

Pomperaug Athletics- Emergency Action Plan

Pomperaug High School Athletics

Emergency Action Plan



Personnel Involved in Development

The following individuals were involved with the creation of this Emergency Action Plan:

Superintendent of Schools: **Joshua Smith**

School District Advising Physician:

School District Director of Facilities: **Joseph Martino**

PHS School Principal: **Dr. Paul Jones**

Athletic Director: **Ron Plasky**

School Nurse: **Kathleen Fitzpatrick, Kathy Johannes**

Athletic Trainer: **Anthony Guglielmo**

Head Custodian: **Guy Veilleux**

Coach Representative: **Danielle McCauley**

Date of Latest Review: 10/22/24

Introduction

Emergency situations may arise at any time during athletic events. Expedient action must be taken in order to provide the best possible care to the student athlete. The development and implementation of an emergency action plan will help ensure that the best care will be provided.

There are a variety of emergency situations that can surface during sports programming. As emergencies may occur at any time and during any activity, all school activities personnel must be prepared. Pomperaug High School has developed this emergency action plan that may be implemented immediately when necessary and provide appropriate standards of emergency care to all sports participants.

This preparation involves formulation of an emergency action plan, proper coverage 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 and training techniques and other safety avenues, some 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 should enable each emergency situation to be managed more appropriately and efficiently.

Prior To An Emergency

The following steps will be taken prior to participation in sports for each season:

1. Parents and students will submit the following documents...
 - a. Permission form and waiver (FamilyID registration) – includes medical history and emergency contact information
 - b. CIAC Sudden Cardiac Arrest Education Form
 - c. CIAC Concussion Education Form
 - d. CIAC Exertional Heat Illness Program Form
 - e. CIAC Mental Health Plan for Student-Athletes Form
2. The Athletic Director will assure that all coaches have completed the legal and required training and have obtained all certifying documents from every coach, including volunteer coaches, prior to any of their athlete's participation. (A list of certifications required of Connecticut coaches is in the CIAC Medical Handbook or can be acquired from the CIAC.)

3. The coaches will receive emergency contact information and medical history (relevant to sports). The coaches will keep this information on hand during all instances where they are engaged with their student/athletes. The coach will also keep water, med kit and supplies on hand at all team practices, contests and events. (See the list of med kit supplies in the coaches' handbook.)
4. The school district will allocate a budget sufficient to purchase needed athletic medical supplies recommended by the athletic trainer and approved by the athletic director.
5. The school district will designate personnel to make repairs and maintain athletic facilities up to safety standards. The school district will establish a line of communication for making safety repairs in a timely fashion.
6. The athletic trainer will prepare medical kits for every team at every level (varsity, JV and freshmen) and distribute them to coaches. Coaches will keep the medical kit stocked. Coaches will keep medical kits on hand at all instances where they are engaged with their student athletes.
7. The athletic trainer will keep an inventory of medical supplies and inform the athletic director of supplies that should be ordered before any supplies become exhausted.
8. The Athletic Director will review the Emergency Action Plan with all coaches prior to the start of the first practice of the season. Coaches will receive maps of their playing area delineating emergency equipment and emergency rescue procedures. Coaches will sign a verification form (Appendix H) upon completion of this training.
9. Coaches will be responsible for posting the EAP at their different venues. Posting the EAP may include physically attaching the EAP to a structure (e.g., wall, fence) or it may be in the medical kit.
10. The Athletic Director will coordinate with the athletic trainer in inspecting all emergency equipment (defibrillators, cold water immersion tubs, spine boards etc.) and they will perform regular inspections of such equipment.
11. Coaches will regularly inspect their playing areas and team equipment. Coaches will inform the Athletic Director immediately if playing areas or equipment falls into disrepair.
12. Coaches will meet with their teams prior to the start of the first practice/try-out and go over the "General Guidelines for Students" as well as specific safety precautions for their sport and distribute the cautionary statement relevant to their sport.
13. The Athletic Director will follow the process in the CIAC Medical Handbook for "Medical Monthly To Do List" or revise the list to suit the specific situation in our school. The importance of a schedule of safety procedures is to have a systematic process for assuring that safety precautions are in place.
14. The Athletic Director will send maps to police, fire and EMT service at the start of each school year.

General Guidelines for Student Athletes

All Coaches should meet with their teams prior to the first day of try-outs/practice and review safety guidelines specific to the sport. Also, coaches should go over the following general procedures:

1. Do not start practicing or playing until the coach is present
2. No gum or food during practice.
3. No horseplay of any kind, at any time (bus, locker room etc.).
4. Wear proper clothing and footwear.
5. Dress appropriately for the weather.
6. Tie hair back or wear a cap, keep your hair out of your eyes.
7. Follow all directions from the instructor/coach. The coach will specify safety techniques for the sport. Athletes are expected to follow safety techniques.
8. Drink water frequently. You are always allowed to get water during breaks. Drink water during the day prior to practices/contests. If your facility does not have a water fountain nearby, bring water from home.
9. Keep off equipment unless instructed to go on.
10. Tell the coach if something is wrong. If you feel dizzy, light headed, faint, have chest pains, are overheated or don't feel well for any reason: tell your coach.
11. In the case of an emergency, notify your coach immediately.
12. If you think someone else is in distress, ask them if they are OK and tell your coach.
13. Follow the coaches' instructions during emergency situations.

Emergency Equipment Locations

Emergency Equipment:

- Athletic Training Kit, Emergency Bag, Biohazard/First Aid Kit, portable defibrillator will be carried continuously by the athletic trainer.
- First Aid Kit located with a coach for each team

1. AED

- a. Portable AED with the athletic trainer for all covered events
- b. Portable AED with the coach of highest need, determined by athletic trainer, athletic director and coach prior to season
- c. Additional AED located outside the Pomperaug Auxiliary Gymnasium in the lobby

2. Phone

- a. Athletic Trainer's personal cell phone when covering events
- b. Coaches' personal cell phones
- c. A phone is located in the athletic director's secretary office
- d. Phones are located in each of the coaches/PE offices

3. Ice Machines

- a. 1st ice machine is located next to the athletic trainer's room
- b. 2nd ice machine is located in the back of the concession stand near the turf field

4. Cold-water immersion tub will be located in the storage shed near the turf field. The athletic trainer is responsible for bringing the cold-water immersion tub on warm days to a location that is quickly accessed during an emergency.
5. Rescue Inhaler
 - a. Coaches are responsible for each student who brings an inhaler and is responsible for bringing the inhaler with them to all practices/games
 - b. Inhaler must be left with a coach (labeled with the student's name) during practices and games (not left in personal bag)
 - c. The athletic trainer may be given a backup inhaler by the parent or child to keep as a backup in the med kit.
 - d. The student and parent are responsible for bringing the inhaler and replacing it before the expiration date
6. Epipen
 - a. Coaches are responsible for each student who brings an epipen and is responsible for bringing their epipen with them to all practices/games
 - b. Epipens must be left with the coach (labeled with the student's name) during practices and games (not left in personal bag)
 - c. Athletic trainers may be given a backup Epipen by the parent or child to keep as a backup in the med kit.
 - d. The student and parent are responsible for bringing the epipen and replacing it before the expiration date
7. Splints
 - a. Splints are kept with the athletic trainer or in the athletic trainer's room.
8. Spine boards/Cervical Collar
 - a. Will be provided by EMS upon arrival
9. Biohazard Materials
 - a. Red bags – in each med kit and in the athletic trainer room.
 - b. Disposal Bin – in the athletic trainer room
10. Pool -
 - a. Backboard, rescue tubes, rescue poles located on the walls in the pool

Definition Of An Athletic Emergency

Emergency situations may arise at any time during athletic events. An athletic emergency is any case where the following may occur:

1. An unforeseen combination of circumstances and the resulting state that calls for immediate action. The athlete's life is in jeopardy or the athlete risks permanent impairment.

2. A player is injured or develops a condition during participation and they are removed from or cannot enter participation based on that condition.
3. Any individual at the scene who is injured or develops a condition that is life threatening, impairs their ability to function, or could lead to more serious medical development.
4. An environmental, mechanical or physical circumstance that threatens the safety or causes injury or a physical condition.
5. Instances where medical or health care is provided to an ill or injured person on a sudden, immediate, or unexpected basis.

Rehearsal Strategy

The athletic trainer and the athletic director will be responsible for reviewing the EAP annually and rehearsing it prior to each sport season.

Coaches at Pomperaug H.S. will be educated on the EAP prior to their season of coaching. The meeting will be a requirement for all coaches, of all levels, of every sport.

The meeting will be directed by the athletic director and athletic trainer and will include presentations for recent updates along with a hands-on portion if necessary. The presentation will run through different scenarios to ensure the coaches understand the EAP. All coaches will be provided the opportunity to ask any and all questions. The athletic trainer will be responsible for ensuring a proper and adequate answer to all questions.

All coaches must sign in to prove their attendance, The documentation of attendance will be stored with the athletic director.

Staff Education

1. Each season, every coach will receive a copy of the Emergency Action Plan (EAP)
 - a. Each coach will provide their signature to confirm they have read the documents and asked any potential questions
 - b. A copy of the relevant EAP will be in each medical kit which is to be kept with the coach at every practice/event
2. A copy of the EAP will be posted on the wall in the athletic training room.

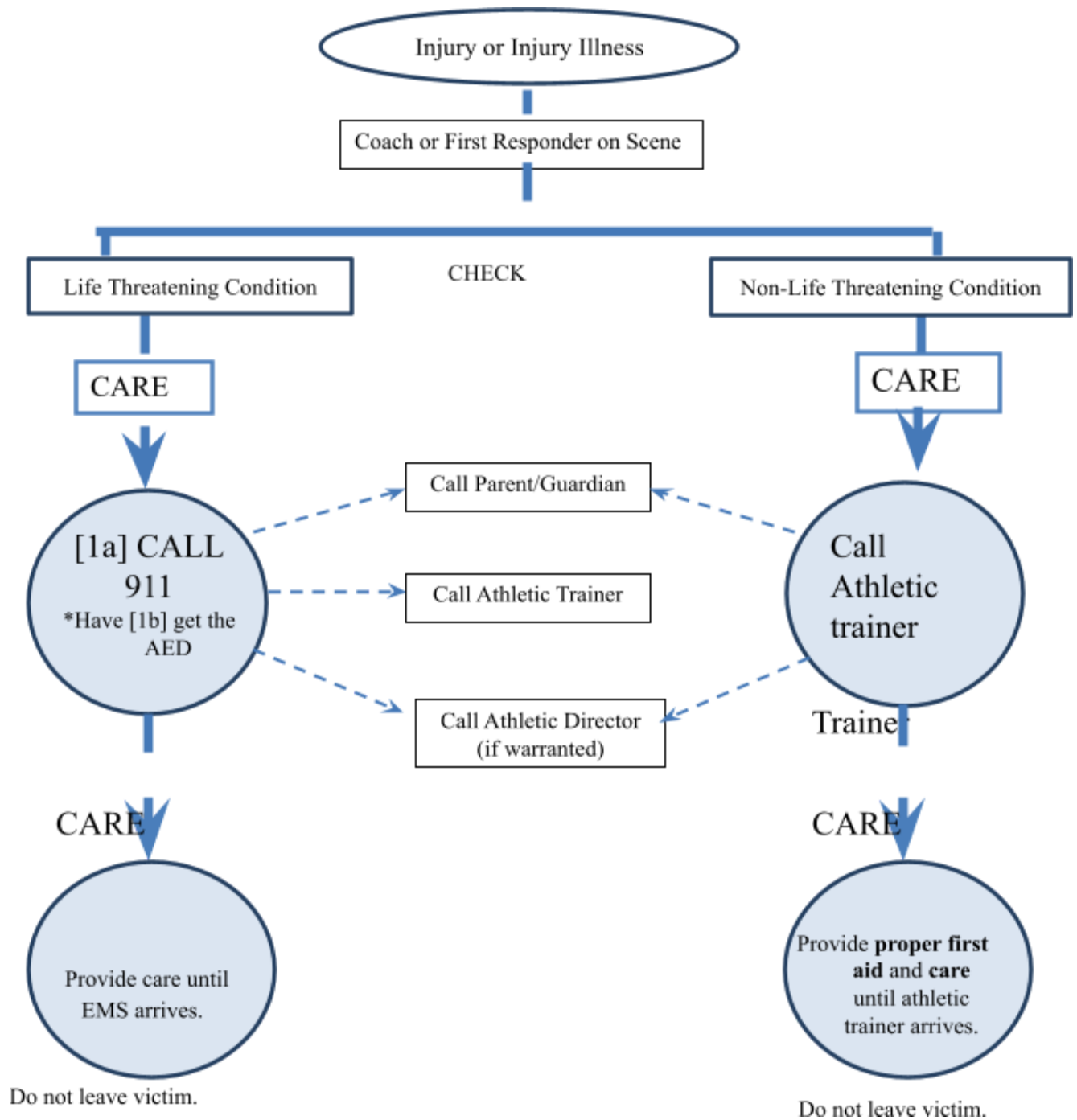
Emergency Telephone Numbers

This list is distributed prior to the start of the season.(Appropriate Cell phone numbers will be distributed to Coaches)

Off Campus Contacts	Phone Number
Emergency	911
Police department	9-1-1 203- 264-5912
Fire and Ambulance	9-1-1 203- 262-0615
Waterbury Hospital	203 573-6000
Danbury Hospital	203-739-7100
Hazardous Materials	800-424-8802
Poison Control Center	800-222-1222
Athletic Trainer	203 733-1915
Nurse (Office)	203 262-3283
Ron Plasky Athletic Director (Office)	203 262-3244
School Counselor (Office)	203 262-3241
Alyson Dembski Asst to A.D. (Office)	203 262-3294
Dr. Paul Jones Principal (office)	203 262-3255
Assistant Principals (office)	203 262-3245 -Brian Jehning 203 262-3286 Heidi Syzmanski

Emergency Situation Contact Tree

Athletic Trainer may at their discretion contact sports medicine physician for guidance



During An Emergency

Emergency 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 required for all athletics personnel associated with practices, competitions, skills instructions, and strength and conditioning [including: athletic director, school nurse, certified athletic trainer, all coaches, etc.].

The emergency team may consist of physicians, emergency medical technicians, certified athletic trainers, athletic training students, coaches, managers, and possibly even bystanders. Roles of these individuals will vary depending on different factors such as team size, athletic venue, personnel present, etc.

Chain of Command During an Emergency

1. Any Medical Doctor on the scene
2. The Athletic Trainer
3. The EMT
4. School Nurse
5. Police officer or Firefighter
6. Lifeguards
7. The Coach
8. Other school staff and teachers trained in first aid or CPR
9. Other Persons trained in CPR or First Aid
10. Custodial Staff
11. Other bystanders (spectators, students, officials, bus drivers)

General Plan of Action During An Emergency

1. The most medically qualified person, as identified in the “Chain of Command” will lead
2. Check the scene for safety. Establish if it is safe to help. If it is, begin immediate care.
3. Is the athlete breathing? Conscious? Pulse? Any loss of consciousness? Spine injury? Dislocation, open fracture, displaced closed fracture? Is there any uncertainty?
4. Activate Emergency Medical Services. 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.
5. If you need help, ask someone to call 911 – LOOK THE PERSON DIRECTLY IN EYES and make sure they make the call! Tell them to come back and inform you that the call has been placed.
6. Perform emergency CPR/First Aid
7. If severe bleeding – instruct a nearby individual to assist with bleeding control
8. Instruct coach, student or bystander to get the AED if needed.
9. Instruct a nearby individual to meet an ambulance to direct to the appropriate site. For example, send a reliable student out of the building to wait outside the entrance for the ambulance and direct the EMT where to go when they arrive.
10. Instruct a coach or officials to stop the practices or contest.
11. Get someone to open doors and/or gates to the facility
12. Instruct another coach or bystander to control crowd
13. Contact the Athletic Trainer if they are not on the scene
14. Contact parents
15. Contact Athletic Director
16. A.D. will contact Principal/Vice Principal if needed
17. Only release an injured student to the EMT or their parents. Once a student is being transported, the coach should stay with the team until they are dismissed to go home and they all have left. If there is a second coach at the scene, they can stay with the team and, if the parents are not available, the coach may accompany the athlete to the hospital – either in an ambulance or follow by car.
18. Document the event according to the protocol outlined in this Emergency Action Plan

Activating Emergency Medical Services

Call 9-1-1 - After hours emergency plan (see page 16)

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

Emergency Communication

Communication is key to a quick, efficient emergency response. There is a pre-established phone tree to ensure all relevant parties are notified. Access to a working telephone line or other device, either fixed or mobile, should be assured. There should also be back-up communication in effect in case there is a failure of the primary communication. At every athletic venue, home and away, it is important to know the location of a workable telephone. Please see the section for “Emergency Telephone Numbers”.

Medical Emergency Transportation

Any emergency situation where there is loss of consciousness (LOC), or impairment of airway, breathing, or circulation (ABCs) or there is a neurovascular compromise should be considered a “load and go” situation and emphasis is placed on rapid evaluation, treatment, and proper transportation. Any emergency personnel who experiences doubt in their mind regarding the severity of the situation should consider a “load and go” situation and transport the individual.

Cool First, Transport Later

In the case of heat related illness, the revised protocol is to cool the athlete first, then transport the individual later. Use the cold-water immersion tub filled with ice water to cool the athlete. If a cold-water immersion tub is not available use ice, water, wet towel or whatever is available to cool the athlete. When the EMT arrives they should make sure that the individual’s temperature has returned to normal prior to transporting them to the hospital.

Non-Medical Emergencies

For the non-medical emergencies (fire, bomb threats, violent or criminal behavior, etc.) refer to the school emergency action plan and follow instructions.

After An Emergency:

1. If it is not possible to contact the nurse's office or an administrator during the emergency, the coach shall notify the nurse, the Athletic Director and a main office administrator as soon after the incident as possible.
2. The coach will contact the parents/guardians of the student involved to explain the circumstances.
3. In the event that the parents/guardians cannot be contacted, the coach should continually call, in a reasonably timely manner, until contact is made. Messages left on answering machines should only suggest the parent/guardian call the coach, athletic trainer or athletic director. No specifics regarding the illness or injury should be explained to an answering machine.
4. An accident report must be turned in to the athletic department within 24 hours

Documentation

1. The Athletic Trainer (or other provider) and the coach must complete documentation immediately following activation of the EAP. Both an injury report (Appendix B) and accident report form (Appendix C) must be filled out. Submit both forms to the athletics office as soon as possible.
2. The athletic trainer should make a notation of the injury and keep it for their records.
3. The school nurse should note the injury and include it with the student's medical file.

Debriefing

A team composed of the Athletic Trainer, AD and coaches must discuss serious injuries (injuries that require the victim to go to the hospital) within 2 school days. This team must evaluate the effectiveness of the EAP. A specific timeline for changes to EAP should be made for promptness.

Conclusion

The importance of being properly prepared when athletic emergencies arise cannot be stressed enough. An athlete's survival may hinge on the training and preparation of healthcare providers. It is prudent to invest athletic department "ownership" in the emergency action plan by involving the athletic administration and sport coaches as well as sports medicine personnel. The emergency action plan should **be reviewed at least once a year** with all athletic personnel and local emergency response teams. Through development and implementation of the emergency plan Pomperaug H.S. helps to ensure that athletes will have the best care provided when an emergency situation does arise.

Appendix

Appendix A – PHS After Hours School Action Plan For All Events

Activity _____ Pick up Location and Time _____

Staff Member's Name (coach/Advisor) _____ School Year _____

Cell Phone _____ Event/Practice _____

Has a Facility Use Permit been filed YES _____ NO _____

Where should EMS come in case of an Emergency _____

Who will call EMS _____

Who will notify the parents that Student is being transported _____

Who will open the gate/doors for EMS _____

Who travels with the injured student _____

Who does the follow-up with Parents _____

Who Documents the Injury _____

Who will provide primary car for injured student _____

Where is the First Aid Kit Located _____

Where is the AED located _____

Who is going to explain the Tornado procedure to the athletes _____

Where is the closest weather shelter _____

Who has key to the shelter _____

Who performs a daily site inspection of the facilities _____

Who manages the remainder of the event _____

Who is notifying administration _____

Agreed upon before using the school's Facilities:

Signed: _____ Date _____

Appendix B – School Accident Report

REGION 15

"Serving the Educational Needs of Middlebury and Southbury"

REPORT OF INCIDENT/INJURY

Student's Name _____ Date _____ Time _____

Street Address _____ Town/State/Zip _____

Parents Names _____ Telephone _____

Grade/Teacher _____ Age _____

School/Sports Insurance? Yes _____ No _____

Where Incident Occurred: _____

Person in Charge: _____

Witnesses: _____ Whom notified: _____

Description of incident/injury and treatment: _____

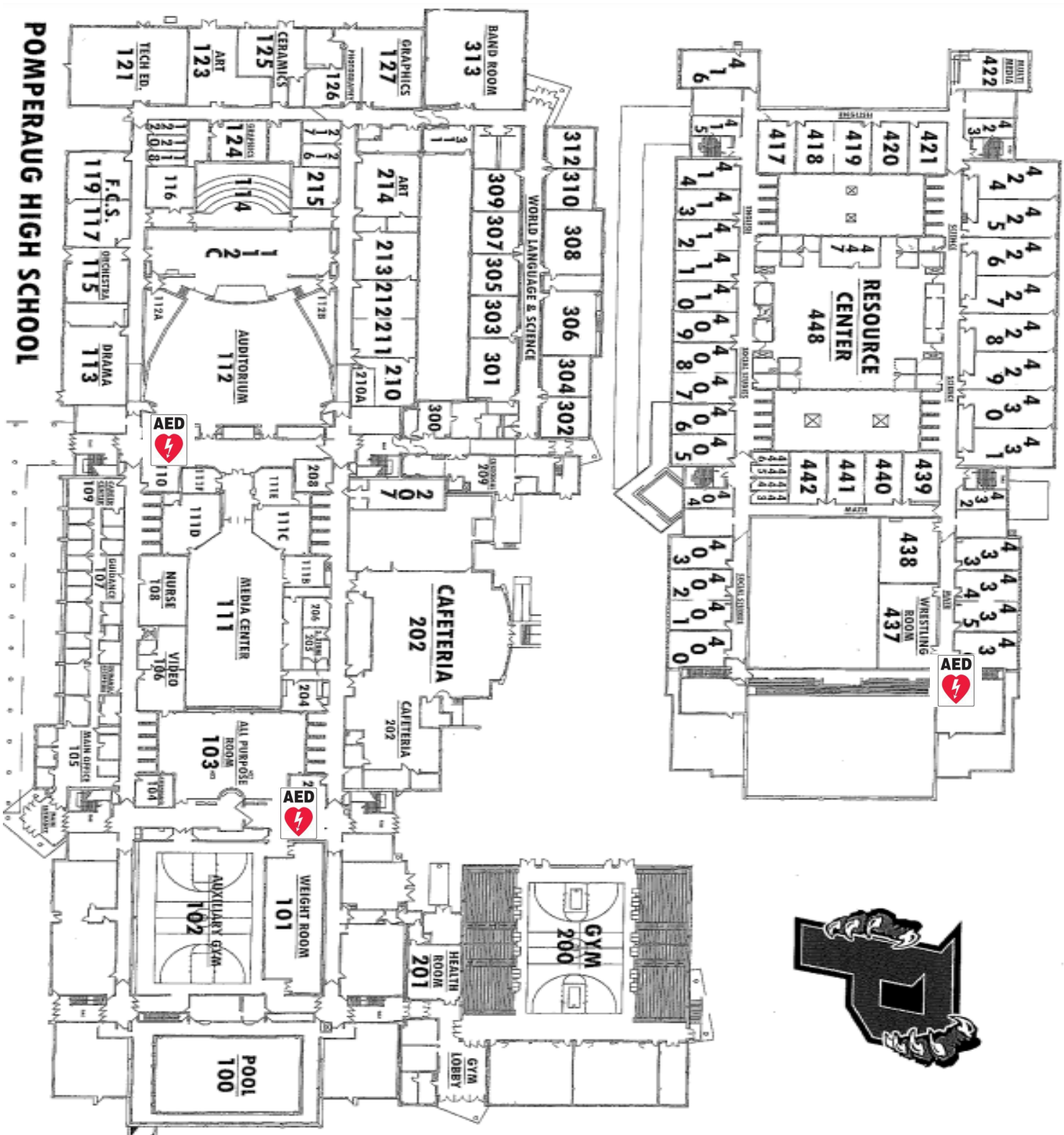
Signature of School Nurse/Substitute _____ Date of report _____

Follow up/additional information: _____

Signature of School Nurse/Substitute _____ Date _____

Principal's Signature _____ Date _____

Pomperaug AED Location



Appendix D – Gymnasium Emergency Directions

Main Gym

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488

AED: An AED is on the wall in the hallway outside the Auxiliary gym

Phone - All Athletic Personnel carry a cell phone, A landline is located in the Athletic office.

Ice: The nearest ice machine is in the ice room next to the athletic trainer's room.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the football locker room.

Water: A water fountain is located in the lobby of the main gym. Showers and sinks are in the locker rooms. Water can also be found in the ice room.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go to the Athletic Entrance Doors for the main gym. Instruct someone nearby to wait at those doors and another bystander to wait to the entrance of the school driveway to point the way.

Point of Shelter in Place/Lockdown: Four main locker rooms (two boys and two girls)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the "Chain of Command" will lead.

Appendix E – Gymnasium Emergency Directions/Map -

Auxiliary Gym

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488

AED: An AED is on the wall in the hallway outside the Auxiliary gym

Phone -All Athletic Personnel carry a cell phone, A landline is located in the Athletic office.

Ice: The nearest ice machine is in the ice room next to the athletic trainer's room.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the football locker room.

Water: A water fountain is in the hall near the Football Coach's Office. Showers and sinks are in the locker rooms. Water can also be found in the ice room.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go the main school lobby doors for the auxiliary gym. Instruct someone nearby to wait at those doors and another bystander to wait at the entrance of the school driveway to point the way.

Point of Shelter in Place/Lockdown: Pool Locker rooms (boys and girls)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the "Chain of Command" will lead.

Appendix D – Weight Room Emergency Directions

Weight Room

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488

AED: An AED is on the wall in the hallway outside the Auxiliary gym

Phone - All Athletic Personnel carry a cell phone, A landline is located in the Athletic office.

Ice: The nearest ice machine is in the ice room next to the athletic trainer's room.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the football locker room.

Water: A water fountain is in the hall near the Football Coach's Office. Showers and sinks are in the locker rooms. Water can also be found in the ice room.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go to the main school lobby doors for the auxiliary gym. Instruct someone nearby to wait at those doors and another bystander to wait at the entrance of the school driveway to point the way.

Point of Shelter in Place/Lockdown: Pool Locker rooms (boys and girls)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the "Chain of Command" will lead.

Appendix E - Venue Action Plans

Stadium Field

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488 The Stadium field is to the right once you turn onto Judd Rd.

AED: There is an AED in the press box, located at the stadium field. The Athletic Trainer will carry a portable AED.

Phone - All Athletic Personnel carry a cell phone,

Ice: The nearest ice machine is in the ice/water closet in the back of the snack shack.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the storage shed.

Water: There is water in the ice/water closet in the back of the snack shack.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is the lower parking lot and they would enter through the gate. The gate requires a key that all key personnel have. Instruct someone nearby to wait at the entrance to the driveway at the lower parking lot and direct them to the emergency. If the emergency is at the end of the stadium closest to the school, there is an access gate at the top of the roadway that will also require someone to unlock. (Note: Only select personnel have this key)

Point of Shelter in Place/Lockdown: Outdoor Storage shed (behind home side bleachers)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

Appendix E - Venue Action Plans

Swimming Pool

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488

AED: An AED is on the wall in the hallway outside the Auxiliary gym

Phone -All Athletic Personnel carry a cell phone, A landline is located in the Athletic office.

Ice: The nearest ice machine is in the ice room next to the athletic trainer's room.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the football locker room.

Water:A water fountain is in the hall near the Football Coach's Office. Showers and sinks are in the locker rooms. Water can also be found in the ice room.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go the main school lobby doors for the auxiliary gym. Instruct someone nearby to wait at those doors and another bystander to wait at the entrance of the school driveway to point the way.

Point of Shelter in Place/Lockdown: Pool Locker rooms (boys and girls)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the "Chain of Command" will lead.

SAFETY AND EMERGENCY ACTION PLAN FOR THE POOL AREA

PHS Emergency Action Plan for the Pool

Definition of “Emergency Care” is: instances where medical or health care is provided to an ill or injured person on a sudden, immediate, or unexpected basis.

Pre-incident Planning

- Coaches shall check in with the school nurse’s for students with asthma, EPI pens, seizures, diabetes or any other medical issue that have a care plan.
- There is a telephone on the wall of the pool deck. Demonstrate to athletes how to call 911 from the pool deck if they are directed to by the instructor during an emergency (the number is 9-911 on the pool deck)
- Coaches will review safety precautions as listed above with their teams prior to beginning the season.
- Designate an area on the pool deck that athletes should go to in case of an emergency situation (the benches against the pool wall).

Incident Planning in Case of Emergency

- If a student athlete is in distress in the pool the instructor’s primary responsibility is to rescue the victim according to the Red Cross Lifeguard rescue procedures.
- Once the victim is rescued from the water, in case of an emergency, the teacher will determine if it is possibly a life threatening injury. Head, neck, spine, internal organ injuries, or discontinued breathing, or profuse bleeding, or loss of consciousness, or disorientation can be considered life threatening.
- If the emergency is life threatening, or the teacher is uncertain about the seriousness of the injury, the teacher (or other nearby responsible individual) shall call 911, (9-911 from the pool deck) directly and immediately, and enact first aid or CPR as required.
- The caller should give their identification, location, nature of the injury to the emergency dispatcher. It is important to stay on the line, until all the information is given to the dispatcher.
- Stop activity and clear all students to an area away from the injured individual.
- The coach shall not move the injured student.
- The coach will remain with the injured or ill student at all times. Do not leave the injured student. The injured student can only be released to the nurse, their parents, or medical emergency personnel.
- The coach shall send available, reliable students (or other bystanders) to areas to direct emergency personnel to the injured person. If others are available to help they should be sent to the nearest parking lot or driveway entrance. If the injured student is in the building a bystander, if there is one, should be sent to the outside doorway nearest the injured student.

Protocol After Evacuation of Injured/Ill Person

- If it is not possible to contact the athletic director during the emergency, the coach shall notify a school administrator, as soon after the incident as possible.
- The coach will contact the parents/guardians of the student involved to explain the circumstances.
- In the event the parents/guardians cannot be contacted, the coach or a designee should continually call, in a reasonably timely manner, until contact is made. Messages left on answering machines should only suggest the parent/guardian call the coach. No specifics regarding the illness or injury should be explained to an answering machine.
- In the event of any serious incident the coach shall inform the Athletic Director.
- The coach will complete an accident form with the assistance of the athletic director if necessary, in a timely manner.

Appendix E - Venue Action Plans

Grass Practice

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488 This area is accessible from the main entrance to the school.

AED: There is an AED in the press box, located at the stadium field. The Athletic Trainer will carry a portable AED. There are also AED's located in the school, with the closest one to these fields being outside the auxiliary gym.

Phone - All Athletic Personnel carry a cell phone

Ice: The nearest ice machine is in the ice room next to the athletic trainer's room.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the football locker room.

Water: A water fountain is in the hall near the Football Coach's Office. Showers and sinks are in the locker room or ice room.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go to the main entrance of the school. At the top of the hill there is a gate to the right to the roadway that will give access to this area. The gate requires a key. Instruct someone nearby to wait at the entrance to the driveway at the lower parking lot and direct them to the emergency.

Point of Shelter in Place/Lockdown: Outdoor Storage shed (behind home side bleachers)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

Appendix F - Venue Action Plans

Softball Field:

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488 This area is accessible from the main entrance to the school. The Softball Field is at the top of the main entrance of the school, to the right.

AED: There is an AED in the press box, located at the stadium field. The Athletic Trainer will carry a portable AED. There are also AED’s located in the school, with the closest one to these fields being outside the auxiliary gym.

Phone - All Athletic Personnel carry a cell phone

Ice: The nearest ice machine is in the ice room next to the athletic trainer’s room.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the football locker room.

Water: A water fountain is in the hall near the Football Coach’s Office. Showers and sinks are in the locker room or ice room.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go to the main entrance of the school. At the top of the hill there is a gate to the right to the roadway that will give access to this area. The gate requires a key. Instruct someone nearby to wait at the entrance to the driveway at the lower parking lot and direct them to the emergency.

Point of Shelter in Place/Lockdown: Outdoor Storage shed (behind home side bleachers)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

Appendix F - Venue Action Plans

Baseball Field:

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488 This area is accessible from the main entrance to the school. The Baseball Field is at the top of the main entrance of the school, down the ramp and to the left.

AED: There is an AED in the press box, located at the stadium field. The Athletic Trainer will carry a portable AED. There are also AED’s located in the school, with the closest one to these fields being outside the auxiliary gym.

Phone - All Athletic Personnel carry a cell phone

Ice: The nearest ice machine is in the ice/water closet in the back of the snack shack.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the storage shed.

Water: There is water in the ice/water closet in the back of the snack shack.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go to the main entrance of the school. At the top of the hill there is a gate to the right to the roadway that will give access to this area. The gate requires a key. Instruct someone nearby to wait at the entrance to the driveway at the lower parking lot and direct them to the emergency.

Point of Shelter in Place/Lockdown: Outdoor Storage shed (behind home side bleachers)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

Appendix F - Venue Action Plans

Tennis Courts:

Address: Pomperaug High School 234 Judd Rd, Southbury, CT 06488 The Stadium field is to the right once you turn onto Judd Rd.

AED: There is an AED in the press box, located at the stadium field. The Athletic Trainer will carry a portable AED.

Phone - All Athletic Personnel carry a cell phone,

Ice: The nearest ice machine is in the ice/water closet in the back of the snack shack.

Cold Water Immersion Tub: The nearest Cold Water Immersion Tub is located in the storage shed.

Water: There is water in the ice/water closet in the back of the snack shack.

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is the lower parking lot and they would enter through the gate. The gate requires a key that all key personnel have. Instruct someone nearby to wait at the entrance to the driveway at the lower parking lot and direct them to the emergency. If the emergency is at the end of the stadium closest to the school, there is an access gate at the top of the roadway that will also require someone to unlock. (Note: Only select personnel have this key)

Point of Shelter in Place/Lockdown: Outdoor Storage shed (behind home side bleachers)

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

EAP STEP BY STEP INSTRUCTIONS

HIGH SCHOOL GYMS & WEIGHT ROOM:

IN CASE OF EMERGENCY:

- 1) The ATC, if present, will assess the injury and the need for medical referral.
 - i) *(One coach should follow ATC onto field to offer any assistance as requested by ATC i.e.: summoning EMS, help removing athlete from field)*
- 2) If ATC is not immediately present, the coach (as a first responder) will conduct a first aid survey to determine the need for medical referral.
- 3) To summon an ambulance, designate someone to do one of the following:
- 4) Call Dispatch Emergency Services
 - a) 911
- 5) Upon emergency contact, the designated person will do the following:
***STAY ON THE LINE AND FOLLOW DIRECTIONS OF DISPATCHER**
 - a) Identify yourself and position (ie: ATC, Coach).
 - b) State your location and details.
 - c) State the nature of the medical emergency.
 - d) Request assistance and ambulance if needed.
 - e) State the number of athletes involved and their current condition.
 - f) Give specific directions to the emergency scene.

- 6) If directions are needed, they will be given as the following:
 - a) Which field the emergency is on and the best way to reach the field).
- 7) Upon waiting for the arrival of the ambulance, send a coach (or player(s) if a coach is not available) to the access gate to secure an easy access for the ambulance and ensure gates are unlocked and opened.
- 8) While waiting the arrival of the ambulance:
 - a) Locate the athlete's Emergency Information Card.
 - b) Contact parents or emergency contacts.
 - c) Remain with the athlete and remove bystanders.
- 9) When the ambulance arrives, send an assistant coach with the athlete if no parent or family member is present. If only the head coach is present, the athlete will travel alone and the coach will meet the athlete at the hospital after the game if parents can not be reached.
- 10) The coach needs to ensure there is someone to take the child home from the hospital.
- 11) ATC and AD shall be notified ASAP.
- 12) An injury report will be filled out at Pomperaug High School by the coach and the ATC in a timely fashion and turned in to AD.

IN CASE OF CARDIAC SITUATION:

- (1) Emergency protocol should be implemented.
- (2) An AED is located on the wall outside of the auxiliary gym and the trainer has a portable one.

IN CASE OF A LOCKDOWN:

- 1) In the event of a lockdown everyone should quickly and quietly move to the side of the room, lights should be turned off and everyone should sit quietly
 - a) They should stay there until the coach is notified that the lockdown is over through a PA announcement or a phone call.
 - b) Coach should take attendance.
 - c) No use of personal cell phones.

EAP STEP BY STEP INSTRUCTIONS

HIGH SCHOOL FIELDS:

IN CASE OF EMERGENCY:

1. The ATC, if present, will assess the injury and the need for medical referral.
 - i) *(One coach should follow ATC onto field to offer any assistance as requested by ATC i.e.: summoning EMS, help removing athlete from field)*
2. If ATC is not immediately present, the coach (as a first responder) will conduct a first aid survey to determine the need for medical referral.
3. To summon an ambulance, designate someone to do one of the following:
4. Call Dispatch Emergency Services
 - b) 911
5. Upon emergency contact, the designated person will do the following:
***STAY ON THE LINE AND FOLLOW DIRECTIONS OF DISPATCHER**
 - 1) Identity yourself and position (ie: ATC, Coach).
 - 2) State your location and details.
 - 3) State the nature of the medical emergency.
 - 4) Request assistance and ambulance if needed.
 - 5) State the number of athletes involved and their current condition.
 - 6) Give specific directions to the emergency scene.
- 13) If directions are needed, they will be given as the following:
 - a) Which field the emergency is on and the best way to reach the field).
- 14) Upon waiting for the arrival of the ambulance, send a coach (or player(s) if a coach is not available) to the access gate to secure an easy access for the ambulance and ensure gates are unlocked and opened.
- 15) While waiting the arrival of the ambulance:
 - a) Locate the athlete's Emergency Information Card.
 - b) Contact parents or emergency contacts.
 - c) Remain with the athlete and remove bystanders.
- 16) When the ambulance arrives, send an assistant coach with the athlete if no parent or family member is present. If only the head coach is present, the athlete will travel alone and the coach will meet the athlete at the hospital after the game if parents can not be reached.
- 17) The coach needs to ensure there is someone to take the child home from the hospital.
- 18) ATC and AD shall be notified ASAP.
- 19) An injury report will be filled out at Brookfield High School by the coach and the ATC in a timely fashion and turned in to AD.

IN CASE OF LIGHTNING/ SEVERE WEATHER:

- 1) In the event that lightning is forecasted, the ATC/Coach will use the flash-to-bang theory, if lightning detector is not available.
 - a) When lightning is seen, begin counting the seconds.
 - b) Terminate the count once the thunder is heard.
 - c) If the count is less than 60 seconds, the event will be terminated immediately.
- 2) Teams will then go into the closest lightning safe building:
 - a) Brookfield High School
 - b) Buses are also suitable but not preferred
- 3) It is safe to return to play when 30 minutes has passed since the last sighting of lightning.

IN CASE OF CARDIAC SITUATION:

- (3) Emergency protocol should be implemented.
- (4) AEDs are located on the outside wall of the Field House, Blue Shed and on the trainers golf cart.

IN CASE OF A LOCKDOWN

- 2) In the event of a lockdown everyone should quickly and quietly be moved to the woods. Reunification when clear as designated by your coach
 - a) They should stay there until the coach is notified that the lockdown is over through a PA announcement or a phone call.
 - b) Coach should take attendance.
 - c) No use of personal cell phones

Appendix F - Off site Venue Action Plans

Golf Course: Highfield Country Club:

Address: 256 White Deer Rock Rd, Middlebury, CT 06762

AED: Located in the pro shop

Phone - All Athletic Personnel carry a cell phone, Landline in the pro shop

Ice: In the Pro Shop

Cold Water Immersion Tub: None located at the Golf Course

Water: Located in the Pro Shop

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to go to the pro shop and be directed by Golf Course Personnel.

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

Golf Course EAP

1. It is important to be in contact with the golf course manager/pro to collaborate on an emergency plan.
2. Include the following in the golf course EAP ...
 - a. Address
 - b. Check phone service throughout the course
 - c. Locations of AED
 - d. Locations of Water
 - e. Entrance for Ambulance
 - f. Access for ambulance to all of the course
 - g. Pro Shop and Coaches exchange phone numbers
 - h. Plan for how players, who are out of site of the coaches should act in an emergency
 - i. Phone numbers to call
 - ii. Stop play
 - iii. Don't leave a victim
 - iv. Call 911

Tennis Courts- Edgewood Bath and Tennis (area used prior to 2024):

Address: 100 N Benson Rd, Middlebury, CT 06762

AED: Located in the facility

Phone - All Athletic Personnel carry a cell phone, Landline in the pro shop

Ice: In the Pro Shop

Cold Water Immersion Tub: None located at the Tennis Facility

Water: Located in the Facility

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is the parking lot adjacent to the tennis courts.

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

Hockey Rink- The Taft School- Mays Rink

Address: 90 Guernseytown Rd, Watertown, CT 06795

AED: Located in the facility

Phone - All Athletic Personnel carry a cell phone, Landline in the office

Ice: In the

Cold Water Immersion Tub: NA

Water: Located in the Facility

Medical Kit: All coaches should keep their medical kit with them for all team practices, contests, events or any other gathering.

EMT Entrance: The best entrance for EMT service or Ambulance is to park in the lot and walk down the hill to the right of the flagpole.

Medical Emergency Personnel: In the case of a medical emergency the most medically qualified person, as identified in the “Chain of Command” will lead.

Appendix G – Coach Verification Form

Pomperaug High School Coaches Emergency Action Plan Verification Form

I _____ have read and understand the Emergency Action Plan for Pomperaug High School Athletics. I understand my roles and responsibility should an emergency occur in my presence. I have also rehearsed this Emergency Action Plan and understand my role in an emergency situation with an athletic trainer present and without. I have been given the opportunity to ask all questions and have received the proper answers to my questions.

I also understand that I must keep all certifications up to date according to the State of Connecticut and CIAC regulations and that it is my responsibility to ensure a lapse does not occur.

Coach Name (print) _____

Sport _____

Signature _____

Date _____

Approval and Verification Page:

This document has been read and revised and approved by the undersigned.

Athletic Advising Physician: _____

Date: _____

Superintendent: _____

Date: _____

High School Principal : _____

Date: _____

Middle School Principal : _____

Date: _____

School Nurse: _____

Date: _____

Athletic Trainer: _____

Date: _____

Athletic Director: _____

Date: _____

Part 3 – 14 Legal Duties

Fourteen Legal Duties

Several obligations or duties have been identified as absolute requirements for coaches and athletic administrators. Almost all of these have to do with the medical safety of students.

These standards have evolved as a result of various case law proceedings and legal judgments against individuals and school districts. It is important that all coaches, including assistants and volunteers, know and understand the following duties. This summary is not all-inclusive but is generally accepted as the “Legal Duties of Coaches” by the NFHS (National Federation of High Schools) and NIAAA (National Interscholastic Athletic Administrator Association).

The CIAC has compiled this guide to assist athletic departments in meeting each of their obligations.

Steps to assure that your athletic department meets the 14 Legal Duties:

1. Include a list and description of the “14 Legal Duties of A Coach” in your coaches’ handbook.
 2. Review the “14 Legal Duties of A Coach” at each coach's preseason meeting.
 3. Review the “14 Legal Duties of A Coach” at the orientation meeting with each newly hired coach.
 4. Require all teams to have a preseason parent/athlete meeting. Review rules, documents and cautionary statements.
-
1. **Duty to Plan** – A coach must demonstrate awareness of the maturity, physical development and readiness of athletes with appropriate plans for instruction, conditioning and supervision.
 - a. Coaches should have written plans for every practice
 - b. Keep a file of all practice plans
 - c. Plans should demonstrate a progression of skills and conditioning over the course of days and weeks.
 2. **Duty to Supervise** – A coach must be physically present, provide competent instruction, structure practices that are appropriate for the age and maturity of players, prevent foreseeable injuries and respond to injury or trauma in an approved manner. This duty requires supervisors to make sure facilities are locked and that students are denied access when a competent staff member cannot be physically present to supervise. This duty may also require coaches to control reckless player behaviors. Supervision responsibility also pertains to athletic administrators who are expected to be able to supervise coaches competently.
 - a. The team should have a designated “pick-up” area where parents meet their kids after practice.
 - b. If students are not going home, and are remaining on campus, they should let their coach know where they are going.
 - c. When introducing new or dangerous skills, coaches should be in close proximity to the athlete and be ready to support or spot the athlete for safety.
 3. **Duty to Assess Athletes Readiness for Practice and Competition** – Athletics administrators and coaches are required to assess the health and physical or maturational readiness skills and physical condition of athletes. A progression of skill development and conditioning improvement should be apparent from practice plans. Athletes must also be medically screened in accordance with state association regulations before participating in practice or competition.
 - a. NEVER assume a student is in good physical condition at the start of the first practice. The coach *warning* kids that they need to be in shape at the start of the season is not sufficient. Assume that no one is in shape and build conditioning slowly.

4. **Duty to Maintain Safe Playing Conditions** – Coaches are considered trained professionals who possess a higher level of knowledge and skill that permits them to identify foreseeable causes of injury inherent in defective indoor and outdoor facilities or hazardous environments.
 - a. Do not continue play if there is an unsafe condition. Check the field for holes. Check the mats for gaps. Check the gym floor for slippery spots.
 - b. Let the Athletic Director and/or the custodial staff for unsafe playing conditions.
5. **Duty to Provide Safe Equipment** – Courts have held athletic supervisors responsible to improve unsafe environments. Repair or remove defective equipment or disallow athlete access.
 - a. Have a system for systematically checking protective equipment by a professional service.
 - b. Keep an inventory with purchase dates and repair records of supplies and equipment.
 - c. Make sure all helmets are NOCSAE certified.
6. **Duty to Instruct Properly** – Athletic practices must be characterized by instruction that accounts for a logical sequence of fundamentals that lead to an enhanced progression of player knowledge, skill, and capability.
 - a. Coaches should model the skills they want athletes to emulate.
 - b. Coaches should give teaching cues.
 - c. Coaches should continually provide constructive feedback to players on their execution of form and skills.
 - d. Read the CIAC Tournament Packet
 - e. Coaches should maintain membership in the Connecticut High School Coaches Association
 - f. Coaches should attend coaches' clinics, read professional journals and books, and watch instructional videos.
 - g. In general, maintain professional development for your sport.
7. **Duty to Match Athletes** – Athletes should be matched with consideration for maturity, skill, age, size and speed. To the degree possible, mismatches should be avoided in all categories.
 - a. Never match an experienced athlete with a student who is new to the team/sport, particularly when there is the prospect of physical contact.
8. **Duty to Condition Properly** – Practices must account for a progression of cardiovascular and musculoskeletal conditioning regimens that prepare athletes sequentially for more challenging practices and competitive activities.
9. **Duty to Warn** – Coaches are required to warn parents and athletes of unsafe practices specific to a sport and the potential for injury or death. This warning should be issued in writing and both athletes and parents should be required to provide written certification of their comprehension.
 - a. Examples of Cautionary Statements are included in the Appendix for this section.
10. **Duty to Ensure Athletes are Covered by Injury Insurance** – School districts must ensure that family and/or school insurance provides basic level of medical coverage. Districts must provide supplemental insurance for students whose families do not carry insurance. Athletes should not be allowed to participate without injury insurance.
11. **Duty to Provide Emergency Care** – Coaches are expected to be able to administer standard emergency care (first aid, CPR) in response to a range of traumatic injuries. In addition, there are several other certifications and training that coaches must complete in order to coach in Connecticut. A list of coaching certifications and requirements is available from the CIAC.
12. **Duty to Design a Proper Emergency Response Plan** – School districts must design plans to ensure an expedited response by EMS and an effective transition to the care and supervision of emergency medical personnel.
 - a. See the section in the CIAC Medical Handbook for an example Emergency Action Plan

13. **Duty to Provide Proper Transportation** – In general, bonded, commercial carriers should be used for out of town transportation. If the school district allows, self or family transportation for local competition may be permitted if parents have adequate insurance coverage for team members other than their family members.

a. Allow transportation to events and practices only with a written note from the parent and permission from the athletic director and coach

14. **Duty to Select, Train, and Supervise Coaches** – Administrators have responsibility to ensure that appropriate skill and knowledge levels exist among members of the coaching staff to ensure appropriate levels of safety and well being among athletes.

- a. Maintain a well-articulated “Coaches Handbook”
- b. Observe coaches frequently in practices, contests and team meetings
- c. Have a system for ensuring that all coaches maintain and are up-to-date on all required certifications
- d. Have an orientation program for newly hired coaches
- e. Provide frequent feedback to coaches
- f. Conduct pre-season coaches’ meetings for each season
- g. Have a system for formal evaluations

Appendix of Cautionary Statements

Athletic departments and coaches have a duty to warn parents and participants in high school sports about the inherent dangers and physical risks of playing sports. To that end, the CIAC has prepared this set of cautionary statements. A cautionary statement is a set of warnings and guidelines specific to each sport. The school may want to use these as the basis for warning parents and students to the dangers of playing each sport.

Schools should plan a system for delivering these to parents and students. This could take place through the registration process or could be distributed and reviewed in preseason parent/athlete meetings.

These statements should be combined with safety regulations detailed in the rulebook for each sport and the CIAC tournament packet.

Exertional Heat Related Illnesses

(Resource: Korey Stringer Institute)

Exercising and Athletic Participation in Hot Weather

The main problem associated with exercising in the hot weather is water loss through sweating. Water loss is best replaced by allowing the athlete unrestricted access to water. Water breaks two or three times every hour are better than one break an hour. Probably the best method is to have water available at all times and to allow the athlete to drink water whenever he/she needs it. Never restrict the amount of water an athlete drinks, and be sure the athletes are drinking the water. The small amount of salt lost in sweat is adequately replaced by a balanced diet including whole foods, fruits and vegetables. Athletes that appear to have heat stroke or heat exhaustion should be cooled by ice water immersion.

Dehydration

- Dehydration can affect an athlete's performance in less than an hour of exercise. Sooner if the athlete begins the session dehydrated.
- Dehydration of just one to two percent of body weight (only 1.5-3 lbs., for a 150-pound athlete) can negatively influence performance.
- Dehydration of greater than three percent of body weight increases an athlete's risk of heat illness (heat cramps, heat exhaustion, heat stroke).
- High body fat athletes can have a harder time with exercise and can become dehydrated faster than lower body fat athletes working out under the same environmental conditions.
- Poor acclimatization to heat or lower fitness levels can greatly contribute to an athlete's dehydration problems. This is important with the first practices of year, especially in the summer.

- Certain medications or fevers can greatly affect an athlete's hydration status.
- Environmental temperature and humidity both contribute to dehydration and heat illnesses.
- Clothing, such as dark, bulky, or rubber protective equipment can drastically increase the chance of heat illness and dehydration.
- Wet bulb globe temperature measurements should be taken 10-15 minutes before practice, and the results should be used with a heat index to determine if practices or contests should be started, modified or stopped.

Recommendations For Hydration To Prevent Heat-Related Illness

- Beverages containing caffeine will affect hydration since urine production will increase compared to non-caffeinated beverages.
- Carbonated beverages are found to cause decreased voluntary fluid intake.
- Alcoholic beverages are inappropriate for high school athletes.
- Drink according to a schedule based on individual fluid needs. Drink before, during and after practices and games. Drink 17-20 ounces of water, two to three hours before exercise. Drink 7-10 ounces of water 10 to 20 minutes before exercise.
- Drink early – By the time you're thirsty, you're already dehydrated. In general, every 10-20 minutes drink at least 7-10 ounces of water or to maintain hydration, and remember to drink beyond your thirst. Drink fluids based on the amount of sweat and urine loss. Within two hours, drink enough to replace any weight loss from exercise.
- If exercise lasts more than 50 minutes, water should be provided during the session.

Heat Stroke

1. THIS IS A MEDICAL EMERGENCY – DELAY COULD BE FATAL. ACTIVATE YOUR EMERGENCY ACTION PLAN BY CALLING – 911.

2. A RECTAL TEMPERATURE (only taken by a qualified healthcare professional; athletic trainer, nurse, EMT, physician; not the coach) **NOT ORAL, AURAL, OR TEMPORAL IS DIAGNOSTIC OF HEATSTROKE.** Other methods of temperature have given false core body temperatures and caused delay in care. If you are unable to obtain a rectal temperature it is safer to cool the athlete than delay cooling pursuant to waiting for a medical professional to take a rectal temperature. Immediately cool the athlete while waiting for transfer to a hospital. Remove equipment and immerse body in ice-cold water and keep cooling athlete.

3. Despite the many ways athletes can be cooled, immersion therapy has the best cooling rates. Ice water immersion should be your choice of cooling. A plastic kiddie pool or large plastic tub filled with water and with ice on standby should be available at all practices and games. Continue cooling efforts until EMS arrives. Recommendation is to continue cooling the athlete until core temperature is <100 degrees Fahrenheit.

Heat Exhaustion

1. Contact licensed health care provider.
2. Cool body as you would for heat stroke while waiting for medical personnel. Activate your emergency action plan.

Heat Stress And Athletic Participation

Sports practices and contests are conducted in very hot and humid weather in many parts of the United States. This can lead to heat-related illnesses. Most of the heat-related problems have been associated with football, due to the special equipment and uniforms needed. From 1995 through the 2005 football season there have been 19 high school heat stroke deaths in football. This is not acceptable. Heatstroke deaths are fully preventable in high school sports if the proper precautions are taken.

During hot weather conditions the athlete is subject to the following:

Heat Cramps– Heat cramps are a mild heat illness that can be easily treated. These intense muscle spasms usually develop after an athlete has been exercising for a while and has lost large amounts of fluid and salt from sweating.

Heat Syncope– Weakness, fatigue and fainting due to loss of salt and water in sweat and exercise in the heat.

Heat Exhaustion– Heat exhaustion is a moderate heat illness that occurs when a child continues to be physically active even after he or she starts suffering from ill effects of the heat, like dehydration. The child's body struggles to keep up with the demands, leading to heat exhaustion.

Heat Stroke– Heat stroke is a severe heat illness that occurs when an athlete's body creates more heat than it can release, due to the strain of exercising in the heat. This results in a rapid increase in core body temperature, which can lead to permanent disability or even death if left untreated. An acute medical emergency related to thermo-regulatory failure, associated with nausea, seizures, disorientation, and possible unconsciousness or coma. It may occur suddenly without being preceded by any other clinical signs. The individual is usually unconscious with a high body temperature and a hot dry skin, (heatstroke victims, contrary to popular belief, may sweat profusely).

It is believed that the above-mentioned heat stress problems can be controlled provided certain precautions are taken. The following practices and precautions are recommended:

1. Each athlete is required to have, prior to participating in any way, a physical exam with a medical history when first entering a program and an annual health history update, good for 13 months. History of previous heat illness and type of training activities before organized practice begins should be included.

2. It is clear that top physical performance can only be achieved by an athlete who is in top physical condition. Lack of physical fitness impairs the performance of an athlete who participates in high temperatures. Coaches should know the **physical condition** of their athletes and set practice schedules accordingly. Conditioning should progress over a period of time. Coaches should not assume that their athletes come into the first practice in good condition (despite being encouraged to do so.)

3. Along with physical conditioning, the factor of acclimatization to heat is important. Acclimatization is the process of becoming adjusted to heat and it is essential to provide for **gradual acclimatization to hot weather**. It is necessary for an athlete to exercise in the heat if he/she is to become acclimatized to it. It is suggested that a graduated physical conditioning program be used and that 80% acclimatization can be expected to occur after the first 7 to 10 days. Final stages of acclimatization to heat are marked by increased sweating and reduced salt concentration in the sweat.

4. The old idea that water should be withheld from athletes during workouts has **no scientific foundation**. The most important safeguard to the health of the athlete is the replacement of water. Water must be on the field and readily available to the athletes at all times. It is recommended that a minimum ten minute water break be scheduled for every twenty minutes of heavy exercise in the heat. Athletes should rest in a shaded area during the break. **Water should be available in unlimited quantities**. Check and be sure athletes are drinking the water. Replacement by thirst is inadequate.

5. Test the air prior to practice or game using a wet bulb, globe, temperature index (WBGT index) for the State of Connecticut: (Grundstein et al. 2015) .

There is also a weather guide for activities that last 30 minutes or more (Fox and Mathews, 1981) which involves knowing the relative humidity and air temperature.

Cat 1	Activity Guidelines
< 76.1	Normal Activities – Provide at least three separate rest breaks each hour with a minimum duration of 3 min each during the workout.
76.3 - 81.0	Use discretion for intense or prolonged exercise; Provide at least three separate rest breaks each hour with a minimum duration of 4 min each.
81.1 - 84.0	Maximum practice time is 2 h. <u>For Football</u> : players are restricted to helmet, shoulder pads, and shorts during practice. If the WBGT rises to this level during practice, players may continue to work out wearing football pants without changing to shorts. <u>For All Sports</u> : Provide at least four separate rest breaks each hour with a minimum duration of 4 min each.
84.2 - 86.0	Maximum practice time is 1 h. <u>For Football</u> : No protective equipment may be worn during practice, and there may be no conditioning activities. <u>For All Sports</u> : There must be 20 min of rest breaks distributed throughout the hour of practice.
≥ 86.2	No outdoor workouts. Delay practice until a cooler WBGT is reached.

Air Temp Danger Zone Critical Zone 70F 80% RH 100% RH RH = Relative Humidity 75F 70% RH 100% RH 80F 50% RH 80% RH 85F 40% RH 68% RH 90F 30% RH 55% RH 95F 20% RH 40% RH 100F 10% RH 30% RH

One other method of measuring the relative humidity is the use of a sling psychrometer, which measures wet bulb temperature. The wet bulb globe temperature should be measured prior to practice and the intensity and duration of practice adjusted accordingly. Recommendations are as follows:

6. Cooling by evaporation is proportional to the area of the skin exposed. In extremely hot and humid weather reduce the amount of clothing covering the body as much as possible. **Never use rubberized clothing.**

7. Athletes who are at high risk or who have a medical history, should be weighed each day before and after practice by the athletic trainer and **weight charts checked**. Generally a three percent weight loss through sweating is safe and over a three percent weight loss is in the danger zone. Over a three percent weight loss the athlete should not be allowed to practice in hot and humid conditions. Observe the athletes closely under all conditions. **Do not allow athletes to return to practice until they have adequately replaced their weight from fluid loss.**

8. Observe athletes carefully for signs of trouble, particularly athletes who lose significant weight and the eager athlete who constantly competes to the limit his/her capacity. Some trouble signs are nausea, incoherence, fatigue, weakness, vomiting, cramps, weak rapid pulse, visual disturbance and unsteadiness.

9. Teams that encounter hot weather during the season through travel or following an unseasonably cool period, should be physically fit, but will not be environmentally fit. Coaches in this situation should follow the above recommendations and substitute more frequently during games.

10. Know what to do in case of an emergency and have your emergency plans written with copies to all your staff. Be familiar with immediate first aid practice and prearranged procedures for obtaining medical care, including ambulance service.

11. Parents and Coaches Guide to Dehydration and Other Heat Illnesses in Children

<https://www.nata.org/sites/default/files/heat-illness-parent-coach-guide.pdf>

Guidelines for Thunder and Lightning

1. Procedures for severe weather should be a part of the athletic department's Emergency Action Plan.

2. Prior to severe weather:

a. Establish a means of monitoring weather including reliable weather forecast resources* for your area.

b. Create a communication system for when dangerous weather approaches for all personnel and facilities. Establish a chain of command for making decisions for postponements and cancelations.

c. Train coaches, athletic trainers, game personnel and other staff on procedures and practices to follow during a storm.

d. Establish appropriate safe areas** for all facilities/venues.

3. During severe weather:

a. When thunder is heard or lightning is reported within six miles of the outdoor event, everyone should be moved to a designated safe area.**

b. If someone is struck by lightning, enact first aid and CPR including calling 911.

4. Following severe weather:

a. Activities should not be restarted until 30 minutes after the last rumble of thunder or lightning flash.

*WEATHER RESOURCES:

Phone apps may lack accuracy and may have a delay of several minutes until accurate weather is displayed.

National Weather Service for Hartford: 860 247-1212

National Weather Service for Bridgeport: 732 235-1212

** SAFE AREAS: For each venue, identify substantial, fully enclosed buildings with wiring and plumbing, such as a school, field house, library, home, or similar habitable (eg, where people live and work) building to serve as a safe place from lightning.

Once inside a safe place, people should stay away from plumbing, showers, electrical equipment and corded phones.

If an appropriate safe place is not available, a hard-top vehicle with the windows closed and buses are safer than open areas. If no safe place can be found, people should seek out the next best option. While there is no absolutely safe place outdoors when lightning is in the area, the risk of being struck may be slightly lessened by seeking out low areas such as valleys, which are slightly less dangerous than higher elevations. In a large group of trees, spreading out with 50 feet or more between individuals will reduce the likelihood of multiple casualties caused by a single lightning strike.

(source: NFHS, <https://www.nfhs.org/articles/guidelines-for-developing-lightning-safety-policies/>)

** UNSAFE AREAS:

Unsafe locations include most places termed shelters, such as picnic, park, sun, bus, and rain nonmetal shelters and storage sheds. Locations with open areas, such as tents, dugouts, refreshment stands, gazebos, screened porches, press boxes, and open garages are not safe from a lightning. Tall objects (eg, trees, poles and towers, and elevated areas) are potential lightning targets and should be avoided. Large bodies of water, including swimming pools, are unsafe areas.

Injuries have been reported to people inside a building who were using plumbing or wiring or were near enough to the structure to receive a side flash from lightning. Close proximity to showers, sinks, locker rooms, indoor pools, appliances, and electronics can be unsafe.

([Source NATA](#))