experienced any of these symptoms any more than usual today or in the past day? Indicate presence of each symptom (0=No, 1=Yes). *Lovell & Collins, 1998 JHTR

PHYSICAL (10)		COGNITIVE (4)		SLEEP (4)					
Headache	0 1	Feeling mentally foggy 0		Drowsiness	0 1				
Nausea	0 1	Feeling slowed down	0 1	Sleeping less than usual	0 1 N/A				
Vomiting	0 1	Difficulty concentrating	0 1	Sleeping more than usual	0 1 N/A				
Balance problems	0 1	Difficulty remembering	0 1	Trouble falling asleep	0 1 N/A				
Dizziness	0 1	COGNITIVE Total (0-4)		SLEEP Total (0-4)					
Visual problems	0 1	EMOTIONAL (4)		Exertion: Do these symptoms worsen with:					
Fatigue	0 1	Irritability	0 1	Physical ActivityYesNo _					
Sensitivity to light	0 1	Sadness	0 1	Cognitive Activity_YesNo _					
Sensitivity to noise	0 1	More Emotional	0 1	Overall Rating: How different is the person					
Numbness/Tingling	0 1	Nervousness	0 1	acting compared to his/her usual self? (circle)					
PHYSICAL Total (0-10)		EMOTIONAL Total (0-4)							
(Add Physical, Cogni	tive, Em	otion, Sleep totals) (0-22)		Normal 0 1 2 3 4 5 6 Very Di	tterent				

C. Risk Factors for Protracted Recovery (check all that apply)

Concussion History? YN	\checkmark	Headache? YN	V	Developmental History	\checkmark	Pshchiatric History
Previous # 1 2 3 4 5 6+		Prior treatment for headache		Learning disabilities		Anxiety
Longest symptom duration		History of migraine headache		Attention-Deficit/		Depression
DaysWeeksMonthsYears		Personal		Hyperactivity Disorder		Sleep disorder
If multiple concussions, less force		Family		Other developmental		Other Psychiatric
caused reinjury? YesNo				disorder		disorder
List other comorbid medical dissorders	or me	dication useage (e.g. Hyopthyro	id, sei	izures)		
	or me	dication useage (e.g. hyopulyio	u, se	1201E3)		

D	D. Cranial Nerves (N-Normal A- Abnormal)																	
Ν	I A		Ν	А		Ν	А		Ν	Α		Ν	A		Ν	А		
Γ		Olfacto ry			Occulomotor			Trigem inal			Facial			Glossopharangeal			Accessory	
		Optic			Trochlear			Abdcens			Vestibulocochlear			Vagus			Hypoglossal	
E	E. Diagnosis (ICD):																	

F. Follow-Up Action Plan Complete ACE Care Plan and provide copy to patient/family

No Follow-Up Needed - Athlete may be released to the Athletic Trainer for clearance and may continue to progress through the step-wise protocol Physician/ Clinician Office Monitoring: Date of next follow-up Continue progression through step-wise protocol until next appointment _____Do NOT progress through step-wise protocol until next appointment

Full Return to school ____ Shortened Day

____Neuropsychologist _Referral: ___ Neurologist _Neurosurgeon ___Neuropsychological Testing _Emergency Department Athletic Trainer

Signature _

Date

Official Statement from the National Athletic Trainers' Association on Communicable and Infectious Diseases in Secondary School Sports

The National Athletic Trainers' Association (NATA) recommends that health care professionals and participants in secondary school athletics take the proper precautions to prevent the spread of communicable and infectious diseases.

Due to the nature of competitive sports at the high school level, there is increased risk for the spread of infectious diseases, such as impetigo, community acquired methicillin-resistant staphylococcus infection (MRSA) and herpes gladiatorum (a form of herpes virus that causes lesions on the head, neck and shoulders). These diseases are spread by skin-to-skin contact and infected equipment shared by athletes, generally causing lesions of the skin. The following are suggestions from NATA to prevent the spread of infectious and communicable diseases:

- Immediately shower after practice or competition
- Wash all athletic clothing worn during practice or competition daily
- Clean and disinfect gym bags and/or travel bags if the athlete is carrying dirty workout gear home to be washed and then bringing clean gear back to school in the same bag.
- This problem can also be prevented by using disposable bags for practice laundry.
- Wash athletic gear (such as knee or elbow pads) periodically and hang to dry
- Clean and disinfect protective equipment such as helmets, shoulder pads, catcher's equipment and hockey goalie equipment on a regular basis
- Do not share towels or personal hygiene products with others
- All skin lesions should be covered before practice or competition to prevent risk of infection to the wound and transmission of illness to other participants. Only skin infections that have been properly diagnosed and treated may be covered to allow participation of any kind
- All new skin lesions occurring during practice or competition should be properly diagnosed and treated immediately.
- Playing fields should be inspected regularly for animal droppings that could cause bacterial infections of cuts or abrasions
- Athletic lockers should be sanitized between seasons
- Rather than carpeting, locker or dressing rooms should have tile floors that may be cleaned and sanitized
- Weight room equipment, including benches, bars and handles should be cleaned and sanitized daily

EMERGENCY ACTION PLAN:

Har-Ber High School Sports Complex: 300 Jones Road

**If 911 is called for any reason, please contact the ATC, SRO, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- 2. Instruct EMS personnel to "report to <u>Har-Ber High School Sports Complex</u> and meet ______ at _____ as we have an injured ______ in need of
 - medical treatment. The school's address is **300** Jones Road, Springdale, AR 72762." a. HBHS Field House: Located through the front entrance on the southwest
 - a. HBHS Field House: Located through the front entrance on the southwest corner of the campus
 - b. **HBHS Indoor Practice Facility:** Located through the right entrance on the southwest corner of campus behind the field house
 - c. **HBHS Football Stadium:** Located through the left entrance on the southwest corner of campus to the right of the indoor practice facility
 - d. HBHS Track & Field Complex: Located through the right entrance on the southwest corner of the campus behind the indoor practice facility
 - e. **HBHS Baseball Field:** Located through the right entrance on the southwest corner of the campus to the left of the indoor practice facility
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

HBHS Outdoor Sports Complex



Purple Entrance – Primary Entrance for Field House Weight Room, Athletic Training Room, Indoor Facility

Orange Entrance – Secondary for Indoor Facility

Red Entrance – Primary Entrance for Football Field

Green Entrance – Secondary Entrance for Football Field

Blue Entrance – Primary Entrance for Baseball Field and Batting Cages

Yellow Entrance – Primary Entrance for Track & Field Complex

EMERGENCY ACTION PLAN:

Har-Ber High School Indoor Sports Facility: 300 Jones Road

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- 2. Instruct EMS personnel to "report to <u>Har-Ber High School</u> and meet ______ at _____ as we have an injured ______ in need of medical treatment. The
 - school's address is 300 Jones Road, Springdale, AR 72762."
 - a. HBHS Gym: Located at the northwest end of the campus. Use Red Entrance
 - b. **HBHS Cafeteria:** Located on the back side of the main school. Use Purple Entrance
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

HBHS Indoor Sports Facilities



Red Entrance – Primary Entrance for Main Gym, Aux Gym, Athletic Training Room, & Weight Room

Blue Entrance – Secondary Entrance for Main Gym, Aux Gym, Athletic Training Room, & Weight Room

Purple Entrance – Primary Entrance for Cafeteria & Wrestling

EMERGENCY ACTION PLAN:

Springdale High School Bulldog Stadium: 101 S. Pleasant Street

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- Instruct EMS personnel to "report to <u>SHS Jarrell Williams Bulldog Stadium</u> and meet ______ at _____ as we have an injured ______ in need of medical treatment. The school is located at 101 South Pleasant Street, Springdale, AR 72764."
 - a. SHS Jerrell Williams Bulldog Stadium
 - i. **Primary EMS Entrance:** Located through the north gate off of Center St. by the jumbo screen
 - ii. **Secondary EMS Entrance:** Located through the west double gate off of Pleasant Ave. by the concession stand
 - b. **SHS Indoor Practice Facility (Turf Field):** Located through the west double doors off of Pleasant Ave.
 - c. Old Field House (Visitor Locker Rooms): Located through the north gate off of Center St.
 - d. **SHS Auxiliary Gym:** Located through the north gate off of Center St. at back of parking lot.
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

Springdale High School Bulldog Stadium: 101 S. Pleasant Street



- **Blue Entrance** Primary entrance to stadium for EMS
- Purple Entrance Secondary entrance to stadium for EMS
- Green Entrance Entrance to SHS Indoor Practice Facility (Turf Field)
- **Orange Entrance** Entrance to Old Field House (Visitor Locker Rooms)
- Pink Entrance Entrance to SHS Auxiliary Gym

EMERGENCY ACTION PLAN:

Springdale High School Court Athletics: 101 S. Pleasant Street

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- 2. Instruct EMS personnel to "report to <u>SHS High School</u> and meet ______ at _____ as we have an injured ______ in need of medical treatment. The
 - school is located at 101 South Pleasant Street, Springdale, AR 72764."
 - a. SHS Main Gym: Southern most parking lot /building for SHS off Pleasant Street
 - b. **SHS Gym Athletic Training Room:** Southern most parking lot /building for SHS off Pleasant Street
 - c. **SHS Band Practice Field:** Southern most parking lot /building for SHS off Pleasant Street
 - d. **SHS Tennis Court:** Southern most parking lot /building for SHS off Pleasant Street
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

Springdale High School Court Athletics: 101 S. Pleasant Street



Blue Entrance – Entrance to SHS Main Gym
Pink Entrance – Entrance to Gym Athletic Training Room
Purple Entrance – Entrance to SHS Band Practice Field
Orange Entrance – Entrance to Tennis Courts

EMERGENCY ACTION PLAN:

Southwest Junior High School: 1807 Princeton Avenue

** If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- 2. Instruct EMS personnel to "report to <u>Southwest Junior High School</u> and meet ______ at _____ as we have an injured ______ in need of

medical treatment. The school is located at **1807 Princeton Avenue**, **Springdale**, **AR 72762**."

- a. SWJHS Joe Roberts Football/Track Stadium:
 - i. Primary EMS Entrance: Gate at northwest end of stadium.
 - ii. Secondary EMS Entrance: Gate at southwest corner of main parking lot
- b. SWJHS Auxiliary Gym: Located at west end of back parking lot
- c. SWJHS Main Gym: Located at west end of back parking lot.
- d. SWJHS Field House: Located behind southwest main building.
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

SWJH Emergency Entrances



Green Entrance – Primary EMS Entrance for SWJHS Football/Track Stadium Red Entrance – Secondary EMS Entrance for SWJHS Football/Track Stadium Orange Entrance – Primary Main Gym Entrance Blue Entrance – Primary Aux Gym Entrance Black Entrance – Primary Field House Entrance

EMERGENCY ACTION PLAN:

Central Junior High School: 2811 W. Huntsville Avenue

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- 2. Instruct EMS personnel to "report to <u>Central Junior High School</u> and meet ______ at _____ as we have an injured ______ in need of
 - medical treatment. The school is located at **2811 West Huntsville Ave, Springdale**, **AR 72762**."
 - a. CJHS Gym: Located at the southeast corner of the main building.
 - b. HBHS Softball Field: Located at the southeast corner of campus.
 - c. CJHS 8th Football Practice Field: Located at the southwest corner of campus.
 - d. CJHS 9th Football Practice Field: Located on the west side of campus.
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

Central Jr. High EMS Entrances



Blue Entrance – Primary EMS Entrance for Main/Aux Gym Green Entrance – Primary EMS Entrance for Practice Field Orange Entrance – Primary Entrance for Softball Field

EMERGENCY ACTION PLAN:

George Junior High School: 3200 South Powell Street

** If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- 2. Instruct EMS personnel to "report to <u>George Junior High School</u> and meet ______ at _____ as we have an injured ______ in need of
 - medical treatment. The school is located at **3200 South Powell Street**, **Springdale**, **AR 72764**."
 - a. **GJHS Gym/ Aux Gym:** Located on the North Side of the main building, in Center off of Powell Street.
 - b. GJHS Football Practice Field: Located at the Northeast corner of campus off of Powell Street
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.
George Jr. High EMS Entrances



Blue Entrance – Primary EMS Entrance for Main/Aux Gym **Green Entrance** – Primary EMS Entrance for Practice Field

LAKESIDE JR. HIGH:

Lakeside Jr High EAP Map

JB Hunt Park: 1955 Fleming Avenue

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- Instruct EMS personnel to "report to <u>JB Hunt Park</u> and meet ______ at _____ as we have an injured ______ in need of medical treatment. The park is located at 1955 Flowing Ava. Springdala, AB 73763."
 - park is located at **1955 Fleming Ave, Springdale, AR 72762.**" a. **SHS Batting Cages:** Located at southwest corner of the softball park.
 - b. SHS Softball Field: Located at southwest corner of the softball park to the left of the primary entrance.
 - c. **HBHS Softball Field:** Located at southwest corner of the softball park to the right of the primary entrance.
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

JB Hunt Softball Park EMS Entrances



Blue Entrance – Primary EMS Entrance Green Entrance – Secondary EMS Entrance

Tyson Sports Complex: 4303 Watkins Avenue

** If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

1. Call 911

- Instruct EMS personnel to "report to <u>Tyson Sports Complex</u> and meet _________ at ________ as we have an injured _________ in need of medical treatment. The complex is located at 4303 Watkins Ave, Springdale, AR 72762. Please come in through the entrance on South 40th Street."
 - a. HBHS Tennis Courts: Located at the southeast corner of the complex.
 - b. JV Baseball Field: Located at the south corner of the complex next to the tennis courts
 - c. SHS Baseball Field: Located at the southwest corner of the complex.
- d. HBHS Baseball Field: Located at the northwest corner of the complex.
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

Tyson Park EMS Entrance



Blue Entrance – Primary EMS Entrance

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JONES CENTER (POOL):

(Jones Center is also in process of renewing and revamping all policies and procedures. Once theirs is finalized, which has been pushed to end of summer, the facility director will send updated policies we will follow for their facility to the SPS Athletic Dept).

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Springdale Bowl (Bowling): 1303 South Thompson Street

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- Instruct EMS personnel to "report to <u>Springdale Bowl</u> and meet ______ at _____ as we have an injured ______ in need of medical treatment. The complex is located at 1303 South Thompson Street.
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

Springdale Bowl EMS Entrance



Blue Entrance – Primary EMS Entrance

Springdale Country Club (Golf): 508 West Lakeview Drive

**If 911 is called for any reason, please contact the ATC, AD, and Associate AD of the assigned school. This will help with follow up of the athlete.

911 Phone Instructions:

- 1. Call 911
- 2. Instruct EMS personnel to "report to <u>Springdale Country Club</u> and meet ______ at _____ as we have an injured ______ in need of
 - medical treatment. The complex is located at 508 West Lakeview Drive.
- 3. Send Coach or ATS to retrieve AED if needed for cardiac care.
- 4. Provide necessary information to EMS Personnel
 - a. Name, telephone number of caller.
 - b. Number of victims, condition of victims.
 - c. First aid treatment initiated.
 - d. Information as to who is on site. (ATC's, coaches, etc.)
 - e. Other information as needed by the dispatcher.
- 5. Provide emergency care until arrival of EMS personnel.
- 6. When EMS arrives provide the following information.
 - a. Method of injury
 - b. Vital signs
 - c. Treatment rendered
 - d. Medical history
 - e. Assist EMS with emergency care as needed
- 7. Notification of different staff and parents**
 - a. Coach if not present
 - b. Parent notified by ATC or Coach
 - c. School Administrator (SRO, AD, Associate AD, Principal)
- 8. If parent is not available, then a representative of the school will travel with the athlete to the hospital. This could consist of the following: ATC, Coach, or ADM.
- 9. Completion of injury report by ATC.

Springdale Country Club EMS Entrance



Blue Entrance – Primary EMS Entrance

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