



EMERGENCY ACTION PLAN FOR ATHLETICS

PREPARED BY:
RED OAK ATHLETIC OFFICE

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RED OAK ATHLETICS EMERGENCY ACTION PLAN FOR ATHLETICS

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Emergency Phone Numbers and Addresses

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|---|--------------|
| Baylor Scott & White Medical Center – Waxahachie 2400 N Interstate 35 E Rd, Waxahachie, TX 75165 | 469-843-4000 |
|---|--------------|

| | |
|--|--------------|
| Baylor Scott & White Sports Medicine and Orthopedic Institute - Midway Midlothian 4431 US-287, Midlothian, TX 76065 | 469-800-9790 |
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| | |
|---|--------------|
| Attend Urgent Care 200 N Interstate 35 E Rd Suite E, Red Oak, TX 75154 | 469-807-3177 |
|---|--------------|

| | |
|--|--------------|
| Medical City ER – Red Oak 317 East Ovilla Road, Red Oak, TX 75154 | 469-820-6080 |
|--|--------------|

Physicians

| | | |
|--------------------|-------------|--------------|
| Dr. Brandon Barnes | Orthopedics | 469-800-9790 |
| Dr. Stephen Mathew | Orthopedics | 469-800-9790 |

Red Oak Athletic Facility Addresses:

Red Oak Middle School
154 Louise Ritter Blvd
Red Oak, TX 75154

Buddy Groom Baseball Stadium
220 TX-342
Red Oak, TX 75154

Billy Goodloe Stadium
154 Louise Ritter Blvd
Red Oak, TX 75154

Red Oak Softball Stadium
220 TX-342
Red Oak, TX 75154

Red Oak High School
220 TX-342
Red Oak, TX 75154

Red Oak High School – Field House
220 TX-342
Red Oak, TX 75154



**Part I:
DEALING WITH SPORT INJURY EMERGENCIES
AT RED OAK ATHLETIC EVENTS**

Red Oak ISD Athletics

EMERGENCY ACTION PLAN FOR ATHLETICS OVERVIEW FOR ATHLETIC INJURIES

Introduction

Emergency situations may arise at anytime during athletic events. Expedient action must be taken in order to provide the best possible care to the student-athlete involved. The development and implementation of an Emergency Action Plan will help ensure that the best possible care will be provided.

As emergencies may occur at anytime and during any activity, all district employees must be prepared. Athletic organizations have a duty to develop an Emergency Action Plan that may be implemented immediately when necessary and to provide appropriate standards of emergency care to all student-athletes. This emergency preparation involves formulation of an Emergency Action Plan, proper supervision of events, maintenance of appropriate emergency equipment and supplies, utilization of appropriate emergency medical personnel, and continuing education in the area of emergency medicine and planning. Through careful pre-participation physical screenings, adequate medical coverage, safe practice/training techniques, and other safety avenues, potential emergencies may be averted. However, accidents and injuries are inherent with sports participation, and proper preparation on the part of the Sports Medicine team and Athletic Department should ensure each emergency situation can be managed appropriately.

Components of the Emergency Action Plan

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

1. Emergency Personnel
2. Emergency Communication
3. Emergency Equipment
4. Roles Of Certified Athletic Trainers, Athletic Training Students, Coaches, and Administrators
5. Venue Maps With Directions

Emergency Plan Personnel

With an athletic practice or competition, the first responder to an emergency situation is typically a member of the Sports Medicine staff, most commonly a Certified Athletic Trainer. The type and degree of sports medicine coverage for an athletic event may vary widely, based on such factors as the sport or activity, the setting, and the type of training or competition. The first responder in some instances may be a coach or other institutional personnel. Certification in cardiopulmonary resuscitation (CPR), Automated External Defibrillator (AED) use, first aid, prevention of disease transmission, and emergency plan review is mandatory for all athletics personnel associated with practices, competitions, skills instruction, and strength & conditioning.

The development of an Emergency Action Plan cannot be complete without the formation of an emergency team. The emergency team may consist of a number of healthcare providers including physicians, emergency medical technicians, Certified Athletic Trainers; Athletic Training Students, coaches, and possibly other 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. There are four basic roles within the emergency team. The first and most important role is establishing safety of the scene and immediate care of the athlete. Acute care in an emergency situation should be provided by the most qualified individual on the scene. In most instances, this role will be assumed by the Certified Athletic Trainer, although if the team physician is present he/she may be called in. The

second role, EMS activation, may be necessary in situations where emergency transportation is not already present at the sporting event. This should be done as soon as the situation is deemed an emergency or a life-threatening event. Time is the most critical factor under emergency conditions. Activating the EMS system may be done by anyone on the team. However, the person chosen for this duty should be someone who is calm under pressure and who communicates well over the telephone. This person should also be familiar with the location and address of the sporting event. Typically, the school administrator is the best choice to fulfill this role. The third role, equipment retrieval may be done by anyone on the emergency team who is familiar with the types and location of the specific equipment needed. Athletic Training Students and coaches are good choices for this role. The fourth role of the emergency team is that of directing EMS to the scene. One member of the team should be responsible for meeting emergency medical personnel as they arrive at the site of the emergency. Depending on ease of access, this person should have keys to any locked gates or doors that may slow the arrival of medical personnel. An Athletic Training Student, administrator, or coach may be appropriate for this role.

Roles within the Emergency Team

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

Activating the EMS System

Making the Call:

911

Providing Information:

- name, address, telephone number of caller
- nature of emergency, whether medical or non-medical *
- number of athletes
- condition of athlete(s)
- first aid treatment initiated by ATC/Physician
- specific directions to locate the emergency scene ("Come to the faculty parking lot off of Cedar Ridge Road.")
- other information as requested by dispatcher

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.

Emergency Communication

Communication is the key to quick emergency response. Athletic Trainers and emergency medical personnel must work together to provide the best emergency response and should have contact information such as a telephone tree 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 both groups of professionals. If emergency medical transportation is not available on-site during a particular sporting event then direct communication with the emergency medical system at the time of injury or illness is necessary.

Access to a working telephone or other telecommunications device, whether fixed or mobile, should be assured. The communications system should be checked prior to each practice or competition to ensure

proper working order. A back-up communication plan should be in effect should there be failure of the primary communication system.

Emergency Equipment

All necessary emergency equipment should be on-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. The school's Certified Athletic Trainers should be trained and responsible for the care of the medical equipment.

It is important to know the proper way to care for and store the equipment as well. Equipment should be stored in a clean and environmentally controlled area. It should be readily available when emergency situations arise

Medical Emergency Transportation

Emphasis should be placed at having an ambulance on site at high risk sporting events. In the event that an ambulance is on site, there should be a designated location with rapid access to the site and a cleared route for entering/exiting the venue. If an ambulance is not present at an event, entrance to the facility should be clearly marked and accessible. In the event of an emergency, the 911 system will still be utilized for activating emergency transport.

In the medical emergency evaluation, the primary survey assists the emergency care provider in identifying emergencies requiring critical intervention and in determining transport decisions. In an emergency situation, the athlete should be transported by ambulance, where the necessary staff and equipment is available to deliver appropriate care. Emergency care providers should refrain from transporting unstable athletes in inappropriate vehicles. Care must be taken to ensure that the activity areas are supervised should the emergency care provider leave the site in transporting the athlete.

Non-Medical Emergencies

For the following non-medical emergencies: fire, bomb threats, severe weather and violent or criminal behavior, refer to the school district's emergency action plan in this handbook and follow the instructions provided.

Conclusion

The importance of being properly prepared when athletic emergencies arise cannot be stressed enough. An athlete's survival may hinge on how well trained and prepared athletic healthcare providers are. The emergency plan should be reviewed at least once a year with all athletic personnel, along with CPR and first aid refresher training. Through development and implementation of the emergency plan, Duncanville Athletics helps ensure that the athlete will have the best care provided when an emergency situation does arise.

Red Oak Emergency Action Plan: Athletic Injuries

Emergency Personnel: at least one Certified Athletic Trainer on school premises and in the Athletic Training Room or on cellular phone access during all practices and games

Emergency Communication: The Certified Athletic Trainers carry cellular telephones (Alex Forehan 859-912-4663; Sara Smith 806-884-9913; Arturo Valles 817-231-1959). Additional fixed telephone lines accessible for Red Oak Athletic Training Room (972-617-3535, EXT 6018). We also recommend the coaches of each sports teams carry a cellular phone in case of emergency.

Emergency Equipment: Supplies stored in Athletic Training Room include AED, trauma kit, splint kit, spine board, c-collar, crutches, various wound care necessities, and any other items deemed necessary by the Sports Medicine staff.

Roles of Certified Athletic Trainer

- Preventative care for all student-athletes (includes evaluation, consultation, prophylactic taping/bracing, and use of therapeutic modalities such as whirlpool, electronic stimulation, ultrasound, intermittent compression, and hot and cold therapy among others);
- Immediate evaluation and care of seriously-injured or ill student-athletes;
 - Activation of emergency medical system (EMS);
 - 911 call (provide name, address, telephone number; number of individuals injured; condition of injured; first aid treatment; specific directions; other information as requested;
- Return to play decision-making of the injured student-athlete;
- Physician referral of the injured student-athlete;
- Contacting the parent(s) of the injured student-athlete;
- Rehabilitative care for injured student-athletes (includes evaluation, consultation, taping, and use of therapeutic modalities such as whirlpool, electronic stimulation, ultrasound, intermittent compression, and hot and cold therapy). Rehabilitation should follow physician protocols.

Roles of Athletic Training Students/Coaches

- Direct EMS personnel (ambulance) to scene;
- Unlock and open bar gate between school and practice fields;
- Designate individual to "flag down" EMS and direct to scene;
- Scene control: limit scene to sports medicine personnel and move bystanders (including players) away from area.

Roles of Administrative Staff & ROISD Police Dept.

- Assist in securing the scene of the emergency
- Ensure parking lot is clear and accessible to emergency personnel

Roles of Administrators/Coaches

- Ensure emergency entrances are clear and accessible (check parking lots regularly);
- Unlock and open doors for EMS to access facilities
- Direct EMS personnel (ambulance) to scene (in the event there are no student trainers present);
- Scene control: limit scene to sports medicine personnel and move bystanders (including other athletes) away from area of injured athlete.



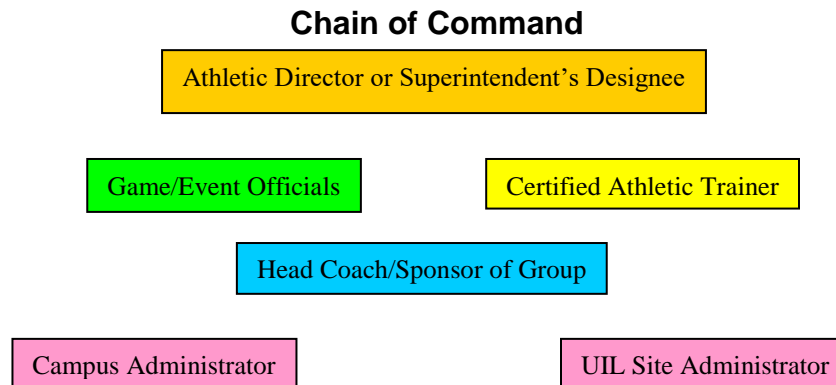
Part 2:
DEALING WITH WEATHER RELATED EMERGENCIES
AT RED OAK ATHLETIC EVENTS

Red Oak Emergency Action Plan: Overview of Weather Action Plan

Prevention and education are the keys to weather safety. Prevention should begin long before any athletic event or practice. The following steps are recommended by the National Oceanic and Atmospheric Administration (NOAA), National Weather Service (NWS), National Lightning Safety Institute (NLSI), National Collegiate Athletic Association (NCAA), National Athletic Trainers Association (NATA) and University Interscholastic League (UIL).

1. Chain of Command

Designate a chain of command as to who monitors threatening weather and who makes the decision to remove a team or individuals from an athletic site or event. This emergency plan includes planned instructions for participants and spectators.



The Athletic Director / Superintendent's Designee and the Certified Athletic Trainer will co-command the implementation of the Weather Action Plan. Both of these individuals can activate the safety plan by suspending an event (game or practice).

The Athletic Director / Superintendent's Designee assumes responsibility as spokesperson for the school district to participating teams, school (campus & UIL) administrators, press box and news media.

The Certified Athletic Trainer assumes responsibility as spokesperson for the school district to game/event officials.

In lieu of the absence of any person in the chain of command, the next person assumes the responsibilities of the absentee.

Example:

If Athletic Director or Athletic Trainers are not at a practice, then it is the head coach's responsibility to suspend or resume practice due to the weather.

2. Designate A Weather Watcher

Designate a person(s) from each organization/team who actively looks for signs of threatening weather and notifies the chain of command if severe weather becomes dangerous.

3. Monitor Local Weather Forecasts

All representatives in the “Chain of Command” are required to monitor local weather forecasts and conditions.

Be aware of National Weather Service issued thunderstorm “watches” and “warnings” as well as the signs of thunderstorms developing nearby.

- A “watch” means conditions are favorable for severe weather to develop in an area.
- A “warning” means that severe weather has been reported in an area and for everyone to take proper precautions.

The NOAA (National Oceanic and Atmospheric Administration) weather radio with the National Weather Service is an excellent tool for gathering daily forecasts and approaching storms. These radios can be purchased at local electronic stores. You can also sign up for email broadcasts of weather conditions from several internet sources which can be sent to a pager or cell phone.

4. Define and List Safe Locations

Designate a safe shelter for each venue based on district guidelines. Distribute/post these safe shelter directions to each team/group and any spectators. These guidelines will be reviewed and updated on an annual basis, at a minimum.

Red Oak Emergency Action Plan: Lightning Action Plan

Methods of Gathering Lightning Information

“FLASH-TO BANG” Method

The National Severe Storms Laboratory (NSSL), National Collegiate Athletic Association (NCAA) and the National Athletic Trainers' Association (NATA) recommend the use of the flash to bang ratio to help determine when cover should be taken. This method requires no equipment and is an easy way to determine the distance from the last lightning strike. To use the flash-to-bang method, begin counting on the lightning flash, and stop counting when the associated thunder is heard. Divide this number (in seconds) by 5 to determine the distance (in miles) to the lightning flash. For example, if the time in seconds between the lightning being spotted and the thunder being heard is equal to 30, divide that by 5, and you get 6 ($30/5=6$). Therefore, that lightning flash was approximately 6 miles away from the observer.

Lightning Detector

The Certified Athletic Trainer will have possession of lightning tracking technology and will alert coaches, players, and other present staff if the lightning is detected and of any approaching of dangerous storm activity. The Certified Athletic Trainer will immediately respond to lightning within 30 miles of your location by informing coaches/staff of potential incoming inclement weather. Because the average stroke of lightning is 6 miles long, and because thunderstorms can move up to 25mph or more, you are in immediate danger any time lightning is detected within 8-10 miles of your location.

Criteria for Suspension of Activity

It may be necessary for a Certified Athletic Trainer to suspend activity if they feel that people are in jeopardy due to inclement weather even if the outdoor warning system has not been activated. At this time all people in the area should seek shelter immediately.

It is important to remember, no matter which reading is used, that lightning has been reported to strike 10 miles away from where it is raining. And therefore, it is strongly recommended to suspend or postpone athletic or recreational activities when determined necessary by either method.

When using the flash-to bang method, as the count approaches 30 seconds, all persons should be seeking, or already inside appropriate shelter. This is the minimal guideline when using the flash-to-bang method to halt activities.

When using lightning tracking technology, if lightning is detected in the 8-20-mile range, the Certified Athletic Trainer should alert the head coach that there are dangerous storms nearby, and if the storms proceed to be closer activity will need to be ceased. If lightning is detected within 8 miles, the Certified Athletic Trainer should immediately alert the head coach and activity should be suspended immediately and all individuals should take appropriate shelter. If during a home contest the Certified Athletic Trainer will alert the Athletic Department Staff member, or game administrator in charge at that event, as well as the head coach and game official.

Criteria for Return to Activity

30-Minute Return-to-Play Rule

If a game, practice, or other activity is suspended or postponed due to lightning activity, it is important to establish criteria for resumption of activity. First off, the storm should continue to be monitored. Waiting at least 30 minutes after the last lightning strike within 8 miles is recommended. Each subsequent strike within 8 miles will reset the 30min timer. A blue sky or lack of rainfall is not an adequate reason to resume play, as lightning can strike far from where it is raining.

Seeking Appropriate Shelter

The primary choice for a safe location from lightning hazard is any substantial, frequently inhabited building. The electrical and telephone wiring and plumbing pathways aid in grounding the building. The secondary choice for a safe location from lightning hazard is a fully enclosed vehicle with a metal roof and the windows closed. You should avoid touching the sides of the vehicle. Convertible vehicles, golf carts, etc, are not adequate areas of shelter. You should avoid high places and open fields, isolated trees, rain or picnic shelters, baseball dugouts, communication towers, flagpoles, bleachers, metal fences, convertibles, golf carts or any type of water.

Individuals who feel their hair stand on end or skin tingle or hear crackling noises should assume the lightning-safe position. That position is crouched on the ground, weight on the balls of the feet, feet together, head lowered and ears covered. **DO NOT LIE FLAT ON THE GROUND.** You must minimize the amount of contact that you have with the ground.

If during a home contest, the Athletic Department Game Administrator should alert spectators through a public service announcement urging them to take cover in an appropriate shelter.



Part 3:
DEALING WITH EMERGENCY FACILITY EVACUATION
AT RED OAK ATHLETIC EVENTS

Red Oak Emergency Action Plan: Athletic Event Emergency Overview

Emergencies Overview

Emergencies or disasters may occur at any time on or near a Red Oak ISD Athletic event. Types of emergencies or disasters range from natural disasters to civil disturbances. Regardless of the type of emergency or disaster, the initial activation and implementation of Red Oak Emergency Action Plan should always be the same. Because stress and confusion are to be expected at the emergency scene, quick, efficient implementation of the plan will provide clear directions, responsibility, and continuity of control for key offices.

It must be emphasized that the action plan will only be implemented when there is actual or imminent danger to a large number of people. Routine management for isolated incidents will not require activation of the emergency plan unless the incident becomes out of control, for example, a dumpster fire that spreads to an adjacent building, or a train derailment that is later followed by emission of toxic vapors due to a leak or explosion.

Definitions of an Emergency

The Athletic Director or his/her designee serves as the overall Emergency Director during any major emergency or disaster. The following definitions of an emergency are provided as guidelines to assist building and other area coordinators in determining the appropriate response.

Geographical Emergencies: This plan recognizes three basic types of geographical emergency situations:

- 1. School Emergency** - An emergency that endangers the overall safety and well being of students, employees, visitors, and structures within school property.
- 2. Community Emergency** - An emergency in the immediate vicinity of the campus or surrounding areas which could create a large number of injuries/casualties or have an impact upon the school.
- 3. State or National Emergency** - These will normally be managed by the local County Office of Emergency Services or the Duncanville Police Department.

Classifications of Emergencies

These classifications help to determine the severity of the situation:

- 1. Minor Emergency** - Any incident, potential or actual, which will not seriously affect the overall functional capacity of the school. Report these minor incidents to school security and Red Oak Police immediately.

2. Major Emergency - any incident, potential or actual, which affects an entire building or buildings, and that, will disrupt the overall operations of the school. Outside emergency services will probably be required, as well as major efforts from campus support services. Major policy considerations and decisions will usually be required from the ROISD Administration during times of crises.

3. Disaster - Any event or occurrence which has taken place and has seriously impaired or halted the operations of the school. In some cases, mass personal injuries/casualties and severe property damage may be sustained. A coordinated effort of all campus-wide resources is required to effectively control the situation. Outside emergency services will be essential. In all cases of disaster, the Emergency Action Plan will be activated, and the appropriate support and operational plans will be executed. In addition, any incident that has the potential for adverse publicity concerning campus resources, and/or instrumentality of the school, should be promptly reported to the Red Oak Police.

Early Warning System: Notification by the Athletic Director to key personnel will be made by activating the emergency call list for all potential or actual emergency situations. Warning of the actual or impending danger may come from such sources as radio and/or television or activation of sirens.

Types of Emergencies

The following is a list of many of the types of emergencies that can be experienced by a facility/school:

1. Natural Causes

- Tornadoes
- Earthquakes
- Lightning
- Ice storms
- Severe winter storms
- Building emergency (structural damage caused by an emergency)

2. Accidental Causes

- Fires (chemical, natural gas, electrical or ordinary structural)
- Hazardous chemical accidents or spills (vapor or liquid)
- Transportation accidents (airplane, railroad car, automobile/truck)
- Explosions (compressed gas, containerized liquid or man made)
- Prolonged utility outages (gas, electricity, cooling system, water)

3. Societal Causes

- On-campus civil disturbance
- Hostage situation
- Bomb-threats or explosions
- Terrorist action



Part 4:
ATHLETIC FACILITIES EMERGENCY ACTION PLANS AND VENUE MAPS

Emergency Action Plan

Facility Location: Billy Goodloe Stadium (Football, Soccer & Track)

The Emergency Action Plan is activated when breathing and or circulation are compromised, or there is a large amount of bleeding or other trauma. Parents or Guardians are notified of the student athlete's emergency by the head coach or the delegated assistant coach with assistance by the staff athletic trainer and/or physician.

1. **Responsibility of the Emergency Care Team** (Staff Athletic Trainer, Head Coach, with assistance by Athletic Training Students.)
 - a. **Emergency Care Provider**- Handles emergency situation (CPR/AED Certified)
 - b. **Facilitator**- Coordinates emergency care
 - I. Send team members to assign tasks.
 - c. **Telephone Caller**-Contacts EMS #911
 - I. Report nature and severity of the injury.
 - II. Give directions to the injury site.
 - III. Remain on the phone until the operator hangs up.
 - d. **Bystander Control**- Keep all non-involved personnel away from injury site.
 - e. **Emergency vehicle escort**- Locate keys to gate or door.
 - I. Go to the designated location and direct emergency vehicle to injury site.
2. **Phones**
 - a. **Location** – Staff athletic trainers' cell phones
 - b. **Emergencies**- 911
 - c. **Athletic Training Room** 972-617-3535; 6018
 - d. **Head Athletic Trainer Cell** 859-912-4663
 - e. **Assistant Athletic Trainer Cell** 806-884-9913
 - f. **Assistant Athletic Trainer Cell** 817-231-1959
3. **Gates/Keys/Locks**
 - a. **Which Gate to use**- Northwest gates to the stadium and/or track.
 - b. **Who has the keys to the Gates** Football coaches, Staff athletic trainer, School Based Law Enforcement Officer
4. **Emergency Supplies**
 - a. **Location**- (AED, splints, crutches) these items will be located on the sidelines of the practices and games. They can also be found in the Athletic Training facility
 - I. (Rubber gloves, bandages, Ice Bags) In the athletic training kit that is in the dugout during practice or games.
5. **Severe Weather**
 - a. **Lightning**: Perry Weather will alert all athletic personnel via cell phone or e-mail of any lightning activity detected within 30 miles of the district. The athletic site will be evacuated once athletic personnel are notified of lightning activity within 8 miles.
 - b. **Decision Making**: The final decision to suspend the activity and seek safe shelter will be made by the staff athletic trainer and/or the event administrator.
6. **Other Emergency Procedures**

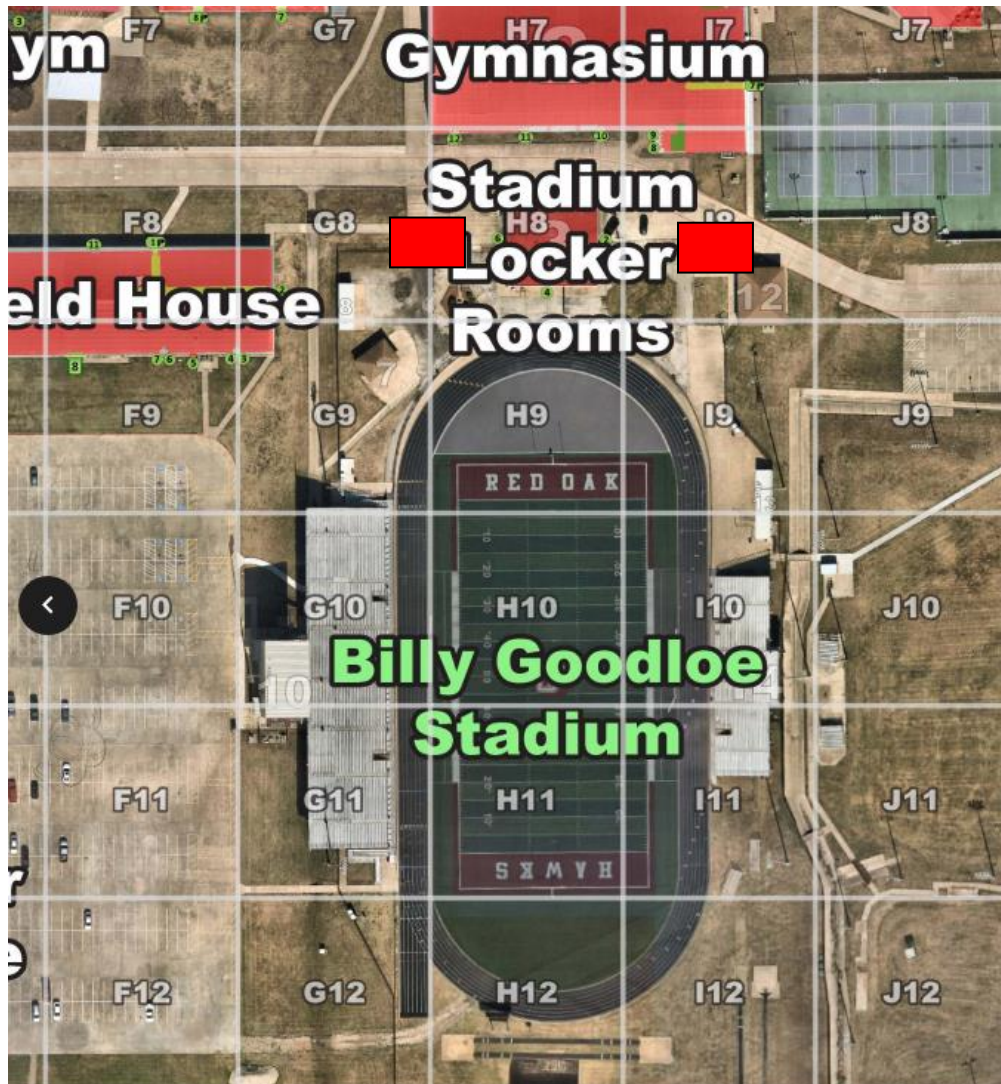
An adult (typically an assistant coach or assistant athletic trainer), will accompany the injured student athlete to the hospital in the ambulance. This will enable a line of communications between the hospital and the Athletic Training Staff.

Venue Map: Red Oak Football, Soccer, and Track

Venue Directions:

Billy Goodloe Stadium – To Louise Ritter Blvd off of TX-342. Turn right on Gaines Way. For emergencies, the ambulance must turn left (between the ROMS and Field House/Stadium) off of Gaines Way. The ambulance will enter Goodloe Stadium from the **Northwest** gate on the home side of the stadium. The Northeast gate should be used as a backup

 Emergency Entrances for Billy Goodloe Stadium



Emergency Action Plan

Facility Location: Buddy Groom Baseball Stadium, Red Oak Softball Field, Red Oak Field House, ROISD Turf Practice Fields, ROISD Tennis Courts

The Emergency Action Plan is activated when breathing and or circulation are compromised, or there is a large amount of bleeding or other trauma. Parents or Guardians are notified of the student-athlete's emergency by the head coach or the delegated assistant coach with assistance by the staff Athletic Trainer and/or physician(s).

- 1. Responsibility of the Emergency Care Team** (Staff Athletic Trainer, Head Coach of acting Head Coach, with assistance by Athletic Training Students.)
 - a. Emergency Care Provider-** Handles emergency situation (CPR/AED Certified)
 - b. Facilitator-** Coordinates emergency care
 - I. Send team members to assign tasks.
 - c. Telephone Caller-**Contacts EMS #911
 - I. Report nature and severity of the injury.
 - II. Give directions to the injury site.
 - III. Remain in the phone until the operator hangs up.
 - d. Bystander Control-** Keep all non-involved personnel away from injury site.
 - e. Emergency vehicle escort-** Locate keys to gate or door.
 - I. Go to the designated location and direct emergency vehicle to injury site.
- 2. Phones**
 - a. Location –** ROHS Field House, Staff Athletic Trainer cell phones
 - b. Emergencies- 911**
 - c. Athletic Training Room** 972-617-3535; 6018
 - d. Head Athletic Trainer Cell** 859-912-4663
 - e. Assistant Athletic Trainer Cell** 806-884-9913
 - f. Assistant Athletic Trainer Cell** 817-231-1959
- 3. Gates/Keys/Locks**
 - a. Which Gate to use-** South gate adjacent to the 1st base foul pole.
 - b. Who has the keys to the Gates-** Affiliated Coaches, Staff athletic trainer, Campus Police Officer
- 4. Emergency Supplies**
 - a. Location-** (AED, splints, crutches) end of the 3rd Base dugout
 - I. (Rubber gloves, bandages, Ice Bags) In the athletic training kit that is in the dugout during practice or games.
- 5. Severe Weather**
 - a. Lightning-**Perry Weather will alert all athletic personnel via cell phone or e-mail of any lightning activity detected within 8 miles of the district. The athletic site will be evacuated once athletic personnel are notified of the lightning activity.
 - b. Decision Making-** The final decision to suspend the activity and seek safe shelter will be made by the staff athletic trainer and/or the event administrator.

6. Other Emergency Procedures

An adult (typically an assistant coach or assistant athletic trainer), will accompany the injured student athlete to the hospital in the ambulance. This will enable a line of communications between the hospital and the Athletic Training Staff.

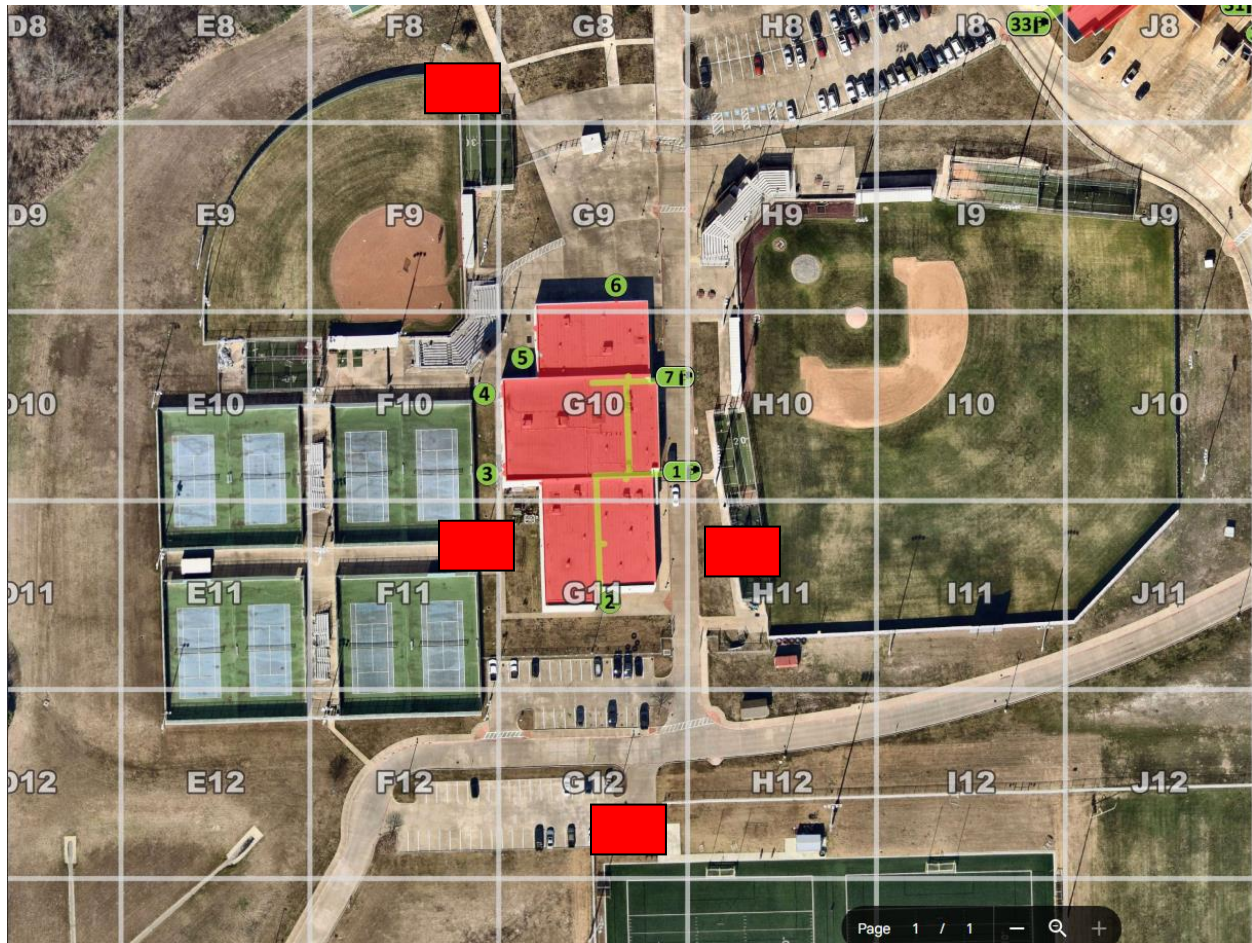
Venue Map: Red Oak South Campus Athletic Area

Venue Directions:

To Louise Ritter Blvd from TX-342. Turn left on Victory Lane. For emergencies at the Baseball field, the ambulance entrance to the field is located on southwest corner of the gated fence. For emergencies at the softball stadium, the ambulance must enter through the northeast gate. For emergencies at the turf fields the ambulance will enter through the northwest gate. For emergencies at Tennis EMS will enter at the east gate.



Emergency Entrances for associated facilities



Emergency Action Plan

Facility Location: Red Oak High School Gymnasiums

Men's/Women's Basketball, Volleyball

The Emergency Action Plan is activated when breathing and or circulation are compromised, or there is a large amount of bleeding or other trauma. Parents or Guardians are notified of the student-athlete's emergency by the head coach or the delegated assistant coach with assistance by the staff Athletic Trainer and/or physician(s).

1. Responsibility of the Emergency Care Team (Staff Athletic Trainer, Head Coach of acting Head Coach, with assistance by Athletic Training Students.)

- a. **Emergency Care Provider-** Handles emergency situation (CPR/AED Certified)
- b. **Facilitator-** Coordinates emergency care
 - I. Send team members to assign tasks.
- c. Telephone Caller-Contacts EMS #911
 - I. Report nature and severity of the injury.
 - II. Give directions to the injury site.
 - III. Remain in the phone until the operator hangs up.
- d. **By Stander Control-** Keep all non-involved personnel away from injury site.
- e. **Emergency vehicle escort-** Locate keys to gate or door.
 - I. Go to the designated location and direct emergency vehicle to injury site.

2. Phones

- a. **Location** – Basketball Offices & Athletic Training Room
- b. **Emergencies-** 911
- c. **Athletic Training Room** 972-617-3535; 6018
- d. **Head Athletic Trainer Cell** 859-912-4663
- e. **Assistant Athletic Trainer Cell** 806-884-9913

3. Doors/Keys/Locks

- a. **Which door to use-** South gate adjacent to the 1st base dugout.
- b. **Who has the keys to the Gates-** Basketball coaches, Staff Athletic Trainer, Hall Monitor, Resource officer

4. Emergency Supplies

- a. **Location-** (AED, splints, crutches) Will be located in the Athletic Training Room. An additional AED is located on the wall adjacent to the fire extinguisher in the L Davinci hallway.
 - I. (Rubber gloves, bandages, Ice Bags) these materials will be located in the athletic training kit behind the home bench. Additional materials will be found in the athletic training room D-109.

5. Severe Weather

- a. **Lightning-**Perry Weather will alert all athletic personnel via cell phone or e-mail of any lightning activity detected within 8 miles of the district. If necessary the athletic site will be evacuated once athletic personnel is notified of the lightning activity.
- b. **Decision Making-** The final decision to suspend the activity and seek safe shelter will be made by the staff athletic trainer and/or the event administrator.

6. Other Emergency Procedures

An adult (typically an assistant coach or assistant athletic trainer), will accompany the injured student athlete to the hospital in the ambulance. This will enable a line of communications between the hospital and the Athletic Training Staff.

Venue Map: Red Oak High School Gymnasiums

Venue Directions:

To Louise Ritter Blvd off TX-342. Turn left on Victory Ln. Follow road until school is on your left. For emergencies at the basketball/volleyball gyms the ambulance entrance is the southeast double door

 Emergency Entrance



Venue Map: ROHS Dance Hall/Band Area

Venue Directions:

To Mighty Hawk Blvd off TX-342. Follow road until you pass front of school, turn right to end up on side of school (school building on your right). EMS will enter via **Door 7 (North)**.



Emergency Action Plan: ROMS Gyms

Red Oak Middle School
154 Louise Ritter Blvd Red Oak, Texas 75154



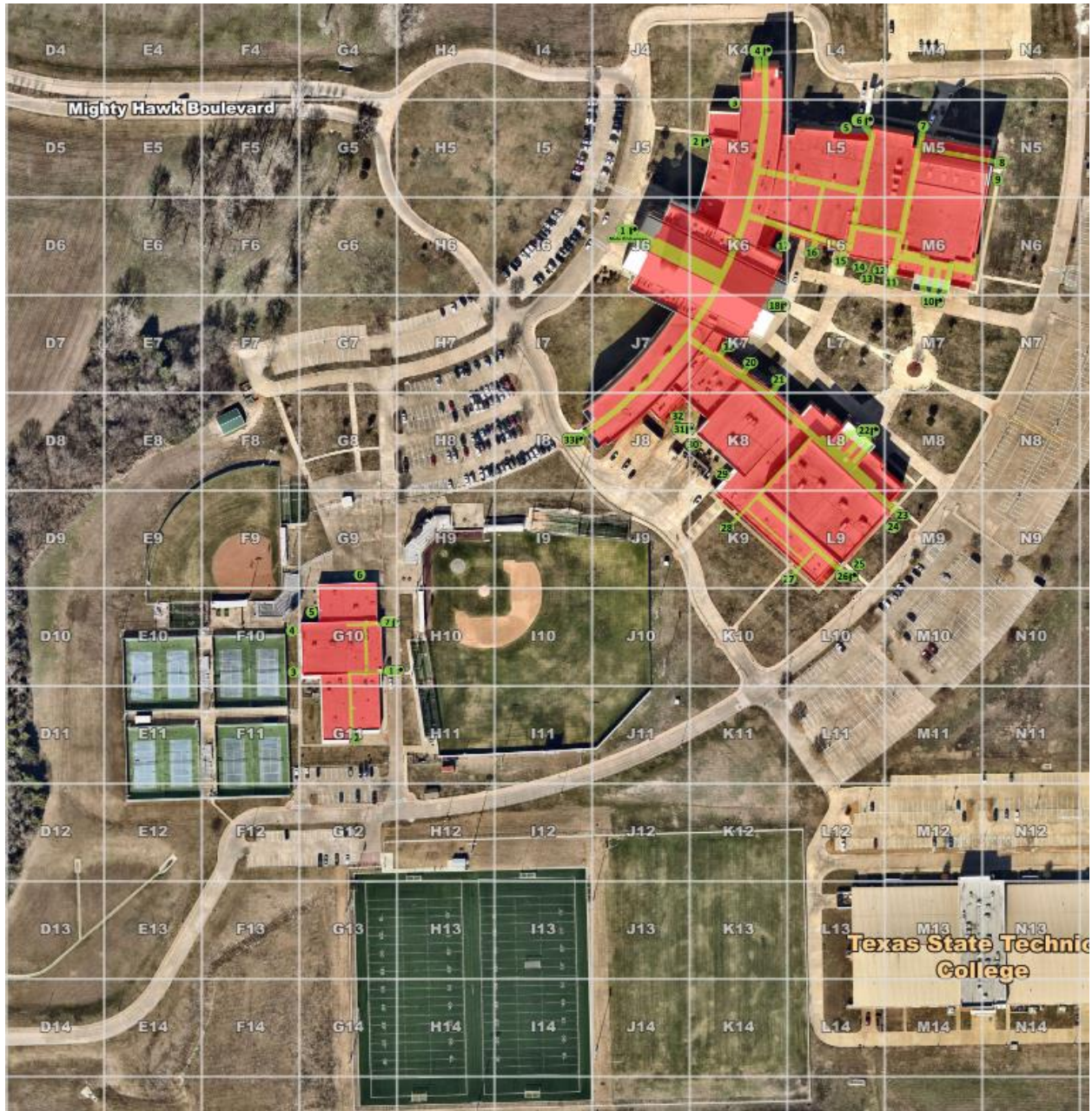
Emergency Entrance for *ROMS Gyms*

Any emergencies that occur in the ROMS Gymnasium will be accessed by EMS via the **north** entrance area



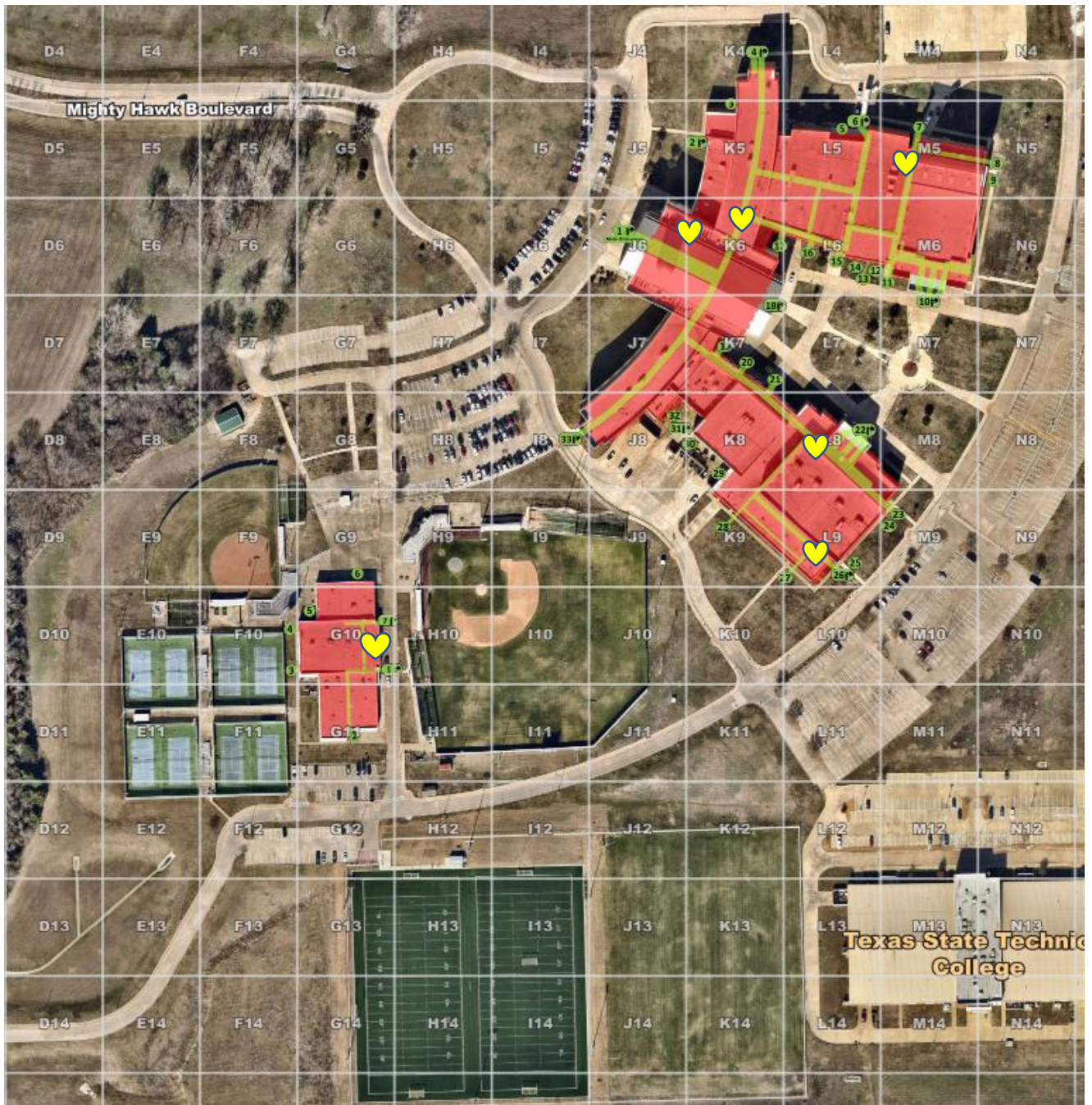
RED OAK EMERGENCY PLAN FOR ATHLETICS

Aerial View of Red Oak High School

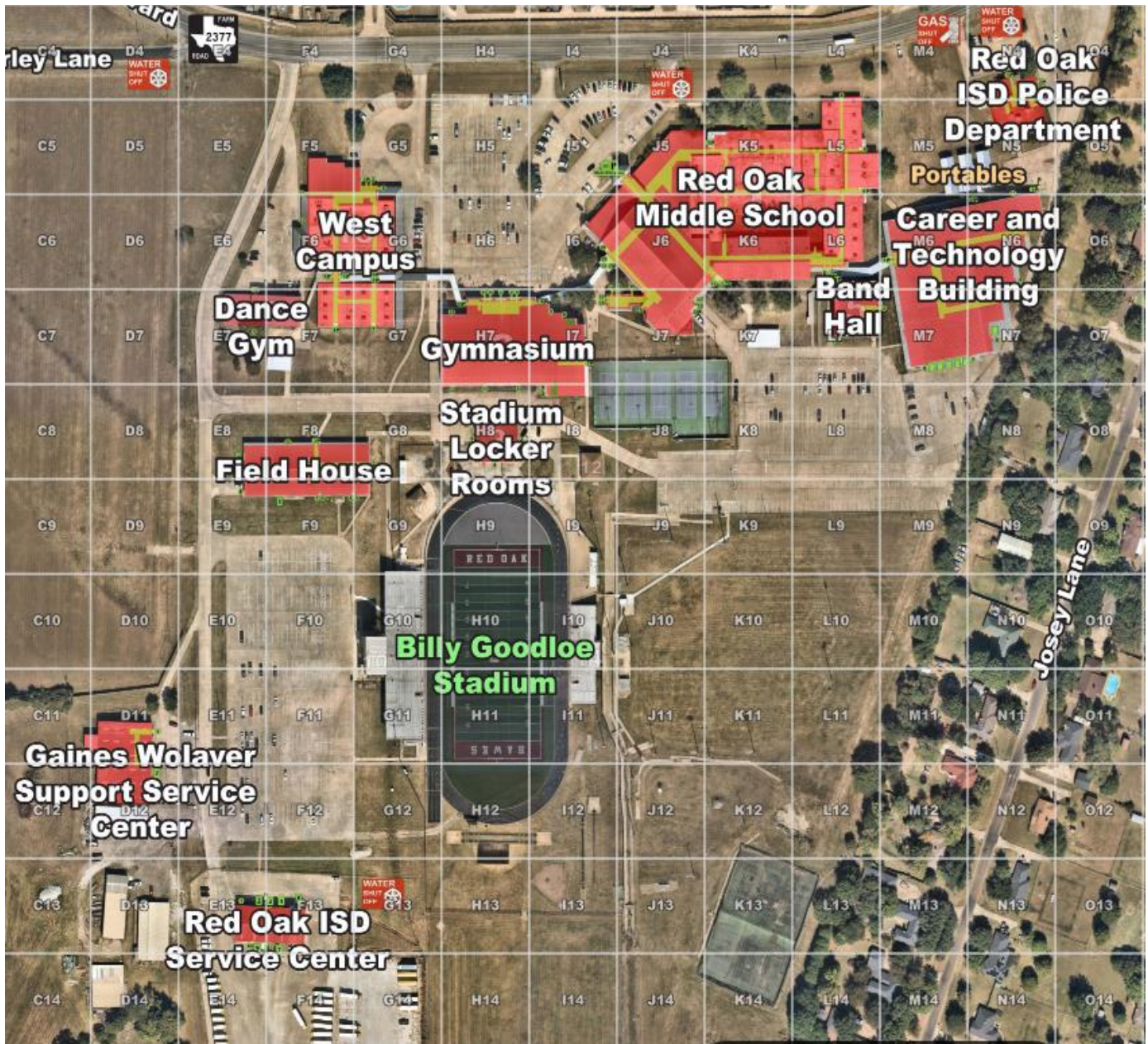


RED OAK HIGH SCHOOL AED and CLINIC LOCATIONS

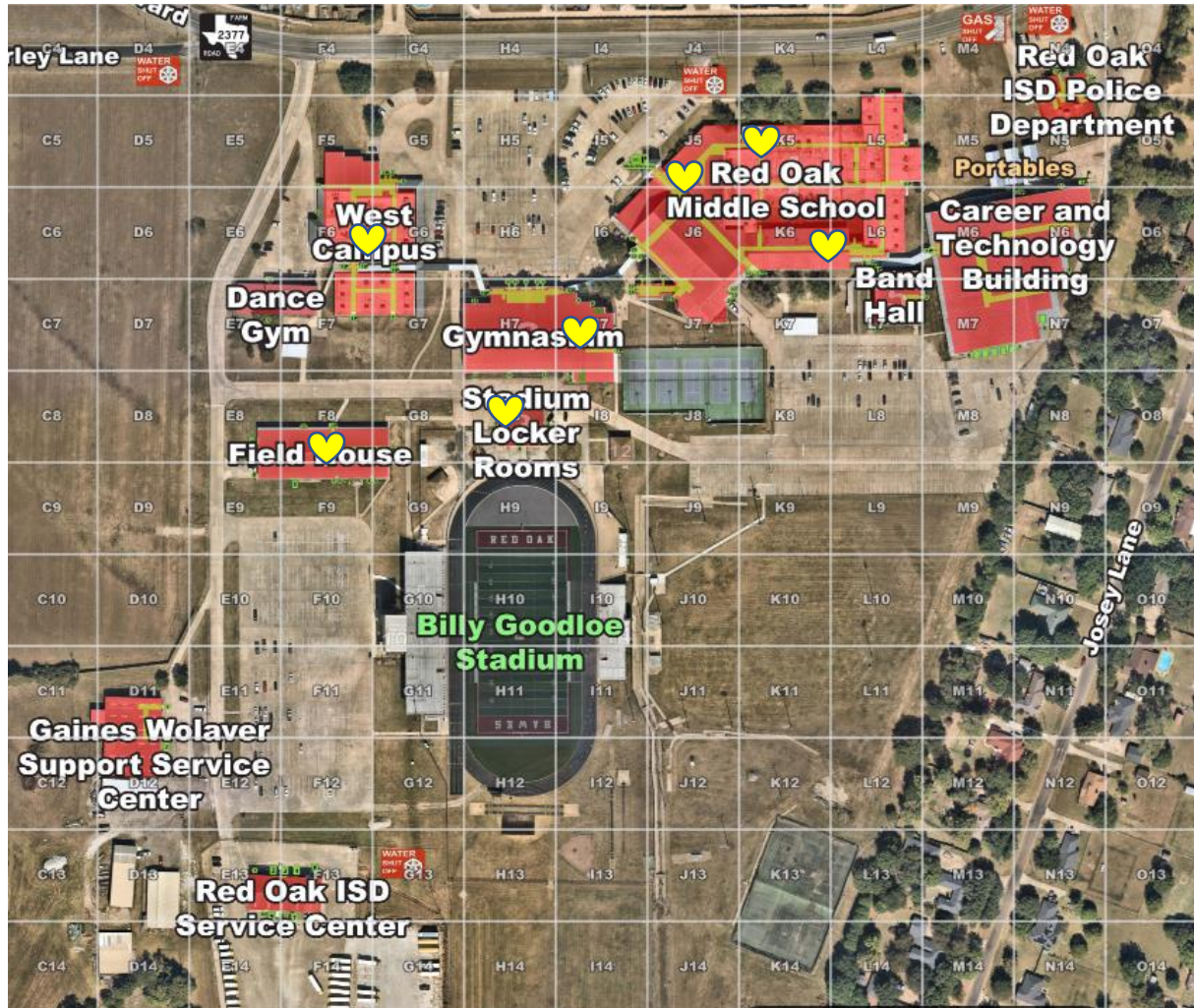
Appendix B



RED OAK EMERGENCY PLAN FOR ATHLETICS
Aerial View of Red Oak Middle School



RED OAK MIDDLE SCHOOL AED and CLINIC LOCATIONS



Appendix E – Situational Procedure

Heat Illness

- Cold Immersion Tubs will be kept outside next to Turf Practice Fields (ROHS) and North end of Goodloe Stadium (ROMS)
- S/S:
 - Lightheaded
 - Dizziness
 - Fatigue
 - “Out of it”
 - Sweating
 - Fall/collapse
- Steps:
 - Immediately remove athlete from play
 - Remove protective equipment (if applicable)
 - Transport athlete to cold tub
 - Administer rectal temp
 - Submerge athlete in ice water up to chest/neck
 - Support athlete head/neck if incoherent as to not slip underwater
 - Assess temperature immediately and periodically
 - Keep athlete in tub until symptoms improve
 - If symptoms do not improve rapidly or athlete is incoherent/unconscious at any point activate EMS

Diabetic Emergency – Hypoglycemia

- S/S:
 - Lightheaded
 - Fatigue
 - Excessive Sweating
 - Dry tingly mouth
 - Hunger
 - Shakiness
- Steps:
 - If athlete is diabetic and has Glucagon pen, inject pen into quad, buttock, or shoulder
 - If athlete does not have glucagon pen, administer sugary foods if coherent, if incoherent contact EMS immediately
 - If available, rub glucose cream along gums of incoherent athlete
 - Consistently monitor vitals/responsiveness for signs of improvement

Sickling (Sickle Cell Anemia Episode)

- S/S:
 - Fatigue
 - Fall/Collapse
 - Shortness of breath
 - Lower extremity/back “cramping”
 - Muscle will not feel like its cramping upon touch
 - ***Athlete will either recover quickly after fall or deteriorate quickly
 - ***If athlete does not improve quickly with rest/after fall immediately call EMS
- Steps:
 - If athlete is Sickle Cell + alter practice to involve rest periods for this athlete as necessary
 - Activate EMS based on S/S above
 - Monitor vitals
 - Be ready to perform CPR/Use AED
 - Administer oxygen 10L/min via non-rebreather mask if available

Asthma/Exercise Induced Bronchospasm

- S/S:
 - Wheezing
 - Coughing
 - Tight Chest
 - Shortness of breath
 - Red face
 - Panicked look
- Steps:
 - Try to calm athlete down
 - Instruct them to breath deeply in nose and out mouth
 - Administer inhaler if they have one
 - **Rescue inhalers in Athletic Training Kit in ATR**
 - Call 911 if symptoms deteriorate
 - Be ready to perform CPR/Use AED

Exercise Associated Hyponatremia (EAH)

- *****Will Appear similarly to Heat Stroke But MUST Be Treated Differently*****
 - Defined as low sodium/metabolite concentration due to overconsumption of fluid
- S/S:
 - Fatigue
 - Disoriented
 - Swelling of face and extremities
 - Similar symptoms as heat stroke
- Steps:
 - **Treat initially for heat stroke by placing in cold tub because of difficulty of differentiation**
 - Differentiate diagnosis via rectal temp
 - Feed salty/sugary snacks (available in ATR)
 - Monitor vitals/symptoms for improvement
 - Immediately contact EMS if symptoms deteriorate

Sudden Cardiac Arrest (SCA)

- S/S:
 - Labored breathing
 - Distressed
 - chest pain
 - heart racing/palpitations
 - collapse
- Steps:
 - **Immediately call/designate someone to call 911**
 - Assess vitals; if not breathing w/weak or no pulse immediately begin high-quality CPR **w/AED application**
 - 911 caller should stay on phone whole time
 - Other staff will direct EMS to scene of incident

Seizure

- S/S: Not all may appear together
 - Convulsing
 - “Stimming” (repetitive movement like playing with hair, while “zoned out”)
 - Combative
 - Lack of control
 - Loss of bowel control
 - Note: patients with epilepsy may know the sensation of a seizure coming on. It is important to learn this signs/behaviors
- Steps:
 - Call 911
 - Remove bystanders
 - **Allow patient to have seizure, do not restrain them...**
 - However, remove potentially harmful objects that are near them
 - **DO NOT PUT SOMETHING IN THEIR MOUTH TO KEEP THEM FROM SWALLOWING/BITING THEIR TONGUE**
 - Once seizure resolves roll patient on their side and assess vitals
 - Take other life-saving measures as needed (CPR, oxygen, etc.)