



# Emergency Action Plan Southern High School Athletics Program 2022-2023

4400 Solomon's Island Rd.  
Harwood, Maryland 20776

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 – Southern High School

---

## Table of Contents

### Contents

Introduction .....	3
Emergency Plan Personnel.....	4
Roles of the First Responders .....	5
Emergency Communication.....	7
Role of the Certified Athletic Trainer .....	12
Health and Safety Guidelines.....	17
COVID Guidelines.....	25
Appendix.....	26

# Emergency Action Plan – Southern High School

---

## Introduction

Emergency situations may arise at any time during athletic events. Quick and efficient action must be taken in order to provide the best possible care to the athlete of the emergency and/or life-threatening conditions. An **emergency** is the need for Emergency Medical Services (EMS) to give further medical attention to and/or transport an athlete to the hospital. The development and implementation of the emergency action plan (EAP) will help ensure that the best care will be provided.

The EAP has been categorized as a written document that defines the standard of care required during an emergency. 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.

The following procedures are to be implemented in the event of an emergency while on the campus of Southern High School. It is important in these situations that coordination between the athletic trainer, coaches, administrators and student responders be effective. All coaches should be familiar with this document and their role and responsibility in an emergency. Any questions should be directed to the athletic trainer. In the absence of a licensed athletic trainer, questions are to be directed to the school administration.

***This guide is intended to delineate roles and outline the protocol to be followed should an emergency occur.***

## Conditions of athletes that require activation of 911:

- an athlete is not breathing/ has no pulse
- an athlete has lost consciousness
- it is suspected that an athlete may have a neck or back injury
- an athlete has an open fracture (bone has punctured through the skin)
- severe heat exhaustion or suspected heat stroke
- severe bleeding that cannot be stopped

# Emergency Action Plan – Southern High School

---

## Emergency Plan Personnel

The first responder in an emergency situation during an athletic practice or competition is typically a member of the sports medicine staff, such as a certified athletic trainer. However, the first responder may also be a coach or another member of the school personnel.

Certification in cardiopulmonary resuscitation (CPR), first aid, automated external defibrillator (AED), emergency action plan review, and prevention of disease transmission, and emergency plan review is recommended for all athletics personnel associated with practices, competitions, skills instructions, and strength and conditioning. **All coaches are required to have CPR, First Aid, AED, and concussion management training certifications per NFHS and AACPS regulations.**

During events away from the Southern High School campus, the host school or organization's emergency plan should be followed if available. **If not available, follow this EAP.** The appropriate athletic training, medical, and administrative staff for Southern High School should be notified of a medical emergency that occurred off campus as soon as is feasible.

## Chain of Command for Emergency Situations

- Team Physician/Orthopedic (Football games, Lacrosse games; if present)
- Certified Athletic Trainer
- Coaches
- Athletic Director/Assistant Athletic Director
- Administrators
- Security

The highest person in the chain of command who is present at a scene will be the designated person in charge, or leader. The Certified Athletic Trainer is present at most of practices, however, not all. In these situations, the Head Coach will act as the First Responder and fulfill the role of immediate care. The first responder is responsible for deciding if to call 911, instructing others how they may be of help and will be the person who stays with the athlete until EMS arrives. In the event of an emergency, the Certified Athletic Trainer or First Responder will dictate all other duties to those assisting. Each coach is instructed to notify the Certified Athletic Trainer of any situation after its occurrence.

# Emergency Action Plan – Southern High School

---

## Roles of the First Responders

The emergency team may consist of a number of healthcare providers including physicians, emergency medical technicians (EMT), certified athletic trainers (ATC) and School Nurses. The emergency team may also consist of school personnel such as athletic directors (AD), Assistant Principals, coaches, team managers, and possibly bystanders. Roles of these individuals within the emergency team may vary depending on various factors such as the number of members of the team, the athletic venue itself, or the preference of the head athletic trainer.

**The four basic roles within the emergency team are:**

- 1. Establish scene safety and immediate care of the athlete:**
  - a. This should be provided by the most qualified individual on the medical team (the first individual in the chain of command).
- 2. Activation of Emergency Medical Services:**
  - a. This may be necessary in situations where emergency transportation is not already present at the sporting event. Time is the most critical factor and this may be done by anyone on the team.
- 3. Equipment Retrieval:**
  - a. May be done by anyone on the emergency team who is familiar with the types and locations of the specific equipment needed.
- 4. Direction of EMS to the scene:**
  - a. One of the members of the team should be in charge of meeting the emergency personnel as they arrive at the site. This person should have keys to locked gates/doors.

## Activating Emergency Medical Services

Call 9-1-1

Provide information

- Name, address, telephone number of caller
- Nature of the emergency (medical or non-medical)\*
- Number of athletes
- Condition of athlete(s)
- First aid treatment initiated by first responder
- Specific directions as needed to locate the emergency scene (i.e. "use the south entrance to the school off Asylum St.")
- Other information requested by the dispatcher
- DO NOT HANG UP FIRST

*\*if non-emergency, refer to the standard procedures for medical conditions in the appendices*

# Emergency Action Plan – Southern High School

---

When forming the emergency team, it is important to adapt the team to each situation or sport. It may also be advantageous to have more than one individual assigned to each role. This allows the emergency team to function even though certain members may not always be present. When the nature of an incident is such that requires ongoing monitoring of student health and safety is a concern, the incident command system of the school will be instituted. Pregame “time-outs” should be implemented with the medical staff and coaches to establish what each member of the emergency team will be performing in such an event.

# Emergency Action Plan – Southern High School

## Emergency Communication

Communication is the key to quick emergency response. Athletic department staff and emergency medical personnel must work together to provide the best emergency response possible, and should have contact information established as a part of pre-planning for emergency situations. Communication prior to the event is a good way to establish boundaries and to build rapport between groups of professionals. If emergency medical transportation is not available on site during a sporting event then direct communication with the emergency medical system at the time of injury or illness is necessary (911).

All members of the emergency response team must have access to a cellular phone or landline telephone during athletic activities. Cellular phone is the preferred method of communication if available. At any athletic venue, whether home or away, it is important to know the location of a workable telephone. Pre-arranged access to the phone should be established if it is not easily accessible.

## Emergency Contact Information

Title	Name	Office	Cell
<b>Athletic Trainer</b>	Jordyn Brown		240-565-8507
<b>Athletic Director</b>	Ray Bowen	410-867-2412	443-995-5315
<b>Principal</b>	Angela Hopkins	410-867-7100	
<b>Assistant Principal</b>	Melissa Pfisterer	410-867-7100	
<b>Nurse</b>	Sue Comly	<a href="mailto:Hdcoml00@aacounty.org">Hdcoml00@aacounty.org</a>	
<b>Team Physician</b>	Dr. Mark Linzer	410-539-2227	

Off Campus Contacts	Phone Number
<b>Emergency</b>	911
<b>Police Department</b> Anne Arundel County Police Department, Southern District	35 Stepneys Ln, Edgewater, MD 21037  410-222-8610
<b>Fire and Ambulance</b> Harwood-Lothian Fire Station #9	5165 Solomons Island Rd, Lothian, MD 20711 410-222-8209
<b>Anne Arundel Medical Center</b>	Anne Arundel Medical Center, located at 2001 Medical Parkway, Annapolis, MD 21401

# Emergency Action Plan – Southern High School

---

## **Transportation of athletic injuries**

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.

## **Emergency Equipment and Locations**

All necessary emergency equipment should be at the site and quickly accessible. Personnel should be familiar with the function and operation of each type of emergency equipment. Equipment should be in good operating condition, and personnel must be trained in advance to use it properly. Emergency equipment should be checked on a regular basis and use rehearsed by emergency personnel. The emergency equipment available should be appropriate for the level of training for the emergency medical providers.

### **AED Locations**

1. Athletic Trainer's golf cart, portable
2. Gym foyer, in box on wall
3. Inside field house in the home locker room, in box on wall

### **SAM Splint Locations**

1. Athletic trainer's golf cart, portable
2. Inside Athletic training room, in cabinet

## **Coaches CPR/AED and First Aid Training**

All coaches should have CPR/AED and First Aid Training as confirmed by the Athletic Director. All head coaches are currently certified.

## **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 for 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 Action Plan – Southern High School

## Assumption of Risks

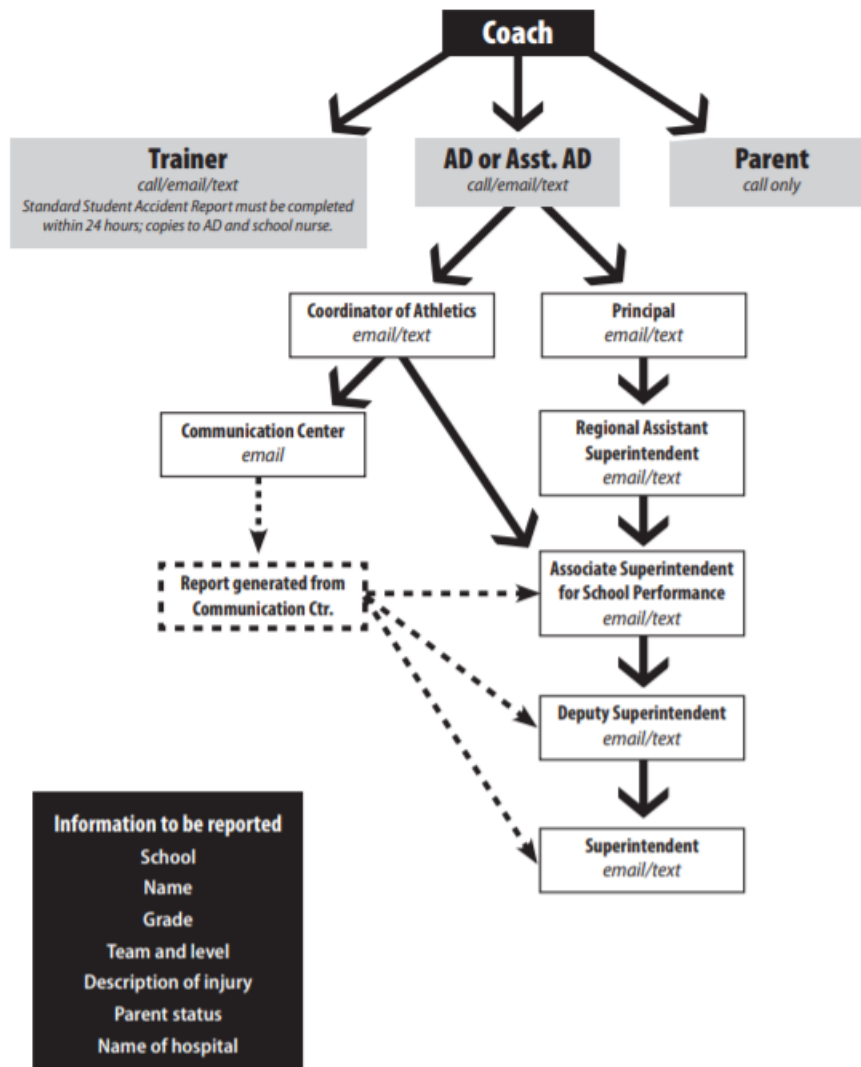
Student athletes should be warned that participation in sports could involve injury of some type to either the athlete or a fellow student athlete. Special medical waivers are required based on specific medical conditions.

## 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:

### **SECTION 7: FIRE, POLICE AND HOSPITAL FLOWCHART**

For occurrences after school hours and on non-school days  
(includes hospital trips via ambulance or parent)



# Emergency Action Plan – Southern High School

---

## **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 professional will be considered when appropriate.

## **Pre-Participation Medical Evaluations**

All students must have a physical on file prior to the start of his/her season. The athletic director will verify all physicals that are submitted prior to the start of athletic practices.

## **Fire Emergencies**

In the event that a fire occurs, all individuals should exit the building through designated fire exits. Fire evacuation routes are posted throughout all facilities and personnel should be the ones to lead everyone from the building. If fire is suspected, pull the fire alarm. Once outside and at least 50 yards from the building, make sure everyone you are responsible for is present and accounted for. At that point, escalate the situation to the Athletic Director.

## **Supervision of Athletes**

While attending to the injured/ill individual, a member of the coaching staff must supervise those athletes not involved. If at practice, an assistant coach must remove the other athletes from the immediate area. If at a game, an assistant coach will bring the team to the bench and an administrator or security must assist in crowd control.

## **Review of Emergency Procedures**

Training/Review sessions will be conducted by the athletic trainer at the beginning of each academic year and throughout the year as needed (i.e. changes of seasons). Emergency procedure training sessions will include: The review of emergency care providers and phone numbers, minimum supplies and personnel for all scheduled practices, strength and conditioning workouts, skill instruction sessions and competitions, guidelines for emergency care to specific injuries and illnesses, and guidelines for emergency care at specific locations on campus at South River High School.

## **Documentation:**

All actions and treatments pertaining to the emergency situation or other injuries should be recorded on a standardized form (see appendix A). This is important for future reference for the EAP personnel. Review of documentation enables the Athletic Trainer to improve or revise the EAP as they see fit. This will ensure an organized and effective response for potential emergencies. ATC will be mainly in charge of recording information.

# Emergency Action Plan – Southern High School

## EMS Venue Directions:

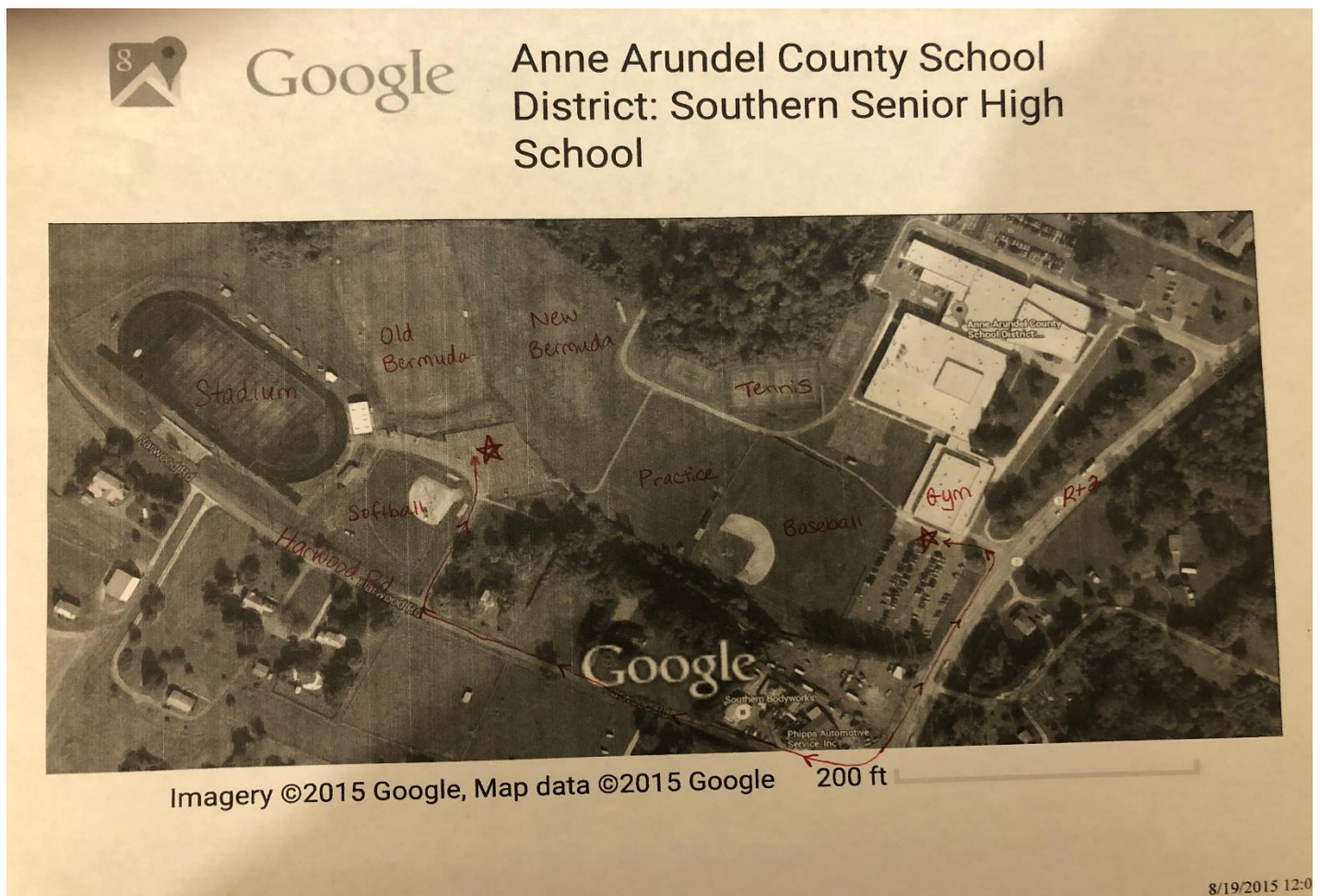
Southern HS, gymnasium, auxiliary rooms, baseball and tennis courts:

- From Route 2 S:
  - Travelling North on Solomon's Island Rd (Rt. 2), go straight through light at Harwood Rd.
  - In 400 ft., take the left into the first school parking lot.
- From Rt 2 N:
  - Travelling South on Solomon's Island Rd (Rt. 2), 1/4mi past Weston Farm Rd., take second right into school parking lot near the gymnasium.

Stadium, Bermuda fields, and practice field:

- From Rt 2, turn onto Harwood Rd. by the Exxon station and car lot.
- Less than a quarter of a mile on right is the entrance to the stadium parking lot.

## Need Maps



# Emergency Action Plan – Southern High School

---

## 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 attend the away football game. Coaches must give notice (24 hours while school is in session, 2 weeks prior to holidays) to guarantee coverage if practice schedule change.

## Emergency Procedure at Home Competitions or Practices

Once emergency personnel are 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 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. That individual must know how to direct emergency personnel to the injury site.
3. The athletic trainer's "C" person will be directed to retrieve emergency equipment such as AED, Splints, Medical Kit.
4. If a spinal or head injury is ruled out, proceed to the secondary survey and further evaluation techniques. 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.
5. Athletic trainers present should be prepared to treat for shock or changes in the injured athlete's condition.
6. 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.

## Hand Signals for Emergency Situations

- Hands across chest – cardiac event, AED needed immediately
- Tapping the top of head – indicates spinal/head injury
- Fist to the side of the body – indicates EMS needed during a game

# Emergency Action Plan – Southern High School

---

- Pointing to wrist – indicates a fracture, SAM splint(s) needed

## **Coaches' Responsibilities as First Responders for Injury/Illness Situations** **Emergency and Non-Emergency**

ATI Sports Medicine is committed to providing the best medical coverage for South River High School Athletic Programs; however, emergency situations may arise when qualified medical personnel are not present. Immediate action must be taken to provide the best possible care to the injured participant. To expedite care when an injury occurs during practice, competition, or travel, and when an athletic trainer is not immediately available, coaches need to be prepared to handle the situation. The following information will assist coaches when a certified athletic trainer or team physician is not available.

### **A. General Responsibilities**

- a. EACH coach must learn the location of the nearest AED to their field/court and accessible telephone or carry a cell phone that can be used in case of an emergency.
- b. Coaches will have emergency phone numbers with them at practices, and home and away competitions.
- c. Each coach will have a copy of this emergency action plan available at all practices and contest (Home and Away)

### **B. Things to consider during an emergency**

- a. Reassure and calm athlete
- b. Don't move severely injured athlete unless he/she is in danger
- c. Don't reduce fractures or dislocations
- 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

## **Role of the First Responder**

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

### **1. Immediate care of the injured or ill student athlete.**

- 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

**\*\*LOOK (for chest rise), LISTEN (for breath sounds), FEEL (for pulse) \*\***

2. Call 911 if necessary
3. Designate someone to get Emergency equipment
  - a. AED, first-aid kit
4. Apply basic first aid as situation requires
  - a. Adult CPR: 30 compressions then 2 breaths
    - i. Speed: 100-120 compressions per minute
    - ii. Depth: 2 inches

**\*\*Consistency of speed and depth is imperative while administering CPR\*\***

# Emergency Action Plan – Southern High School

---

- b. Bleeding: provide direct pressure over injury; elevate injury over heart if possible; apply sterile dressing over injury
- \*\* Use gloves for disease prevention\*\***
- c. Stabilize fractures and wait for EMS for assistance with splinting
- d. Treat for Shock – if necessary
- 5. Any other emergency procedures as necessary

## 2. Activation of Emergency Medical Services (EMS)

### Call 9-1-1

When making the call:

- a) Remain calm
- b) Speak clearly: Identify yourself and the location (be specific and give them the address)
  - a. Your name
  - b. Exact location of the injury occurred and where you will meet them
  - c. The number you are calling from
  - d. Number of injured athletes
  - e. The condition of athlete(s) including level of consciousness and injury/condition
  - f. The care being provided
  - g. Any other information requested by dispatcher
- c) Remain on the line until the operator instructs otherwise. DO NOT HANG UP until the dispatcher has ended the call.
- d) Call your Certified Athletic Trainer
  - a. **The parents or guardians MUST be notified if not present. This may be performed by the same individual making the EMS call or another depending on availability of personnel. If it is a life-threatening situation, the parents may be called after activating EMS.**

## 3. Direction of EMS to Scene (See attached venue directions)

- 1. Open appropriate gates
- 2. Designate individual to “flag down” EMS and direct to scene.
- 3. Scene Control: Limit scene to first aid providers and move bystanders away from area.
- 4. Designate an assistant or volunteer coach to ride with the student-athlete to the hospital.
- 5. Notify the student-athlete’s parent(s) or legal guardian(s).



# Emergency Action Plan – Southern High School

---

## Games, Events, and Practices: “AWAY”

- 1. Catastrophic Medical Emergencies** (i.e. breathing, loss of consciousness, concussion with loss of consciousness, suspected neck or spinal injury, weak pulse, signs of shock, poor vital signs, eye or face injury, severe bleeding)
  - i. Follow the First Aid/CPR/AED principles.
  - ii. Contact the ATC if not already present.
    - a. *If ATC not at event, continue down EAP and provide First Aid until EMS arrive.*
  - iii. Ask for the host team’s athletic training staff and carry out their EAP.
  - iv. Have parents or school representative accompany the athlete to the hospital.
    1. *If parents not present, contact them to let them know of the situation.*
    2. *It is the responsibility of the hospital to notify the athlete’s parents or guardians with the latest and most accurate information concerning the athletes’ condition.*
  - v. If the athlete is transferred, make sure it is arranged for the parents to pick up the athlete.
  - vi. Complete an injury/illness report.
    1. *If ATC was not present, contact ATC as soon as possible to notify them of the incident and the extent of injury/illness.*
- 2. Emergency – Non-Life Threatening** (i.e. fracture, dislocation, concussion without loss of consciousness, etc.)
  - a. Follow basic First Aid principles.
  - b. Contact the certified athletic trainer if not already present.
    - i. If ATC not at event, continue down EAP and provide First Aid. Ask visiting ATC for help if needed, along with emergency contact numbers and addresses.
  - c. ATC evaluates injury.
    - i. Provides appropriate care.
  - d. If needed, have transported by parents or school representative to hospital or urgent care facility.
    - i. If parents are not present, contact them to let them know of the situation.  
**\*\*It is the responsibility of the hospital to notify the athlete’s parents or guardians with the latest and most accurate information concerning the athletes’ condition.\*\***
  - e. Complete an injury/illness report.
    - i. If ATC was not present, contact ATC as soon as possible to notify them of the incident and the extent of injury/illness.
- 3. Non-Emergencies** (i.e. illness, abrasion, minor cuts, contusion, etc.)
  - a. Follow the First Aid principles.
  - b. Contact the ATC if more than a minor cut, abrasion, or mild contusion. If ATC is not there, coach will provide basic first aid.
    1. Certified Athletic Trainer will assist in managing the injury via phone. Should it be determined that care is needed immediately, you will be directed to the appropriate facility. Either the coach or athletic trainer should contact the student-athlete’s parent(s) or legal guardian(s).
    2. If it is determined that the injury does not require immediate care, the athletic trainer will contact the student-athlete’s parent(s) or legal guardian(s) and advise on follow on care.
    3. **Always notify parents when a concussion is suspected**
  - c. Complete necessary documentation.

# Emergency Action Plan – Southern High School

---

## Catastrophic Injury Management

- Contact Athletic Trainer.
- Contact family by appropriate individual.
- Contact Director of Athletics, Ray Bowen 443-995-5315.
- Designate athletic administrator point person.
- Assign athletic staff member to be with family at all times upon arrival; assist family as needed; protect from outside persons
- Contact/update school staff if not yet familiar with situation.
- Coordinate media plan.
  - **NO CONTACT WITH MEDIA.**
- Meet with athletes to discuss situation.
  - **NO OUTSIDE DISCUSSION OF MEETING WITH MEDIA.**
- Complete documentation of events, include everyone involved with witness signatures.
- Construct a detailed time line of events related to the incident.
- Collect and recheck all equipment and materials involved.
- Involve appropriate counseling personnel.
- Critical incident stress debriefing/ counseling as necessary for individuals involved in incident.



# Emergency Action Plan – Southern High School

---

## 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. 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 (SAFE SHELTERS SHOULD BE ADJUSTED DUE TO COVID-19 TO COMPLY WITH DPH GUIDELINES; SEE PG. 25 FOR SAFE SHELTERS DURING COVID RESTRICTIONS)**

#### **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, activate 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**

- A. The National Weather Service has stated that lightning can strike up to 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.)
- B. 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”.
- C. 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.
- D. 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:**

1. 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 of which aid in grounding a structure.

# Emergency Action Plan – Southern High School

---

2. The secondary choice for a safer location from the lighting 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 knee, 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.
  - 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).
  - 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.
  - Events will not start or restart after 8 pm.

## Event Procedures for Southern High School

Prior to Competition: A member of the Athletic Training staff will greet the officials, and offer to notify the officials during the game if there is imminent danger from lightning.

- ***Announcement of Suspension of Activity***
  - Once it is determined that there is danger of a lightning strike, the game official will notify the head coach and athletic trainer and subsequently summon athletes from the playing field or court.
- ***Evacuation of the Playing Field***
  - Immediately following the announcement of suspension of activity all athletes, coaches, officials and support personnel are to evacuate to an enclosed grounded structure (Gymnasium/Field House, Locker rooms).
- ***Evacuation of the Stands***
  - During competition, once the official signals to suspend activity, a member of the Sports Information 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: (venue specific). Though protection from lightning is not guaranteed, you may seek shelter in an automobile. Thank you for your cooperation."
- ***Resumption of Activity***
  - Activity may resume once the official/ ATC gives permission.
    - Thirty (30) minutes **AFTER** the last lightning strike or thunder clap.
- ***Away Events***
  - Apply the home/facility EAP or modify the SHS guidelines that apply accordingly.

# Emergency Action Plan – Southern High School

## II. Heat Guidelines

A. 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.

B. 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.

C. 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 & Symptoms	Dry mouth Thirst Being irritable or cranky Headache Seeming bored or disinterested Dizziness Cramps Excessive fatigue	Intense pain  Persistent muscle contractions that continue during and after exercise	Dehydration Loss of coordination, dizziness or fainting Profuse sweating Pale skin Headache Nausea, vomiting or diarrhea Stomach/intestinal cramps or persistent muscle cramps	Nausea Vomiting or diarrhea Headache Dizziness Hot and wet or dry skin Increased heart rate, decreased blood pressure or fast breathing Dehydration Combateness

# Emergency Action Plan – Southern High School

<b>Treatments</b>	Move child to a shaded or air-conditioned area	The child should be given a sports drink to help replace fluid and sodium losses	Move to air conditioned or shaded area 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	Call emergency medical services for immediate transport Cool child while waiting (i.e. cold towels, fan) over as much of body as possible Remove extra clothing or equipment
	Give him/her water or sport drinks to drink	Light stretching, relaxation and massage of cramped muscle		

## Procedures for Southern High School

In the event of suspected heat exhaustion or exertional heat stroke (rectal temperature of  $>102^{\circ}\text{F}$ ) the following will occur (note the tub is located next to the field house in the stadium):

1. Remove all equipment and excess clothing.
2. Cool the athlete as quickly as possible within 30 minutes via whole body ice water immersion (place them in a [tub/stock tank](#) with ice (4 coolers of ice and water approximately  $35\text{--}58^{\circ}\text{F}$ ); stir water and add ice throughout cooling process.
3. If immersion is not possible (no tub or no water supply), take athlete to a shaded, cool area and use rotating cold, wet towels to cover as much of the body surface as possible.
4. Maintain airway, breathing and circulation.
5. After cooling has been initiated, activate emergency medical system by calling 911.
6. Monitor vital signs such as rectal temperature, heart rate, respiratory rate, blood pressure, monitor CNS status.
7. If rectal temperature is not available, **DO NOT** USE AN ALTERNATE METHOD (oral, tympanic, axillary, forehead sticker, etc.). These devices are not accurate and should never be used to assess an athlete exercising in the heat.
8. Cease cooling when rectal temperature reaches  $101\text{--}102^{\circ}\text{F}$  ( $38.3\text{--}38.9^{\circ}\text{C}$ ).

## 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

# Emergency Action Plan – Southern High School

---

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

# Emergency Action Plan – Southern High School

Anne Arundel County Public Schools | Office of Athletics

## Game & Practice Restrictions Due to Heat

Code	Heat Index (temperature & humidity)	Restrictions & Accommodations
Red	<b>Above 104°F</b> (recheck every 30 minutes)	<ul style="list-style-type: none"><li>• Stop all outside activity in practice and/or play.</li><li>• Stop all inside activity if air conditioning is unavailable.</li></ul>
Orange	<b>100°–104°F</b> (recheck every 30 minutes)	<p><b>All of restrictions listed below, plus:</b></p> <ul style="list-style-type: none"><li>• Alter uniform by removing items—if possible and permissible by rules.</li><li>• Allow athletes to change into dry t-shirts and shorts at defined intervals.</li><li>• Reduce time of outside activity.</li><li>• Reduce time of indoor activity, if air conditioning is unavailable.</li></ul>
Yellow	<b>95°–99°F</b> (recheck every 30 minutes)	<p><b>All of restrictions listed below, plus:</b></p> <ul style="list-style-type: none"><li>• Provide <b>mandatory</b> 10-minute water breaks every 30 minutes to allow hydration as a group.</li><li>• Reduce the time of the outside activity.</li><li>• Consider postponing practice until later in the day.</li><li>• Remove helmets and other equipment when athlete is not directly involved in the competition, drill, or practice and it is not otherwise required by rule.</li></ul>
Green	<b>Under 95°F</b> (recheck every 30 minutes)	<ul style="list-style-type: none"><li>• Have water available for athletes to take in as much as they desire.</li><li>• Provide <b>optional</b> 10-minute water breaks every 30 minutes to allow hydration as a group.</li><li>• Provide towels with ice to cool athletes as needed.</li><li>• Watch/monitor athletes for necessary action.</li></ul>

Procedures for Southern High School

Updated August 2022

ATC Initials: \_\_\_\_\_

AD Initials: \_\_\_\_\_

# Emergency Action Plan – Southern High School

---

Temperatures of the turf, between the Bermuda fields, and softball/baseball fields will be taken 30 minutes prior to practice/competition to determine if modifications are necessary.

## III. 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

### A. 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.

### B. Recognizing Concussion

1. 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.

2. 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](http://www.aacps.org/athletics). **Medical Clearance for Student-Athlete Suspected Head Injury Form included in Appendix B**

### C. Concussion Signs and Symptoms

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

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.

### E. Return to Play Return

Updated August 2022

ATC Initials: \_\_\_\_\_

AD Initials: \_\_\_\_\_

# Emergency Action Plan – Southern High School

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.

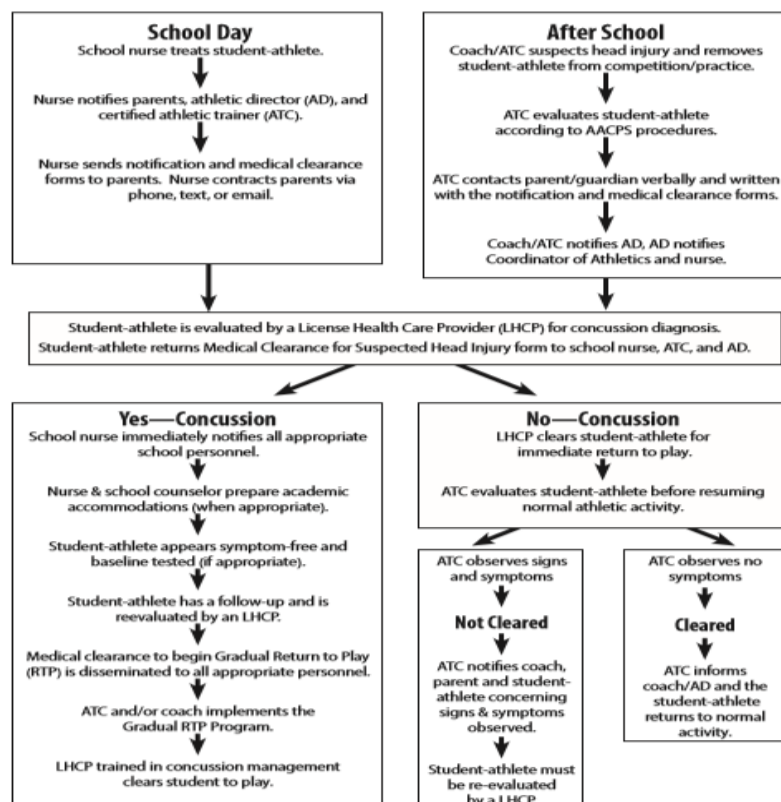
Day 4: Sports Specific practice

Day 5: Full contact in a controlled drill or practice.

Day 6: Return to competition

## AACPS Suspected Head Injury Procedural Flow Chart

### SECTION 8: AACPS SUSPECTED HEAD INJURY PROCEDURAL FLOWCHART



76 | AACPS 2019–20 Athletic Handbook



# Emergency Action Plan – Southern High School

---

## COVID-19 GUIDELINES

- I. Mask and social distancing Policy
  - A. All coaches are required to wear a mask during practice. Players are required to wear masks when not ACTIVELY participating
    - i. Coaches are NOT permitted to pull down masks to use a whistle
  - B. The athletic director will have extra masks in the event someone forgets to bring one
  - C. Training sessions are permitted in groups of 50 or less
  - D. Discs are available to help enforce social distancing (6 feet apart) during activity
    - i. Individuals are not permitted to high-five, shake hands or touch in a celebratory/congratulatory manner
  - E. Athletes are encouraged to bring own equipment, towels and water bottles as community watering stations are prohibited for now. In the event an athlete needs more water, the athletic director will provide one time use water bottles.
- II. Restroom Use Policy
  - A. Outdoor athletes will be permitted to use the fieldhouse restroom ONE AT A TIME (athletes are not otherwise permitted inside including in locker rooms)
  - B. Indoor athletes will be permitted to use restrooms near their designated gyms
- III. COVID-19 Daily check ins
  - A. Athletes will check in at their designated tables (at the stadium, top Bermuda and bottom Bermuda fields) based on practice location each day as well as park in designated places based on practice location
  - B. Each athlete will be screened via 3 questions.
    - 1. Have you been in contact with anyone suspected of have and/or tested positive for COVID-19 in the last two weeks?
    - 2. Do you currently have any symptoms of COVID-19?
    - 3. Do you currently have a temperature of 100.4?
  - C. In the event, an athlete answers yes to a question they will be asked to go home immediately.
- IV. Sterilization Policy
  - A. Athletes are encouraged to use hand sanitizing stations present at various locations on campus
- V. Inclement Weather Policy
  - A. If inclement weather is present, stop practice and send all athlete's who drove or have parents present home
  - B. Any athletes unable to immediately go home are permitted to seek shelter at designated locations
    - i. Turf and bottom Bermuda grass – shelter in the field house but maintain social distance
    - ii. Top Bermuda grass, side field, and tennis courts – shelter in the small and main gym **IF THEY ARE VACANT** otherwise seek shelter in the gym lobby outside the gym doors
  - C. Make sure athletes call parents to be picked up ASAP
- VI. In the event of a positive COVID-19 test
  - A. AACPS will follow protocols and procedures from the Anne Arundel County Department of Health
  - B. Immediately after a positive COVID-19 test, the group/ team in person activities cease for 14 days from the test date. Everyone in the group will be asked to quarantine for 14 days, monitor possible symptoms, and let their healthcare provider know if symptoms occur.

# Emergency Action Plan – Southern High School

## Appendix A. Standard Student Accident Report



Anne Arundel County Public Schools | Office of Insurance and Safety Management

### Standard Student Accident Report

School personnel are responsible for reporting a student accident that results in an injury requiring, or that may require, medical attention, which occurs as follows: on school premises, on any school sponsored field trip, extracurricular activity, AACPS athletic event, or on a school bus to or from school. Within 24 hours of the accident the principal, appropriate supervisor, or coach will insure that this form is completed. Forward the completed report to the Insurance and Safety Management Office. It will be necessary to maintain a copy in the school file for five (5) years.

School			
Name of Injured Student	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Grade
Parent/Guardian Name		Home Phone No.	
Home Address		City	State Zip
Date of Accident	Time of Accident	School Employee in Charge	
Place of Accident (bus, playground, etc.)		If School bus, Bus stop, Bus number	
Activity Engaged in (Phys. Ed, recess, etc.)			
Type of Injury (broken arm, cut finger, etc. – Be Specific)			

Description of Accident (What was the student doing?)


Was First Aid given?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, by whom?
Person(s) present at time of accident	Name	Name
	Address	Address
Where was student taken?		How
Was parent/guardian notified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Could not be reached		How
Name and address of doctor handling case		
Remarks		

Reported by (Name & Position)	Date of Report
-------------------------------	----------------

©2011 • AACPS • Office of Insurance & Safety Management • DPS/JH 2070/12 (Rev. 1/11)

# Emergency Action Plan – Southern High School

## Appendix B. Medical Clearance Form for Suspected Head Injury

		Anne Arundel County Public Schools   Athletics Office	
<b>Medical Clearance for Suspected Head Injury</b>			
<i>Take this form to the health care provider evaluating the student's injury and return to the school nurse immediately.</i>			
Student Athlete's Name		Date of Injury	
<b>Initial Evaluation</b> <i>Must be Completed by a Physician, Nurse Practitioner, Physician's Assistant, or Neuropsychologist</i>			
<b>Diagnosis:</b> <input type="checkbox"/> <b>No Concussion</b> Student may resume all activities without restriction			
<input type="checkbox"/> <b>Concussion*</b>			
Date student may return to school on: _____			
<b>Note:</b> Student will be removed from all sports and physical education activities at school until medically cleared. School will implement standard academic accommodations unless specific accommodating are requested.			
<small>*2010 AAP Sport-Related Concussion in Children and Adolescents, 2008, Zurich Concussion in Sport Group Consensus</small>			
LHCP Name		Office phone	
Signature		Date	
<b>Follow-up Evaluation</b>			
<b>All student athletes with concussions must be medically cleared</b> before beginning supervised <i>Gradual Return to Sports/Physical Education Participation (RTP)</i> program.			
According to COMAR 13A.06.08.01, the following licensed health care providers— <b>trained in the evaluation and management of concussions</b> —are permitted to authorize a student athlete to return to play:			
<ul style="list-style-type: none"><li>• A licensed physician</li><li>• A licensed physician's assistant<sup>1</sup></li><li>• A licensed nurse practitioner</li><li>• A licensed psychologist with training in neuropsychology</li><li>• A licensed athletic trainer<sup>2</sup></li></ul>			
<small><sup>1/2</sup> in collaboration with the supervising physician or alternate supervising physician within the scope of the Delegation Agreement approved by the Board of Trustees (for physician's assistant) or Evaluation and Treatment protocol approved by the Board of Physicians (for athletic trainer).</small>			
<input type="checkbox"/> <b>Student is cleared to return to a supervised RTP program on:</b> _____ (Date)			
I certify that I am aware of the current medical guidance on concussion evaluation and management.			
The above named student athlete has met all of the criteria for medical clearance for his/her recent concussion, and as of the date below is ready to return to a supervised <i>Gradual Return to Sports/Physical Education Participation (RTP)</i> program (lasting a minimum of five days).			
<b>Note:</b> Students whose symptoms return during the RTP progression will be directed to stop the activity and rest, until free of symptoms. The student will resume activity at the previous stage of the protocol that was completed without symptoms. Students with persistent symptom return will be referred to their healthcare provider for evaluation.			
LHCP Name		Phone	Signature
<b>Copies to:</b> White—Parent (Follow-up)    Yellow— School Nurse    Pink—Certified Athletic Trainer    Gold—Athletic Director			
<small>© 2011 • AACPS • Office of Athletics • DPS/SG • 2630/57 (Rev. 6/13)NS</small>			