

## Roosevelt High School Athletics Emergency Action Plan

## **Important Contacts**

- Athletic Trainer– Terrill Paulson– 202-439-6430
- Athletic Director– Reggie Stevens 202-460-9172
- Principal– Justin Ralston
- Athletics Administrator– Mr. Smith 202 -770-6114
- Head Custodian– Mr. Long– 202-802-3491
- Lead Athletic Trainer- Dr. Jamila
- Watson 202-439-6437 Jamila.Watson@k12.dc.gov
- Executive Director of Athletics-Michael Bryant 202-870-1403 Michael.Bryant5@k12.dc.gov

## Introduction

In the event that an emergency situation should arise during a Roosevelt High School athletic event, including practices and competitions, the following guidelines should be followed in order to provide the best care to the patients with emergency and/or life-threatening conditions. Implementation of an emergency plan will ensure the best care is provided for emergencies.

#### **Emergency Personnel:**

- Terrill Paulsen- Athletic Trainer
- •Team Physician, Terry Thompson, MD (Howard University Hospital)
- •Medical Resident Physicians (Howard University Hospital Medical Residents)
- •Athletic Training Students (George Mason University)

•EMS

## **Roles within the Emergency Team:**

Immediate care of the athlete Emergency equipment retrieval Access for EMS to the scene (opening gates, disarming panic doors) Activation of the Emergency Medical System Direction of EMS to the scene

#### **Emergency Equipment:**

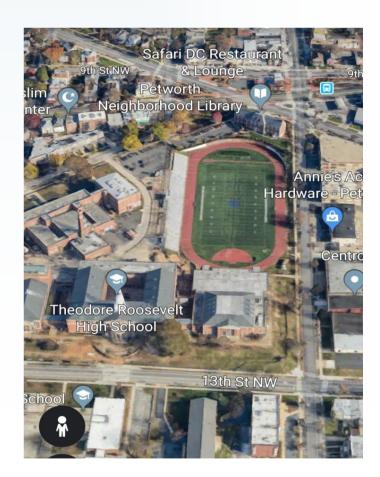
Supplies on field: 1st aid kit/supplies and an Automated External Defibrillator (AED). Additional emergency equipment (including splint bag, and crutches, maintained on sideline)

# Activating the EMS System: <u>Making the call:</u>

9-1-1 if available Telephone numbers for local police, fire department, and ambulance service

#### **Providing Information:**

- Roosevelt High School– 4301 13th St. NW, Washington, DC 20011
- Telephone number of the caller
- Number of athletes injured
- Condition of the athlete (breathing, not breathing, pulse, no pulse, bleeding, conscious, unconscious)
- 1st aid treatment initiated by the 1st responder (blood control, rescue breathing, CPR, etc)
- Specific directions as needed to locate the emergency scene
- Other information as requested by dispatcher
- Someone will be in place to meet the ambulance and direct them to the injured athlete



#### **Transportation to the Emergency Room:**

- If the athlete is transported, EMS should provide which hospital the athlete is going to in order to provide accurate information to the parent or guardian.
- If EMS is activated the parent or guardian of the injured athlete must be contacted.
- If the patient is transported, a coach or school staff MUST accompany the patient to the hospital along with the emergency treatment form.

## **Injuries on the Football Field**

• EMS should be directed to the Specific instructions to access the field.

#### 4301 13th St NW, Washington, DC, 20011

## Injuries in the Gymnasium

• Provide specific instructions on disabling alarms or unlocking gates here.

• Direct EMS to the front entrance of the school and then guide to:

## Injuries at an Away Event

If the Athletic Trainer (AT) travels with the team, the AT will assess the injury and provide necessary initial injury management.

- •Follow instruction of the emergency action plan devised specifically for that school (If out of town a supplemental Emergency Action Plan will be provided)
- •If the Athletic Trainer (AT) does not travel with the team the host AT or other medical personnel will assess and give recommendations for initial injury management.
- •Upon return to the school, the AT should be notified as soon as possible about the injury. The injury should be re-assessed by the AT. If possible a written assessment by the host medical staff should be obtained for the home AT.
- •If EMS is activated, the athlete should not be taken to the emergency room alone.
- •A parent, coach or other school staff member must accompany the athlete.
- •The AT, coach, or the accompanying school staff member should notify the athlete's parent or guardian if he/she is transported to the Emergency Room. An injury report will be completed by the AT upon return to the school.

## **Lightning Safety**

All coaches and athletes will use the following guidelines in the event of lightning. If you see lightning or hear thunder all individuals are to leave the athletic site and seek safe shelter. Play is not to be resumed until 30 minutes after the last lightning or thunder occurrence. Safe sites include inside cars, vans, buses, or nearby buildings. Shelter should not be taken in the baseball or softball dugouts.

## **General Information**

On Field Emergency Protocol:

- Players and coaches should go to and remain in the bench area once medical assistance arrives adequate lines of vision between the medical staffs and all available emergency personnel should be established and maintained
- Players, parents and non-authorized personnel should be kept a significant distance away from the seriously injured athlete or athletes
- Players or non-medical personnel should not touch, move or roll an injured player
- Players should not try to assist a teammate who is lying on the field (i.e., removing the helmet or chin strap, or attempting to assist breathing)
- Players should not pull an injured teammate or opponent from a pile-up
- Once the medical staff begins to work on an injured player, they should be allowed to perform services without interruption or interference
- Players and coaches should avoid dictating medical services to the athletic trainers or team physicians.

#### **Emergency/Crisis Event**

In the event of an emergency/crisis, the Athletic trainer/On-site school personnel will direct the athletes, coaches, officials to the designated safe secure location.