Weymouth High School

Athletic Department

Emergency Action Plan

This plan is intended to guide patient care. Medical conditions and specific medical situations are often complex and require health care providers to make independent judgments. These policies may be modified by practitioners to achieve maximal patient outcomes.

INTRODUCTION

Background

An emergency action plan is a written document that describes the steps to follow during an emergency. These situations can arise at any time and can involve a student-athlete, a coach, an official, a spectator, or health care providers. Having a documented plan is not only best practice, but it also helps eliminate mistakes or oversights when an emergency arises. An emergency action plan allows for examination and improvement to the health care of injured individuals prior to an emergency situation. Further, a formal emergency action plan is warranted from a legal standpoint. A written document should be distributed to all who may be involved in an emergency situation. It should be uniform and concise with the expected procedures outlined. The emergency action plan is discussed, practiced, and reviewed regularly. Additionally, the emergency action plan should be reviewed prior to each event.

Components of an Emergency Action Plan

1. Personnel involved in dealing with the injured patient.
2. Procedure for enlisting Emergency Medical Services (EMS).
3. Procedure for obtaining emergency supplies.
4. List of available emergency supplies.
5. Chain of command.
6. Methods of communication available and locations of each.
7. Location of potential additional medical personnel and contact plan.
8. Address of potential venues.
9. Direction to venue sites.
10. Location and access options to any potential gates or doors necessary for venue or EMS access.

Maintenance of Emergency Equipment & Supplies

Athletic trainers (AT's), athletic training students (ATS's), and other individuals who may be asked to help in an emergency situation should be qualified to use emergency equipment and should also be educated on and adhere to OSHA standards on blood borne pathogens and disease prevention transmission. They must be trained in how to perform CPR, first aid, use an AED, and have knowledge of where emergency supplies are stored. Equipment and supplies should be checked regularly to make sure that they are still in good working condition and will be available at potential venues. If supplies appear to be damaged, inoperable, or unavailable, they should be repaired, replaced, and/or reordered as soon as possible.

Emergency Personnel Utilization

Emergency personnel should be made aware of their roles beforehand, so that if an emergency arises, everyone understands their role. Persons utilized during an emergency may include physicians, athletic trainers, athletic training students, coaches, administrators, as well as, facility personnel. The most qualified personnel should be providing care for the injured parties while the less trained individuals should be given the tasks of calling EMS, retrieving emergency supplies, opening gates or doors, flagging down the ambulance, crowd control, and/or other responsibilities deemed necessary at the time.

1. Presence of qualified person to administer emergency care.

a. May be AT or EMT trained in first aid, CPR, and prevention of disease transmission. This individual(s) should know the emergency action plan in the event it needs to be implemented.

2. Presence or planned access to a physician if needed.

3. Planned access to a medical center.

a. This could be by ambulance or car. The person providing transportation should be provided directions to the medical center. This may also include emergency communication.

4. Emergency equipment and information.

a. Emergency equipment should be present and in good working condition. AT's, ATS's, and coaches should be trained in where to find and how to use equipment properly.

b. Emergency information on all athletes should be up to date in the electronic health record system.

5. Knowledge of emergency action plan.

a. All parties involved should know their role prior to an emergency situation occurring.

6. Certification in CPR, first aid, and prevention of disease transmission (as outlined by OSHA)

a. This should be done annually for anyone involved in the EAP activation process, although increased frequency would be preferred.

Lightning Safety

Prior to any athletic event, weather forecasts should be monitored for the threat of inclement weather. Options for monitoring forecasts include but are not limiting to the national weather service at www.weather.com and verified lightning detection services including but not limited to WeatherSentry and WeatherBug. This policy should be discussed during medical time outs prior to events, with all relevant stakeholders.

The following emergency action plan was developed using the most current recommendations of the National Weather Service, the National Lightning Safety Institute, the NATA Position Statement on Lightning Safety for Athletics and Recreation, as well as, the NCAA Sports Medicine handbook. In the situation where **a clap of thunder is heard, a flash of lightning is seen or a storm capable of producing lighting is within a 12-mile radius:**

1. Seek safe shelter at the **first sound** of thunder. "When Thunder Roars, Go Indoors"

2. When Lightning is observed and no audible thunder is present

a. Open weather app with independently verified lightning detection to view proximity of storm to venue

b. **If the storm and/or any lightning strike** is within **12 miles** safe shelter should be sought immediately.

i. Lightning is capable of striking 10 miles from the rain shaft of a storm

ii. Continue to monitor movement and location of storm.

1. Seek safe shelter immediately once storm is within the 12 mile radius

c. In the event the WeatherSentry or WeatherBug applications is not available or in operation immediately seek safe shelter.

3. Safe shelter is any **fully enclosed building** that involves **plumbing and/or electrical wires** that act to electrically ground the structure. “No place outside is safe when thunderstorms are in the area.”

4. If such a shelter cannot be found, take shelter in any **vehicle with a hard metal roof and closed windows**.

5. While indoors, **stay away** from any the walls, windows, plumbing and electronic devices attached to the walls (including landline telephones). If in a vehicle, avoid contact with the metal frame and radio use.

6. **Designate** a weather watcher to monitor the weather from a safe location.

a. During events where an athletic trainer is providing on-site coverage, the AT will make all decisions regarding suspension and resumption of outdoor activities as outlined in this policy. The web-based application will be used as a resource however the athletic trainer will make a clinical decision. This decision will be unchallengeable. These decisions will be communicated to athletics administration, facilities, coaches, officials, etc. as appropriate. Further, the AT will designate a specific weather watcher without additional responsibilities during the delay.

b. Decisions regarding suspension and resumption of outdoor activities in circumstances where an athletic trainer not present will be made in accordance with this policy by athletics administration, facilities, coaches and/or their appropriate designees. The individual responsible for this decision will designate a weather watcher.

7. No outdoor activities, including but not limited, to practices, games, and conditioning sessions etc. are to be resumed until 30 minutes after the last sign of lightning/thunder or once the storm is outside of the 12-mile radius. The timer will be reset for every clap of thunder heard or lightning strike seen within the 12-mile radius.

Management of Storm-Induced Injuries

Individuals that are struck by lightning do not carry residual charge and may be handled without danger to the medical personnel. The medical personnel should:

1. Evaluate whether the scene is safe. On-going lightning may still be a threat.

2. Safely move the injured individual to a safe shelter.

3. Activate emergency medical response systems if deemed necessary. The use of a cell phone is recommended during electrical storms.

4. Apply any first aid necessary.

Mechanisms of Lightning Injury

- **Direct strike**: Occurs to the head, current may enter the orifices causing eye and ear injuries. When assuming the lightning-safe position, one can cover their ears to help avoid this type of trauma.

- **Contact injury**: Occurs when the victim is touching an object that is in the pathway of a lightning current.

- **Side flash**: Lightning may strike an object near the victim and then jumps from that object to the victim. The chance of a side flash is increased under a shelter such as a small picnic shelter or next to a tree.

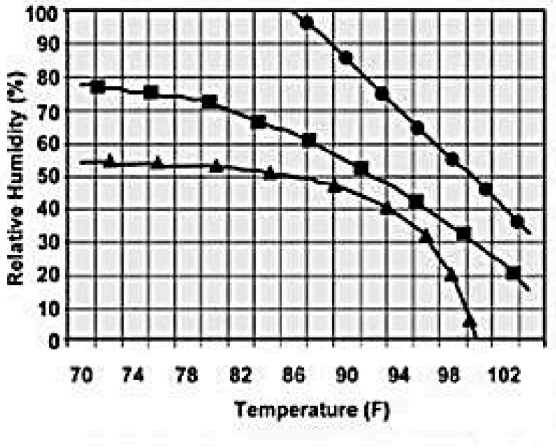
- **Step voltage or ground current**: Current from lighting radiates outward from strike point. When assuming lightning safety position, place feet close together to avoid injury.

- **Blunt injury**: Lightning current can create abrupt heating/cooling of air leading to explosive/implosive forces that cause injury.

HOT WEATHER POLICY

Prevention of Heat-Related Injuries

- All outdoor athletic events at Weymouth High School operate under guidelines highlighted in the following table. The certified athletic trainer is responsible for communicating to all athletic personnel and employing these guidelines.



Temperature	Chart Area	Guidelines/Recommendations
Low Risk Zone (WBGT < 65 deg F)	Beneath the triangles	○ Perform activity as planned ○ Include 5-10 minute fluid breaks every 20-30 minutes
Mild Risk Zone (65 deg F < WBGT < 75 deg F)	Above triangles, but beneath squares	○ Include 5-10 minute fluid breaks every 20-25 minutes ○ If applicable, only upper body pads are to be worn
Moderate Risk Zone (75 deg F < WBGT < 85 deg F)	Above squares, but beneath circles	○ Include 5-10 minute fluid breaks every 15-20 minutes ○ If applicable, no pads are to be worn

High Risk Zone (WBGT > 85 deg F)	Above circles	○ Consider canceling outdoor activities

Signs & Symptoms of Heat-Related Injuries

Exercise-associated muscle cramps ● Intense pain/cramping ● High sweat rate ● Dehydration/Thirst ● Fatigue	**Heat Syncope** ● Dizziness/lightheadedness/syncope ● Fatigue ● Tunnel vision ● Pale, sweaty skin ● Bradycardia
Exercise (heat) exhaustion ● Core temp (97.0 – 104.0 deg F) ● Dehydration ● Dizziness/lightheadedness/syncope ● Headache ● Nausea ● Intestinal cramps/diarrhea ● Profuse sweating ● Cool, pale, clammy skin	**Exertional heat stroke** ● Core temp (> 104.0 deg F) ● Dizziness ● Irrational behavior ● Confusion/disorientation ● Altered level of consciousness ● Hot skin ● Tachycardia (100-120 bpm) ● Hypotension ● Hyperventilation ● Vomiting
Exertional hyponatremia ● Core temp (< 104.0 deg F) ● Excessive fluid consumption ● Nausea ● Vomiting ● Swelling of extremities ● Progressive headache ● Confusion/disorientation ● Altered level of consciousness	**Exertional sickling** ● Muscle cramping ● Pain ● Swelling ● Weakness ● Inability to catch one's breath ● Fatigue

Assessing Core Temperature

Assess the individual to determine nature and degree of illness. Use of a rectal thermometer is the most accurate method of accessing core temperature and allows for differentiation between many of the similar sign & symptoms between heat-related injuries. Core temperature should be assessed rectally in all circumstances where the necessary equipment is available.

Management of Heat-Related Injuries

- Activate EMS by calling 911.

- If a certified athletic trainer is NOT PRESENT:

    1. Assist the patient to the best of your ability.

    2. Activate EMS if deemed necessary.

    3. If an AT is present on campus, call him/her.

4. If outside normal hours, refer the athlete to the South Shore Hospital Emergency Department or comparable emergency room for immediate care and notify the AT.

- If a certified athletic trainer is PRESENT:

    1. Determine if EMS needs to be activated. If so, designate another individual to activate the EAP.

2. Treat the individual according to current medical practices per table below.

    3. Ensure notification to the Medical Director.

- Any patient who is treated for a heat-related illness MUST follow up with a physician for clearance PRIOR to returning to activity.

Exercise-associated muscle cramps ● Replace lost fluids w/ high sodium drink ● Mild stretching & massage ● Consider IV fluids (as available)	**Heat syncope** ● Move athlete to shaded area ● Monitor vital signs ● Elevate legs above head ● Rehydrate
Heat exhaustion ● Measure core temp w/ rectal thermometer ● Remove excess clothing ● Cool athlete w/ fans, ice towels, or ice bags if temp > 102 deg F ● Consider referral to physician if recovery is not rapid	**Exertional heat stroke** ● Active EMS ● Measure core temp w/ rectal thermometer ● Assess cognitive function ● Lower core temp to 102 deg F quickly (cold water immersion 35 – 59 deg F) ● EMS transport
Exertional hyponatremia ● Rule out heat stroke and heat exhaustion ● Differentiate from heat stroke w/ core temp (should be < 104 deg F) ● Refer for treatment with IV fluids	**Exertional sickling** ● Administer oxygen with non-rebreather mask at rate of 15L/min ● Monitor vital signs ● Consider referral to physician or activation of EAP if vital signs decline or recovery is not rapid ● Sickling collapse should be treated as a medical emergency

Cold-Water Submersion

Cold-water submersion (35 – 59 deg F) is the most effective way of cooling the body if heat stroke is suspected. Use of a rectal thermometer is the most effective means of monitoring core temperature. The athlete should be removed from the water when core temperature reaches 102 deg F and transported via EMS.

Return to Play after Exertional Heat Stroke

There are currently **no evidence-based guidelines** concerning the proper return to play progression after suffering from exertional heat stroke. The following are the most recent guidelines published:

1. Refrain from exercise for at least 7 days following release from medical care.
2. Follow up in about 1 week for physical exam and repeat lab testing or diagnostic imaging of affected organs that may be indicated, based on the physician's evaluation.
3. When cleared for activity, begin exercise in a cool environment and gradually increase the duration, intensity, and heat exposure for 2 weeks to acclimatize and demonstrate heat tolerance.
4. If return to activity is difficult, consider a laboratory exercise-heat tolerance test about one month post-incident.
5. Consider clearance for full competition if heat tolerance exists after 2-4 weeks of training.

COLD WEATHER POLICY

The following policy guides decision making for patient safety regarding environmental cold injuries. Exposure to cold presents an inherent risk of injury. It is important to note that the following guidelines for activity and associated limitations apply only in the ***absence of precipitation***. Precipitation, most notably rain and snow, will affect the risk of environmental cold injury. It is unclear in the literature at exactly what rate of rain or snow fall, in conjunction with the air temperature and wind rate, conditions become unsafe. However, it is clear that precipitation significantly increases the risk of environmental cold injury. Therefore, in circumstances involving precipitation, decisions about participation restrictions will be made by the athletic trainer on an individual basis based upon the current conditions. All outdoor athletic events at Weymouth High School operate under the guidelines in the following table. The certified athletic trainer is responsible for communicating to all athletic personnel and employing these guidelines. Please note the following temperatures ranges account for wind-chill.

Wind-Chill Temperature	***Guidelines/Adjustments***
< 25 deg F	- Be aware and ready for possibility of cold injuries. - All practice participants will take reasonable precautions to cover exposed skin. This includes, at minimum: practice participants should wear long sleeves, pants, gloves, and hats during warm up activities. Hats and gloves should remain on during practice. All non-participating student-athletes should have exposed skin covered.
≤ 20 deg F	- All practice participants must wear appropriate clothing/equipment at all times while outdoors. This includes, at minimum: long sleeves, pants, gloves, and hats. The AT will make additional clothing or equipment recommendations as seen fit. Any practice participant not in appropriate clothing/equipment must be removed from practice and remain indoors until appropriate clothing/equipment is worn.

	- All non-participating student-athletes should remain indoors.
≤ 15 deg F	- Must comply with previously stated clothing/equipment requirements. - Warm up and cool down activities should occur indoors. - Practice plan should be altered to decrease "down time" where participants are not moving. - Appropriate practice length should be determined, in advance, by head coach and AT based upon the intensity of the practice plan. - All non-participating student-athletes should remain indoors.
≤ 10 deg F	- Must comply with previously stated clothing/equipment requirements. - Warm up and cool down activities must occur indoors. - Practice plan should be altered to decrease "down time" where participants are not moving. - Maximum exposure time: 60 minutes *(any further exposure that day must follow a period of time that includes complete re-warming and the changing of all base layer clothing)* - All non-participating student-athletes should remain indoors.
≤ 0 deg F	- Cancel event and reschedule

All temperature readings for interpretation of the above chart will be taken by the athletic trainer immediately preceding the scheduled practice or game, using the Kestrel® 5400 Pocket Weather Tracker. Communication regarding readings taken prior to this will occur between the head coach and the AT on an individual basis.

NOTE: *the above guidelines may be altered by the athletic trainer in the presence of other mitigating factors, such as, portable heaters, temporary re-warming facilities, altering game play rules (e.g. extended half-times for rewarming), etc. These decisions will be made on an individual basis.*

For events involving participants subject to this policy that are not directly covered by an AT and occur off campus, a decision will be made based upon the most currently available data from the National Weather Service. This information can be located at:

http://www.weather.com/weather/today/Boston+MA+USMA0046?lswe=boston%20ma&from=searchbox_localwx

Recognition of Cold-Related Injuries

Recognizing early signs of cold-induced stress may prove to be important in preventing cold-related injuries. The following signs and symptoms are considered to be early warning signs:

- shivering
- dysesthesia at the distal extremities (e.g. numbness, pain, or burning sensation)
- disorientation
- slurred speech

Signs & Symptoms of Cold-Related Injuries

Mild Hypothermia ● Vigorous shivering ● Increased blood pressure ● Rectal temperature between 95-98.6°F ● Fine motor skill impairment ● Lethargy ● Apathy ● Mild amnesia	***Frostbite*** ● Edema ● Erythema ● Stiffness ● Tingling or burning ● Mottled or gray skin appearance ● Tissue that feels hard and does not rebound ● Vesicles ● Numbness or anesthesia
Moderate/Severe Hypothermia ● Cessation of shivering ● Depressed vital signs ● Rectal temperature less than 95°F ● Impaired mental function ● Slurred speech ● Unconsciousness ● Gross motor skill impairment	***Chilblain/pernio*** ● Small erythematous papules ● Edema ● Tenderness ● Itching ***Immersion (trench) foot*** ● Burning, tingling, itching ● Loss of sensation ● Cyanotic/blotchy skin ● Swelling ● Blisters ● Skin fissures

****Any situation where an individual has been exposed to cold-weather and would like to lay down and rest should be considered a medical emergency and necessitate activation of the EAP.***

Management of Cold-Related Injuries

- Activate EMS by calling 911
- If a certified athletic trainer is NOT PRESENT:

    1. Assist the student-athlete to the best of your ability

2. Activate EMS if deemed necessary and/or call the athletic trainer
3. If AT is not available, refer the athlete to the South Shore Hospital Emergency Department or comparable emergency room for immediate care

- If a certified athletic trainer is PRESENT:

    1. Determine if EMS needs to be activated. If so, designate another individual to activate the EAP.

2. Treat the individual according to current medical practices per table below

- Any patient who is treated for a cold-related illness MUST follow up with a physician for clearance PRIOR to returning to activity.

Mild Hypothermia ● Treat for any life-threatening conditions ● Assess and monitor rectal temperature ● Remove wet or damp clothing, insulate with warm dry fabrics (including covering the head), and move to a warm environment, if possible ● Apply heat to trunk, axilla, chest wall, and groin ● Avoid applying friction massage	**Frostbite** ● Rule out hypothermia ● Tissue plasminogen activators (tPA) may be used to prevent amputation in severe cases ● Immerse area in warm water (98 – 104 deg F) ● Protect area ● If tissue sloughing involved, infection control warranted.
Moderate/Severe Hypothermia ● Treat for any life-threatening conditions ● Assess and monitor rectal temperature ● Remove wet or damp clothing, insulate with warm dry fabrics (including covering the head) ● If signs of cardiac arrhythmia are present, move with extreme caution to avoid paroxysmal ventricular fibrillation ● Apply heat to trunk, axilla, chest wall, and groin ● Avoid applying friction massage	**Immersion (trench) foot** ● Clean and dry area ● Apply warm packs or soak in warm water (102-110°F) ● Replace with dry socks & footwear **Chilblain/pernio** ● Remove wet or constrictive clothing ● Wash and dry the area gently ● Elevate the affected area and cover with warm, loose, dry fabrics ● Do not disturb blisters, do not apply friction massage, do not apply creams or lotions, do not use high levels of heat, and do not allow weight bearing on affected area

ROLE DELINEATION/CHAIN OF COMMAND IN EMERGENCY SITUATIONS

Role delineation is assigning roles to individuals in order to most efficiently execute the emergency action plan. Depending on staffing, more than one person can carry out each role or multiple roles can be carried out by one person. The AT will assign roles to the individuals present. The following list is an example of role delineation in an emergency. At least two individuals are listed for each role.

- Immediate care of the injured person and decision whether or not to activate EMS:

1. AT/Physician
2. ATS (if available)

- Activation of EMS:

1. ATS (if available)
    2. Coach/Assistant Coach
    3. Staff/Administrators

- Equipment retrieval/assistance to care provider:

1. ATS (if available)
    2. Coach/Assistant Coach
    3. Staff/Administrators

- Meets Ambulance/Open Appropriate Entrances:

1. ATS (if available)
    2. Coach/Assistant Coach
    3. Teammate
    4. Staff/Administrators

- Player Control:

1. Coach/Assistant Coach
    2. Team Captain

- Spectator Control:

1. Staff 2. Coach/Assistant Coach
    3. Administrators

- During all emergencies, the most qualified medical personnel will direct care of the injured party/parties. The person stabilizing the cervical spine will have the authority to command the care procedures. Multiple rescuers will be necessary for stabilizing the cervical spine when caring for an equipment laden athlete. Any individual who identifies themselves as a medical healthcare provider during an emergency situation should remain at the scene until dismissed by the individual directing the care of the injured party/parties.
- In the event of multiple injuries, the AT and ATS, if present, will triage the injured parties and provide the appropriate care.
- Visiting AT will treat his/her patients with the assistance of home AT/ATS if deemed necessary by either party.
- When an injury occurs to a spectator and first aid is not present, the AT will assume control of the situation and direct care of the injured parties. The role delineation will follow identically for a spectator as it would for an injured athlete.

<u>AED Information</u>

Building and Address	***Quantity***	***Location***
Weymouth High School 1 Wildcat Way South Weymouth, MA 02190	1	On wall outside the athletic training room
	1	On wall inside the nurses office
	1	On wall outside of the gymnasium
	1	On wall outside of the security desk

Turf Field	1	On wall inside the storage building closest to the press box
Athletic Training Room	(4)	These AED's are for teams use for off-campus and are stored in cabinets.

COACHES AND TEAMS TRAVELING WITHOUT A CERTIFIED ATHLETIC TRAINER

If medical personnel is present at the venue:

- Prior to the event introduce yourself to the medical staff covering event.
- If a student-athlete needs transportation to a hospital, have someone go with the injured individual, preferably a school staff member.
- All coaches should travel with the following information for each student-athlete:
  1. Medical history summary
  2. Insurance information
  3. Emergency contact information
- If the hospital visit requires the student-athlete to stay for longer than the trip was planned, a member of the coaching staff should stay with the student-athlete.
- After ensuring the athlete is appropriately cared for on scene, contact the athletic trainer to inform him/her of the incident.

If medical personnel is not present at the venue:

- If you are at an athletic venue, attempt to find the protocol that will be followed if an emergency occurs.
- During travel, coaches should know both the name of and directions to their current location in the event they need to provide EMS with this information.
- If there is no medical coverage, assist the student-athlete to the best of your ability. If further assistance is needed, call 911 or the number given to you in the protocol, if applicable.
- If a student-athlete needs transportation to a hospital have someone go with the injured individual, preferably a school staff member.
- All coaches should travel with the following information for each student-athlete
  1. Medical history summary
  2. Insurance information
  3. Emergency contact information
- If the hospital visit requires the student-athlete to stay for longer than the trip was planned, a member of the coaching staff should stay with the student-athlete.

- After ensuring the athlete is appropriately cared for on scene, contact the athletic trainer to inform him/her of the incident.

HOSPITAL DIRECTIONS

South Shore Hospital Emergency Department: (55 Fogg Road, South Weymouth MA 02190) should be utilized during an emergency involving an incident on Weymouth High School's campus.

From all venues at the turf field, outdoor track, softball field, tennis courts, gymnasium, wrestling room:

Turn right onto Pleasant Street. Continue along Pleasant Street for 0.6 miles. Turn right onto Columbian Street. In 400 feet, turn left onto Fogg Road. The Emergency Department will be on your right.

Off Campus Sites: Depending on venue location, injured patients may not be transported to South Shore Hospital for a serious injury due to proximity of other hospitals. For directions to these hospitals, you should contact campus police at that school and ask for directions.

HOSPITAL INFORMATION CHART

HOSPITAL	ADDRESS AND PHONE NUMBER	DISTANCE FROM WEYMOUTH HIGH SCHOOL	TRAUMA LEVEL
South Shore Hospital	55 Fogg Road South Weymouth, MA 02190 781-624-8000	1.1 miles	Level 1

GENERAL	ADDRESS	EMERGENCY CALL	KEYS	LIGHTNING SHELTER
Track/Turf/Grass Field Softball Field Tennis Courts	1 Wildcat Way South Weymouth, MA 02190	911	Indoor Master Key	Weymouth High School

- Role of First Responders

1. Immediate care of injured athlete

2. Activation of EMS – Designate an individual to call 911 for ambulance. Caller will provide pertinent information to the dispatcher.

3. Emergency equipment retrieval (far right side of the turf storage shed by the AED and/or AT Room)

4. Direction of EMS to scene

a. Someone must be stationed at the venue entrances to greet the ambulance.

b. Ambulance should enter by the score board side of the turf field and drive onto the field.

c. All gates must be unlocked while the EAP is being activated to ensure no delay of care when the ambulance arrives.

5. Crowd control – Designate an individual to secure area for first aid providers and move bystanders away from the area



- Venue Directions: Arrive at Weymouth High School via Pleasant Street or Park Avenue.

- Emergency Personnel: Certified athletic trainer may be on site for practices and games. In the event of an emergency, first contact EMS (911). Next, contact athletic training (781-337-7500 ext. 25121) to request additional assistance.

- Emergency Communication: The certified athletic trainer will carry a cell phone for emergency use. Landline telephones are available inside the school.

- Emergency Equipment: Athletic trainer may bring emergency equipment to the venue during athletic practices and/or events. The locations listed for each venue are the closest where equipment is permanently stored and would be available for use during emergency (most notably in the AT room).

- Lightning-Safety: At the first sign of thunder OR lightning:

  1. Seek safe shelter in the lightning safe shelter identified for each applicable venue.

2. If you cannot reach shelter, take shelter in any vehicle with a hard metal roof and closed windows. NOTE: Area under the bleachers IS NOT safe.

3. While indoors, stay away from any the walls, windows, plumbing and electronic devices attached to the walls (including landline telephones). If in a vehicle, avoid contact with the metal frame and radio use.

4. Designate a weather watcher to monitor the weather from a safe location.

5. No outdoor activities are to be resumed until 30 minutes after the last sign of lightning/thunder. For every sign observed, the 30 minute timer is reset.

GENERAL	**ADDRESS**	**EMERGENCY CALL**	**KEYS**	**LIGHTNING SHELTER**
AT Room/Wrestling Room/Gymnasium	1 Wildcat Way	911	Indoor Master Key	N/A

- <u>Role of First Responders</u>

1. Immediate care of injured athlete

2. Activation of EMS – Designate an individual to call 911 for ambulance. Caller will provide pertinent information to the dispatcher.

3. Emergency equipment retrieval (inside AT room)

4. Direction of EMS to scene

a. Someone must be stationed at the school entrances to greet the ambulance.

b. EMS should enter to the right of the main entrance for the wrestling room and AT room. There is a side door to the building.

c. For the gymnasium, EMS will go up the staircase that is to the right of the main entrance.

5. Crowd control – Designate an individual to secure area for first aid providers and move bystanders away from the area



- Venue Directions: Arrive at Weymouth High School via Pleasant Street or Park Avenue.

- Emergency Personnel: Certified athletic trainer may be on site for practices and games. In the event of an emergency, first contact EMS. Next, contact athletic training (781-337-7500 ext. 25121) to request additional assistance.

- Emergency Communication: The certified athletic trainer will carry a cell phone for emergency use. Landline telephones are available inside the school.

- Emergency Equipment: Athletic trainer may bring emergency equipment to the venue during athletic practices and/or events. The locations listed for each venue are the closest venue where equipment is permanently stored and would be available for use during emergency.

- Lightning-Safety: At the first sign of thunder OR lightning:

    1. Seek safe shelter in the lightning safe shelter identified for each applicable venue.

2. If you cannot reach shelter, take shelter in any vehicle with a hard metal roof and closed windows. NOTE: Area under the bleachers IS NOT safe.

3. While indoors, stay away from any the walls, windows, plumbing and electronic devices attached to the walls (including landline telephones). If in a vehicle, avoid contact with the metal frame and radio use.

4. Designate a weather watcher to monitor the weather from a safe location.

5. No outdoor activities are to be resumed until 30 minutes after the last sign of lightning/thunder. For every sign observed, the 30 minute timer is reset.

GENERAL	**ADDRESS**	**EMERGENCY CALL**	**KEYS**	**LIGHTNING SHELTER**
Legion Memorial Field (781) 340-5015	Commercial St & Middle St, Weymouth, MA 02189	911	None Needed	Garage in concessions building

- Role of First Responders

1. Immediate care of injured athlete

2. Activation of EMS – Designate an individual to call 911 for ambulance. Caller will provide pertinent information to the dispatcher. The caller must also notify the concessions stand so they can take down the traffic bollard to allow the ambulance in.

3. Emergency equipment retrieval

4. Direction of EMS to scene

a. The ambulance should enter in on 899 Commercial Street which is the main entrance to the driveway.

b. The venue is at the corner of Middle and Commercial Streets

5. Crowd control – Designate an individual to secure area for first aid providers and move bystanders away from the area



- Venue Directions: (Provide specific to each venue)

- Emergency Personnel: Certified athletic trainer may be on site for practices and games. In the event of an emergency, first contact EMS. Next, consider contacting athletic training (781-337-7500 ext. 25121) to request additional assistance.

- Emergency Communication: The certified athletic trainer may carry a cell phone for emergency use. Coach should have a cell phone also.

- Emergency Equipment: Athletic trainer may bring emergency equipment to the venue during athletic practices and/or events. If no AT is present, the coach should have a first aid kit and AED.

- Lightning-Safety: At the first sign of thunder OR lightning:

1. Seek safe shelter in the lightning safe shelter identified for each applicable venue.

2. If you cannot reach shelter, take shelter in any vehicle with a hard metal roof and closed windows. NOTE: Area under the bleachers IS NOT safe.

3. While indoors, stay away from any the walls, windows, plumbing and electronic devices attached to the walls (including landline telephones). If in a vehicle, avoid contact with the metal frame and radio use.

4. Designate a weather watcher to monitor the weather from a safe location.

5. No outdoor activities are to be resumed until 30 minutes after the last sign of lightning/thunder. For every sign observed, the 30 minute timer is reset.

GENERAL	ADDRESS	EMERGENCY CALL	KEYS	LIGHTNING SHELTER
Lawrence W. Pingree Elementary School (781) 337-2974	1250 Commercial Street, Weymouth MA 02189	911	None Needed	No Building Available, so seek shelter in vehicles

- Role of First Responders

1. Immediate care of injured athlete

2. Activation of EMS – Designate an individual to call 911 for ambulance. Caller will provide pertinent information to the dispatcher.

3. Emergency equipment retrieval (???)

4. Direction of EMS to scene

a. The ambulance should enter through 894 Broad Street.

b. There is a firelane in the back of the school adjacent to the playground for the ambulance.

5. Crowd control – Designate an individual to secure area for first aid providers and move bystanders away from the area



- Venue Directions: (Provide specific to each venue)

- Emergency Personnel: Certified athletic trainer may be on site for practices and games. In the event of an emergency, first contact EMS. Next, consider contacting athletic training (781-337-7500 ext. 25121) to request additional assistance.

- Emergency Communication: The certified athletic trainer may carry a cell phone for emergency use. Landline telephones are identified specific to each venue. Coach should have a cell phone too.

- Emergency Equipment: Athletic trainer may bring emergency equipment to the venue during athletic practices and/or events. If there is no AT present, the coach should have a first aid kit and AED.

- Lightning-Safety: At the first sign of thunder OR lightning:

1. Seek safe shelter in the lightning safe shelter identified for each applicable venue.

2. If you cannot reach shelter, take shelter in any vehicle with a hard metal roof and closed windows. NOTE: Area under the bleachers IS NOT safe.

3. While indoors, stay away from any the walls, windows, plumbing and electronic devices attached to the walls (including landline telephones). If in a vehicle, avoid contact with the metal frame and radio use.

4. Designate a weather watcher to monitor the weather from a safe location.

5. No outdoor activities are to be resumed until 30 minutes after the last sign of lightning/thunder. For every sign observed, the 30 minute timer is reset.

GENERAL	**ADDRESS**	**EMERGENCY CALL**	**KEYS**	**LIGHTNING SHELTER**
Connell Rink and Pool (781) 335-2090	220 Broad Street, Weymouth MA 02188	911	None Needed	N/A

- <u>Role of First Responders</u>

1. Immediate care of injured athlete

2. Activation of EMS – Designate an individual to call 911 for ambulance. Caller will provide pertinent information to the dispatcher.

3. Emergency equipment retrieval (AED on the wall by the pool to the left of the entrance and AED next to the ice rink)

4. Direction of EMS to scene

a. The ambulance should enter through the front entrance of the building

5. Crowd control – Designate an individual to secure area for first aid providers and move bystanders away from the area



- Venue Directions: (Provide specific to each venue)

- Emergency Personnel: Certified athletic trainer may be on site for practices and games. In the event of an emergency, first contact EMS. Next, consider contacting athletic training (781-337-7500 ext. 25121) to request additional assistance.

- Emergency Communication: The certified athletic trainer may carry a cell phone for emergency use. Landline telephones are identified specific to each venue.

- Emergency Equipment: Athletic trainer may bring emergency equipment to the venue during athletic practices and/or events. If there is no AT, the coach should have a first aid kit and AED.

- Lightning-Safety: At the first sign of thunder OR lightning:

    1. Seek safe shelter in the lightning safe shelter identified for each applicable venue.

2. If you cannot reach shelter, take shelter in any vehicle with a hard metal roof and closed windows. NOTE: Area under the bleachers IS NOT safe.

3. While indoors, stay away from any the walls, windows, plumbing and electronic devices attached to the walls (including landline telephones). If in a vehicle, avoid contact with the metal frame and radio use.

4. Designate a weather watcher to monitor the weather from a safe location.

5. No outdoor activities are to be resumed until 30 minutes after the last sign of lightning/thunder. For every sign observed, the 30 minute timer is reset.

GENERAL	**ADDRESS**	**EMERGENCY CALL**	**KEYS**	**LIGHTNING SHELTER**
Libby Field	111 Middle Street Weymouth, MA 02189	911	None Needed	No Building Available, so seek shelter in vehicles

- <u>Role of First Responders</u>

1. Immediate care of injured athlete

2. Activation of EMS – Designate an individual to call 911 for ambulance. Caller will provide pertinent information to the dispatcher.

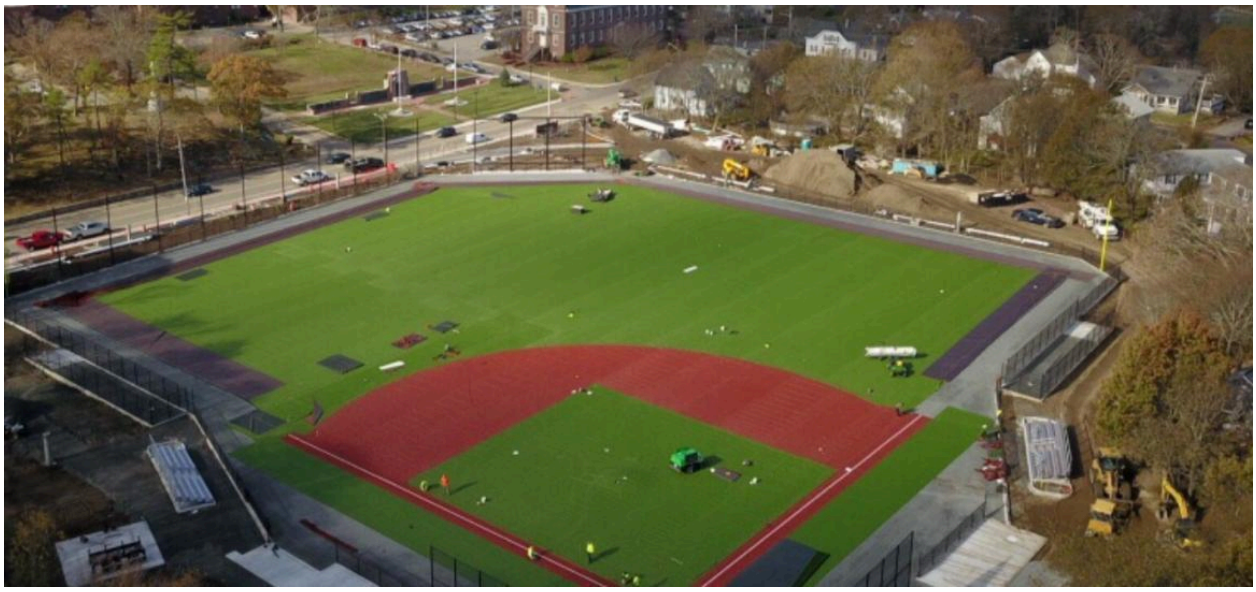
3. Emergency equipment retrieval

4. Direction of EMS to scene

a. The ambulance should enter on Middle Street along the 3rd base side.

b. The gate is not locked. It just pushes open.

5. Crowd control – Designate an individual to secure area for first aid providers and move bystanders away from the area



- Venue Directions: (Provide specific to each venue)

- Emergency Personnel: Certified athletic trainer may be on site for practices and games. In the event of an emergency, first contact EMS. Next, consider contacting athletic training (781-337-7500 ext. 25121) to request additional assistance.

- Emergency Communication: The certified athletic trainer may carry a cell phone for emergency use. Coaches should a cell phone too.

- Emergency Equipment: Athletic trainer may bring emergency equipment to the venue during athletic practices and/or events. If there is not an AT present, coaches should have a first aid kit and AED with them.

- Lightning-Safety: At the first sign of thunder OR lightning:

1. Seek safe shelter in the lightning safe shelter identified for each applicable venue.

2. If you cannot reach shelter, take shelter in any vehicle with a hard metal roof and closed windows. NOTE: Area under the bleachers IS NOT safe.

3. While indoors, stay away from any the walls, windows, plumbing and electronic devices attached to the walls (including landline telephones). If in a vehicle, avoid contact with the metal frame and radio use.

4. Designate a weather watcher to monitor the weather from a safe location.

5. No outdoor activities are to be resumed until 30 minutes after the last sign of lightning/thunder. For every sign observed, the 30 minute timer is reset.

Useful / Emergency Phone Numbers:

Weymouth High School Athletic Trainer (781) 337-7500 ext. 25121

South Shore Hospital Emergency Department
(781) 624-8000

Ambulance
911

Weymouth High School Security
(781) 337-7500 ext. 25207

South Shore Orthopedics
(781) 624-2905

Boston Children's Physicians, Weymouth
(781) 216-3800

Weymouth High School Athletic Director
(781) 337-7500 ext. 25123

Peak Physical Therapy:
Hanover (781) 924-6365
Norwell (781) 347-4686
Quincy (781) 986-0990

Health Express
(781) 626-5160

Convenient MD Urgent Care
(781)927-3000

24 Hour CVS
(781) 335-0404

Mass Eye and Ear, Weymouth
(781) 337-3424

Poison Control
(617) 232-2120

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