

Emergency Action Plan Annapolis High School Athletics

2700 Riva Road Annapolis, MD 21401

In case of an emergency, personnel responsibilities, locations of emergency equipment, and other emergency information such as 911 call instructions, addresses/directions to the venue, and a chain of command with important phone numbers have been listed here.

Emergency Action Plan

Athletic Trainer: Kelsey Catterton, MS, LAT, ATC (301) 704-0791

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Purpose of an Emergency Action Plan (EAP)

The purpose of an EAP is to provide the best quality of care in a timely manner, by guiding athletic personnel, emergency medical services, and campus security (if available) to emergency situations when they occur. It is essential to have a developed EAP that identifies each member of the emergency response team, those who need to be contacted, the emergency equipment available, and directions to where EMS needs to go so things run smoothly. The EAP will be reviewed with the coaches at each season's Coaches Meeting.

Athletic Training Services

Athletic training is practiced by certified athletic trainers. Certified Athletic Trainers are highly trained health care professionals who collaborate with physicians to optimize activity and participation of student-athletes. Athletic training encompasses the prevention, diagnosis, and intervention of emergency, acute, and chronic medical conditions involving impairment, functional limitations, and disabilities. Those who want to become certified athletic trainers must earn a degree from an accredited athletic training curriculum. Accredited programs include formal instruction in areas such as: injury/illness prevention, first aid and emergency care, assessment of injury/illness, human anatomy and physiology, therapeutic modalities, and nutrition. Classroom learning is enhanced through clinical education experiences. More than 70 percent of certified athletic trainers hold at least a master's degree.

Role of the Certified Athletic Trainer: The Certified Athletic Trainer should observe the surrounding area to look for potential injury-causing situations that can be prevented. Certified athletic trainers are available during practice/competition times, designated treatment times, or by appointment. Priority for coverage goes to the in-season sport. Games will be given priority over practices. On practice only or multiple contest days, the priority will be given to the highest risk sport. The athletic trainer travels with the football team to all away contests. If there is an away football game and there is a game of another sport at home, the athletic trainer will communicate with the host football athletic trainer to assure adequate coverage for the away football game, until the certified athletic trainer is able to be in attendance at the away football game. Coaches must give advance notice (24 hours while school is in session, 2 weeks prior to holidays) in order to guarantee coverage if practice schedule change.

Emergency Personnel

NATA Certified and Maryland Licensed Athletic Trainer is on site for practices and competitions. EMS is available by calling 911. The athletic training staff is certified by the American Red Cross in CPR/AED. The Athletic Trainer must be aware of any emergency that has occurred within the athletic department and its members.

Chain of Command for Emergency Situations

- A. Team Physician (if present): Dr. Benjamin Petre
- B. Certified Athletic Trainer: Kelsey Catterton
- C. Coaching Staff
- D. Director of Athletics: Peter Alvanos
- E. Assistant Director of Athletics: Caroline Cochran
- F. Faculty Director: Doug Schreiber

If there are many events going on, an ATC will not always be able to be the first one to respond to a scene. Therefore, the chain of command is to be followed until a higher person on the chain of command can step in.

Coaches CPR/AED and First Aid Training: All coaches should have CPR/AED and First Aid Training. The Athletic Director is responsible to confirm that all coaches have current CPR/AED and First Aid Certifications prior to the start of the sports season in conjunction with AACPS.

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AD Initials:

Emergency Communication: Communication via cell phone(s). Phones will be on site with the Athletic Trainer during practices and events. Local EMS dial: 911.

Certified Athletic Trainer	Kelsey Catterton, MS, LAT, ATC	(301) 704-0791	kelsey.catterton@atipt.com
Athletic Director	Peter Alvanos	(315) 316-6239	palvanos@aacps.org
Assistant Athletic Director	Caroline Cochran	(410) 713-0922	ccochran@aacps.org
AACPS County Coordinator	Clayton Culp	(410) 222-5462	cculp@aacps.org
Team Physician - Orthopedic and Sports Medicine Center	Dr. Benjamin Petre	(410) 268-8862	bpetre@osmc.net
ATI Physical Therapy Clinic - Annapolis	Kelly Broussard	(443) 782-7243	kelly.broussard@atipt.com
Concussion Management	Righttime HeadFirst	1 (855) 748-4868	headfirst@myrighttime.com

Catastrophic Event: If death, permanent disability, or other catastrophic accident occurs, a chain of individuals should be contacted by the staff athletic trainer at a home event or by the head coach at an away event in the following order: the director of athletics, head coach of that sport (if not present), and the parents or guardians noted as emergency contacts in the athlete's medical information.

Emergency Equipment

Automatic External Defilation (AED) devices can be found in the following locations:

- With the Athletic Trainer on the back of the gator
- In the hallway outside the Gym
- Main Office
- Health Room

AED Policy: The AED can be administered by anyone trained in its use by the American Red Cross, American Heart Association, or higher certifications.

Using the AED: After initial check of the ABC's and a cardiac emergency is determined, the EMS system should be notified and the AED can then be used.

- A certified individual performs CPR until the AED is prepared and ready to use. Shave any chest hair if needed.
- Apply the pads as directed and follow the prompts on the AED.
- Another individual should be on crowd control and having everyone keep back, while another should be waiting
 for EMS to arrive and directing them to the location of the person in cardiac arrest.

Emergency Procedure at Home Competitions or Practices

Once emergency personnel is contacted, the athletic trainer remains with the athlete until transportation is under control or advanced medical help arrives on the scene. Conditions and injuries in which this would take effect include

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potential serious head injuries, potential spinal cord injury, vertebral fractures and dislocations, heat stroke victims, cardiac emergencies, any unconscious athlete, any athlete with convulsions, serious fractures, or any serious unstable conditions. The athlete should be accompanied by his/her parent or a member of the administrative/coaching staff if athlete is transported by ambulance. The certified athletic trainer should not be responsible for accompanying an injured athlete on an ambulance.

Emergency Action Plans for Home Events:

- 1. The certified athletic trainer, (if onsite) should be the first to evaluate the injured athlete.
- 2. If the injury is deemed serious, the athletic trainer's "B" person (coach/athletics staff) should activate EMS using a cell phone. The athletic trainer will use a hand signal (forearms crossed in an "X") to let the "B" person know that EMS needs to be activated. That individual must know how to direct emergency personnel to the injury site.
- 3. The athletic trainer's "C" person will be responsible to retrieve emergency equipment such as AED, splints, medical kit when athletic trainer gives hand signal.
- 4. If a spinal or head injury is ruled out, proceed to the secondary survey and further evaluation techniques.
- 5. The "B" person who called EMS should confirm details with the athletic trainer and direct game attendants or other administrative persons to wait along the entrance to direct EMS. These individuals will also be responsible for opening any gates or doors necessary to give the EMS rescue squad access to the field or court. Coaches and school administrators can and should be used as crowd control, ensuring all teams and observers are on designated sidelines and providing clear lanes of access for emergency personnel.
- 6. Athletic trainers present should be prepared to treat for shock or changes in the injured athlete's condition.
- 7. The game attendants or other administrative persons waiting for EMS should lead them to the site of injury. At that point, the athletic trainer can give emergency personnel an update on the situation.

Transportation: Athletes can be taken to hospital by ambulance for emergency and catastrophic injuries or illnesses. If the athlete is underage and parents are not there, parents are to be notified of the situation and what hospital he/she was sent to. A coach will accompany the athlete to the hospital. If the students' parents are present, they may accompany the athlete. The closest hospital to the school is: Anne Arundel Medical Center, located at 2001 Medical Parkway, Annapolis, MD 21401.

EMS Access Points: When directing EMS to an injury location, they can either enter the school at Fred Stauffer Lane, by the pool, or at Fred Stauffer Lane, at the light. EMS should enter the school at Fred Stauffer Lane at the light when responding to an injury at: Stadium/Turf 1, Turf 2, Bermuda 2 & 3, Turf 3 and Bermuda 1. EMS should enter the school at Fred Stauffer Lane by the pool when responding to an injury at: Baseball Field, Softball Field, Tennis Courts, Gymnasium, Auxiliary Gymnasium, or Weight Room.

Assumption of Risks: Student athletes should be warned that participation in sports could involve injury of some type to either the athlete or a fellow student athlete. Special medical waivers are required based on specific medical conditions.

Pre-Participation Medical Evaluations: Students must have a physical on file prior to the start of his/her season. The athletic director will verify this prior to approving the student to participate in athletics.

Return to Play Clearance: Significant illnesses or injuries, including concussion, must be evaluated by a physician or physician's designated representative. Those are the only ones who can grant medical clearance. Consultation of other medical professionals will be considered when appropriate.

Health and Safety Guidelines

Anne Arundel County Public Schools has created specific policies and procedures related to Thunder & Lightning, Heat Guidelines and Concussions. The Certified Athletic Trainer will follow all aspects of these policies as outlined below.

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Additionally, these policies and procedures can be found in the Anne Arundel County Public Schools 2019-2020 Athletic Handbook. (Health and Safety Guidelines Included in Appendix A)

I. Inclement Weather Policy

General Policies: In the case of inclement weather (ex: Thunderstorms/Lightning, Hail, Tornado), it will be under the direct discretion of the on-site Athletic Director, Athletic Trainer and/or Head Coach to determine if the practice/game fields should be evacuated. If someone is struck by lightning, active the Emergency Action Plan. A person struck by lightning does not carry an electrical charge; immediately initiate the EAP and begin the primary survey. If possible, move victim to a safe location. Avoid using the telephone except in emergency situations. People have been struck by lightning while using a land-line phone. A cellular phone or a portable phone is a safe alternative to land-line phones, if the person and the antenna are located within a safe structure, and if all other precautions are followed.

Thunder/Lightning Information and Guidelines:

- The National Weather Service has stated that lightning can strike up to a distance of 10 miles with storms traveling at a speed exceeding 50 miles per hour. However, thunder can only be heard within a distance of eight miles. Therefore, if you hear thunder and/or see lightning, you are in immediate danger and should seek protective shelter in an indoor facility at once. An indoor facility is recommended as the safest protective shelter. However, if an indoor facility is not available, an automobile is a fairly safe alternative. If neither of these is available, the following guidelines are recommended. Avoid standing under large trees and telephone poles. If the only alternative is a tree, choose a small tree in a wooded area that is not on a hill. As a last alternative, find a ravine or valley. In all instances outdoors, assume the crouched position. Avoid standing water and metal objects at all times (i.e. steering wheel, metal bleachers, cleats, umbrellas, etc.).
- The most dangerous storms give little or no warning; thunder and lightning are not heard or seen. Up to 40% of all lightning is not accompanied by thunder and 20-40% of thunder cannot be heard due to atmospheric disturbances, thus the term "silent killer".
- The National Weather Service also recommends that 30 minutes should pass after the last sound of thunder is heard and/or a lightning strike is seen prior to resuming play. This is to allow sufficient time for the storm to pass and move out of lightning strike range.
- The intent of these guidelines is to ensure safety in situations where thunder/lightning occur during any athletic activity.

School personnel are to follow these expectations:

- If thunder and/or lightning can be heard and/or seen, immediately stop the activity and seek a safe shelter. A
 safe shelter location is any substantial frequently inhabited building. The building should have four solid walls
 (not a dugout), electrical and telephone wiring, as well as plumbing, all which aid in grounding a structure.
- 2. The secondary choice for a safer location from the lightning hazard is a fully enclosed vehicle with a metal roof and the windows completely closed. It is important to not touch any part of the metal framework of the vehicle while inside it during an ongoing thunderstorm.
- 3. In situations where thunder and/or lightning may or may not be present, yet you feel your hair stand on end and skin tingle, immediately assume the following crouched position: drop to your knees, place your hands/arms on your legs, and lower your head. Do not lie flat.
- 4. In the event that either situation should occur, allow thirty minutes to pass after the last sound of thunder and/or lightning strike before resuming play.
 - a. In situations where multiple sounds of thunder and/or lightning strikes occur, play must resume within 1 hour after the initial suspension of the event (otherwise the event will be concluded/postponed in accordance with sports-specific rulebooks).
 - b. If play resumes and is suspended for a second time, school personnel may opt to not wait the thirty minutes and conclude/postpone the event.
 - c. Events will not start or restart after 8pm.

Event Procedures:

- Prior to Competition: A member of the Athletic Staff will greet the officials, explain that we have means to
 monitor lightning, and offer to notify the officials during the game if there is imminent danger from the
 lightning.
- 2. Announcement of Suspension of Activity: Once it is determined that there is danger of a lightning strike, the Athletic Director and/or Head Coach will notify the Competition Officials and subsequently summon athletes from the playing field or court.
- 3. Evacuation of the Playing Field: Immediately following the announcement of suspension of activity all athletes, coaches, officials and Athletic Support Personnel are to evacuate to an enclosed grounded structure (Field House/Gymnasium).
 - a. In response to COVID-19, the Main Gym, Cafeteria, Auxiliary Gym, and Auditorium will be used as designated spaces to shelter in the case of inclement weather. This is to allow proper social distancing among individuals. While indoors, all individuals must follow AACPS COVID-19 guidelines.
- 4. Evacuation of the Stands: Once it has been determined to suspend competition, a member of the Athletic Staff will announce via the PA system something like: "May I have your attention. We have been notified of approaching inclement weather. Activity will cease until we have determined it is safe and the risk of lightning is diminished. We advise you to seek appropriate shelter at the following areas: School Gymnasium/Lobby. Though protection from lightning is not guaranteed, you may seek shelter in an automobile. Thank you for your cooperation."
- 5. Resumption of Activity: Activity may resume once the athletic director or athletic trainer gives permission thirty (30) minutes AFTER the last sound of thunder or sight of lightning. Every sound of thunder or strike of lightning requires the thirty (30) minutes to start over.
- 6. Away Events: Apply the home/facility EAP or modify the Annapolis High School guidelines that apply accordingly.
- 7. Lightning Detection Procedures for Non-Supervised Activities: In the case that student-athletes are using the facilities in the off season or outside of regular practice hours, we encourage student-athletes to cease outside athletic participation at the first sight/sound of lightning/thunder.

II. Heat Guidelines

- The intent of these guidelines is to minimize injury and heat-related illnesses while enhancing the player's health, performance and well-being. Coaches, student-athletes and parents are reminded to always err on the side of caution. Schools are encouraged to educate student-athletes and parents regarding the risks of dehydration on health and physical performance. Schools should work with individual student-athletes to develop fluid-replacement strategies that optimize hydration status before, during and after competition /practice.
- Each year high school student-athletes experience serious injury and even death as a result of heat-related illnesses. It has become a major concern in that the number of deaths over the last 15 years has remained constant. That statistic becomes more alarming given that heat-related illness and death are almost entirely preventable. The need to dramatically increase awareness of the issue, recognize the symptoms of heat illness and treatment of suspected cases has become a primary consideration for early season practice routines.
- These guidelines are recommended for fall practice where the greatest risks of heat-related illnesses occur.
 However, student-athletes practicing indoors, in non-air conditioned or poorly ventilated gyms are also
 susceptible as are student-athletes practicing for spring sports. The guidelines are also recommended for winter
 and spring sports regarding the duration and intensity of practices. AACPS will evaluate whether equipment
 restrictions are necessary for winter and spring sports.

	Dehydration	Heat Cramps	Heat Exhaustion	Exertional Heat Stroke
Signs &	Dry mouth	Intense pain	Dehydration	Nausea
Symptoms	Thirst	Persistent muscle contrac	Loss	Vomiting or diarrhea
	Being irritable or cranky	tions that continue	of coordination, dizziness	Headache
	Headache	during and after exercise	ļ	Dizziness
	Seeming bored		or fainting	Hot and wet or dry skin
	or disinterested		Profuse sweating	Increased heart
-	Dizziness		Pale skin	rate, decreased blood
	Cramps		Headache	pressure or fast
	Excessive fatigue		Nausea,	breathing
	, in the second		vomiting or diarrhea	Dehydration
			Stomach/intestinal	Combativeness
			cramps or persistent	
			muscle cramps	
Treatments	Move child to a shaded	The child should be given	Move to air conditioned	Call emergency medical
	or air-conditioned area.	a sports drink to help	or shaded area.	services for immediate
	Give him/her water or	replace	Remove extra clothing	transport.
	sport drinks to drink.	fluid and sodium losses.	and equipment.	Cool child while waiting
		Light stretching,	Cool with cold water, fan,	(i.e., cold towels, fan)
		relaxation, and massage	or cold towels.	over as much of body as
		of cramped muscle.	Lie down with legs above	possible.
			heart level.	Remove extra clothing or
			Drink chilled water or	equipment.
			sports drink.	
			Seek medical attention if	
			little or no improvement	
			with treatment.	

III. Game and Practice Restrictions Due to Heat

- AACPS central office staff may issue county-wide heat restrictions in accordance with the following heat index chart. Any such county-wide restriction will be based on the National Oceanographic and Atmospheric Administration (NOAA) website/application utilizing the 21401-zip code for Annapolis, MD and sent to athletic administrators for consistent implementation at all school sites.
- Athletic directors, in consultation with trainers and coaches, will monitor the heat index at their school site. Any
 school may implement additional, more stringent guidelines above and beyond what the county issues if the
 circumstances at their facility warrants such additional precautions. Coaches are to follow specific guidelines
 indicated for each code.
- Measurements taken at neighboring or adjacent schools/facilities/fields, and/or with various applications may
 result in different heat indexes. Specifically, turf fields tend to have a higher heat index than grass fields and
 shaded fields or those prone to cross winds tend to have lower heat index than fields without those factors. For
 consistency within school staffs, it is expected that each school select and use one website/application for all
 coaches, trainers, and administrators at that site.

If the temperature is below 84°F, Heat Index calculations are not required.

À	Code	Heat Index	Restrictions & Accommodations
	7.54	Above 104	Stop all entside activity in practice and/or play. Stop all reside activity if air conditioning is unavailable.
	Orange	100-104 (socked deep 32 selector)	All of restrictions listed below, plus: After aniform by removing items—if possible and permissible by rules. Allow athletes to change into dry t shirts and shorts at defined intervals. Reduce time of outside activity.
	Yellow	95–99 (rectact every 30 minutes)	All of restrictions listed below, place: Provide mandatory 10 -minute water breaks every 30 minutes to allow hydration as a group. Reduce the time of the outside activity. Consider postponing practice until lister in the day. Recover helimets and other equipment when attiete is not directly involved in the competition, drift, or practice and it is not otherwise required by rule.
	2	Under 95 (rechect coay 30 minutes)	Have water well-bits for attractes to take in as much as they desire. Provide optional 1D minute water breaks every 30 minutes to allow hydration as a group. Provide towels with ice in cool attractes as recoled. Watch/monitor attractes for necessary action.

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Temperature Monitoring: During the warmer months, the athletic trainer will measure the heat index using a Heat Stress WBGT Meter before the start of all athletic events. The athletic trainer will notify coaches and athletic director of findings and remind them of the proper restrictions and accommodations.

Managing Heat Illness: In the event the athletic trainer is unavailable, all athletics staff should be able to perform the following treatment for the appropriate level of heat illness the student-athlete is experiencing.

- Heat Cramps
 - The student-athlete should be given a sports drink to help replace fluid and sodium
 - Light stretching, relaxation and massage of cramped muscle
- Heat Exhaustion
 - Move to air conditioned or shaded area
 - o Remove extra clothing and equipment
 - Cool with cold water, fan or cold towels
 - Lie down with legs above heart level
 - Drink chilled water or sports drink
 - Seek medical attention if little or no improvement with treatment
- Heat Stroke
 - o Call emergency medical services for immediate transport
 - Cool student-athlete while waiting (i.e. cold towels, fan) over as much of body as possible, if tarp or dunk pool is available, cold water submersion is ideal treatment for heat stroke until core body temperature reaches 102° F

- Athletic trainer will use a rectal thermometer to measure core body temperature. If rectal thermometer is unavailable, use calculation that core body temperature drops by 1 °F every 3 minutes of coldwater submersion.
- o Remove extra clothing or equipment

IV. Game and Practice Restrictions Due to Other Weather Events

Central Office staff may issue practice/contest restrictions in cases of extreme weather as identified and forecasted by the National Weather Service or other weather agencies. This includes restrictions for wind chill, high winds, storms, earthquakes, and other weather events. Every attempt will be made to communicate county-wide restrictions in as timely a manner as possible. However, school staff may, at any time, act unilaterally and restrict athletic activities on their campus if they believe the health and safety of their student-athletes is at risk.

V. Concussion Information

• **Definition:** A type of traumatic brain injury causing an immediate and, usually short-lived change in mental status or an alternation of normal consciousness resulting from a bump, blow, jolt, shaking or spinning of the head or body.

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.
- O An injured student-athlete suspected of having a concussion should be immediately removed from the practice or contest and evaluated by the appropriate qualified person. However, the injured student-athlete may not re-enter the practice or contest, nor participate in subsequent practices or contests until cleared by an appropriate medical professional. For more information, please see our Head Injury Guidelines at www.aacps.org/athletics. Medical Clearance for Student-Athlete Suspected Head Injury Form included in Appendix B

Concussion Signs and Symptoms

- o Amnesia
- Loss of orientation
- Balance problems
- o Memory problems
- o "Bell rung"
- o Nausea
- Dazed or confused
- Nervousness
- o **Depression**
- Numbness or tingling
- Double vision
- o Drowsiness
- o Poor concentration
- o Easily distracted
- o Personality changes
- "Glassy Eyed"
- Excessive sleep
- o Ringing in the ears
- Fatigue
- Sadness

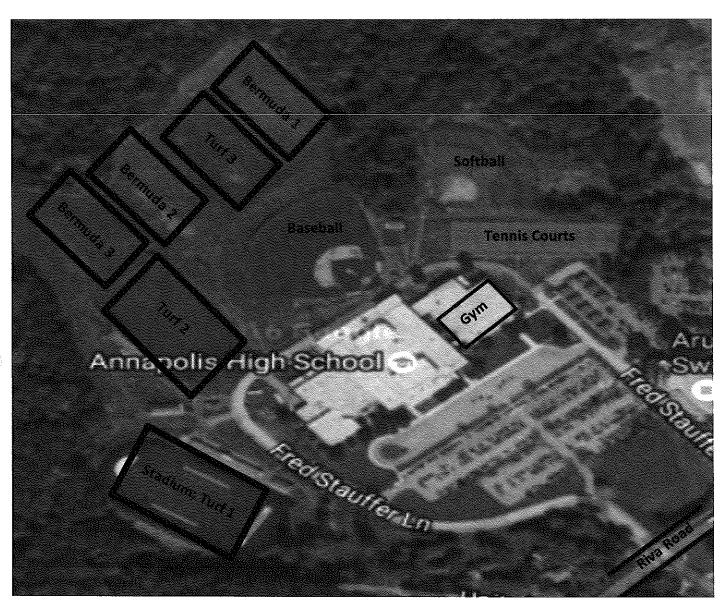
- Feeling "in a fog"
- o Seeing "stars"
- o Feeling "slowed down"
- Sensitivity to light
- o Headache
- o Sluggishness
- Inappropriate emotions
- Change in personality
- o Sensitivity to noise
- o Irritability
- o Sleep disturbance
- Loss of consciousness
- o Vacant stare
- Vomiting
- Referral: All student-athletes who get "rocked" or "dinged" and exhibit any of these signs or symptoms should
 be referred immediately to the athletic trainer and/or physician. If a question exists and no medical personnel
 are available, emergency transport (ambulance) the student-athlete to a hospital.
- Return to Play
 - Return to play should occur in gradual steps beginning with light aerobic exercise only to increase your heart rate (i.e. stationary cycle); moving to increasing your heart rate with movement (i.e. running); then adding controlled contact if appropriate; and finally return to sports competition.
 - Pay careful attention to your symptoms and your thinking and concentration skills at each stage or activity. After completion of each step without recurrence of symptoms, you can move to the next level of activity the next day. Move to the next level of activity only if you do not experience any symptoms at the present level. If your symptoms return, let your health care provider know, return to the first level and restart the program gradually.
 - Day 1: Low levels of physical activity include walking, light jogging, light stationary biking, and light weightlifting.
 - Day 2: Moderate levels of physical activity with body/head movement. This includes moderate jogging, brief running, moderate intensity on the stationary cycle, and moderate intensity weightlifting.
 - Day 3: Heavy non-contact physical activity. This includes sprinting/running, high intensity stationary cycling, completing the regular lifting routine, and noncontact sport specific drills.
 - Day 4: Sports Specific practice
 - Day 5: Full contact in a controlled drill or practice.
 - Day 6: Return to competition

SECTION 8: AACPS SUSPECTED HEAD INJURY PROCEDURAL FLOWCHART School Day School nurse treats student athlese. After School Coach/ATC suspects head eighty and removes student addete from competition/practice. Marson modifiers guarents, athletic director (AD), and Atti evaluates student athlete according to AAT's proceedures. existent eliber transci (AIC). Maires normh rentifications aind renchical cheanisme forms to parents, blarse continets generals via phone, test, en opeat. ATC expolarity provingly greated an northestly and written with the northestion and modifical close are in fourne. Coach/ATC notifies AD, AD resides Coordinator of Atlifetics and resise. Student athlete is evaluated by a License Health Care Provider (LHCP) for concuston despects. Student address policies Medical Characters for Supported Head beautingery from to school runs. Att. and AD Yes ---- Concussion % fixed course immediately restative all appropriate wheel perfectioned. No-Concussion HECP clears student adileter for eneroidistic ortion to play. Nurse & school courseles prepare as adensis accommodistions (when appropriate) AIC evaluates studies athlete before remarking remarks athlete activity. and the same Studioni-athloso appearan egenpatees from und transfero tooked pil appearantety. AIC observes siejess and symptoms All often venture symptoms Student athlete has a hiller op and e receibbed by an LHCP * **Not (leared** Cleared * Mode at character to begin tradual Return to Play (NTP) is dissonmented to all appropriate personnel. All notables counts, passen and student albiers commoning angul & symptoms observed. Ali misses constrail and the sinders attricts esteries to recreal Att pout or a ranch imaginarise due to actual ETF Fragisies as Hivity. Student abldete must be re-evaluated by a HEP.

MIAMIN 2019 MIAMINE HASSING

<u>Appendix</u>

Map



Stadium/Turf 1 Emergency Action Plan

Emergency Personnel:

Team Physician and Police Officers (only at football games), Athletic Trainer, Athletic Director, and Coaches. *All individuals with lower credentials should yield to those with more appropriate training.* The athletic director and coaches should have keys to the gates for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. Police Officers can activate EMS. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Team Physician's Medical Kit (only at football games), Athletic Trainer's Medical Kit, Splint Bag, and AED on the back of the Athletic Trainer's gator. An alternate AED is located in the Main Office and Health Room.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to make sure stadium gate is unlocked and to guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter at Fred Stauffer Lane at the light on Riva Road and follow the road back to the stadium gate on the left.

Safe Shelter:

In the event of inclement weather, the teams will proceed to the locker rooms in the field house. All staff and officials will proceed to the cafeteria. All fans will proceed to their cars.

Turf 2 Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED on the back of the Athletic Trainer's gator. An alternate AED is located in the Main Office and Health Room.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - Designate an individual to make sure the gate is unlocked and to guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter at Fred Stauffer Lane at the light on Riva Road and follow the road back. Turn left into the gate past the stadium and follow the road up.

Safe Shelter:

In the event of inclement weather, the teams will proceed to the locker rooms in the field house. All staff and officials will proceed to the cafeteria. All fans will proceed to their cars.

Bermuda 2 & 3 Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED on the back of the Athletic Trainer's gator. An alternate AED is located in the Main Office and Health Room.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to make sure the gates are unlocked and to guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter at Fred Stauffer Lane at the light on Riva Road and follow the road back. Turn left into the gate between Turf 2 and the Baseball Field. Follow the road straight back to the fenced-in fields.

Safe Shelter:

In the event of inclement weather, the teams will proceed to the locker rooms in the field house. All staff and officials will proceed to the cafeteria. All fans will proceed to their cars.

Turf 3 & Bermuda 1 Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED on the back of the Athletic Trainer's gator. An alternate AED is located in the hallway outside the Gym.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to make sure the gate is unlocked and to guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter at Fred Stauffer Lane at the light on Riva Road and follow the road back. Turn left into the gate between Turf 2 and the Baseball Field. Follow the road straight back to the fields on the right.

Safe Shelter:

Baseball Field Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED on the back of the Athletic Trainer's gator. An alternate AED is located in the hallway outside the Gym.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to flag down and guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter Fred Stauffer Lane by the pool and follow the road straight back to the Baseball Field on the right.

Safe Shelter:

Softball Field Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED on the back of the Athletic Trainer's gator. An alternate AED is located in the hallway outside the Gym.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to flag down and guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter Fred Stauffer Lane by the pool and follow the road straight back to the Softball Field on the right.

Safe Shelter:

Tennis Courts Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED on the back of the Athletic Trainer's gator. An alternate AED is located in the hallway outside the Gym.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to flag down and guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter Fred Stauffer Lane by the pool and follow the road straight back to the Tennis Courts on the right.

Safe Shelter:

Gymnasium Emergency Action Plan

Emergency Personnel:

Police Officers (only at basketball games), Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates/doors for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. Police Officers can activate EMS. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED in the ice/laundry room and at all home events with the Athletic Trainer. An alternate AED is located in the hallway outside the Gym.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to flag down and guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter Fred Stauffer Lane by the pool and turn left into the bus lanes in front of the Gymnasium.

Auxiliary Gymnasium Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates/doors for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED in the ice/laundry room and at all home events with the Athletic Trainer. An alternate AED is located in the hallway outside the Gym.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to flag down and guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter Fred Stauffer Lane by the pool and turn left into the bus lanes in front of the Gymnasium.

Weight Room Emergency Action Plan

Emergency Personnel:

Athletic Trainer, Athletic Director, and Coaches. All individuals with lower credentials should yield to those with more appropriate training. The athletic director and coaches should have keys to the gates/doors for EMS access.

Emergency Communication:

911 from a school line or reliable cell phone. The Athletic Trainer, Kelsey Catterton, can be reached at (301) 704-0791.

Emergency Equipment:

Athletic Trainer's Medical Kit, Splint Bag, and AED in the ice/laundry room and at all home events with the Athletic Trainer. An alternate AED is located in the hallway outside the Gym.

Role of First Responders:

- 1. Immediate care of the patient.
- 2. Activation of emergency medical services (EMS). Provide:
 - a. Name, location, and telephone of caller
 - b. Nature of emergency
 - c. Number of patients
 - d. Condition of patient(s)
 - e. Any treatment administered by first responders
 - f. Venue-specific directions
 - g. Other information as requested by dispatcher
- 3. Emergency Equipment retrieval.
- 4. Direction of EMS to scene:
 - a. Designate an individual to flag down and guide EMS to the patient.
 - b. Designate an individual for scene control.

Venue Directions:

Enter Fred Stauffer Lane by the pool and turn left into the bus lanes in front of the Gymnasium.