

Emergency Action Plan

Pikeville Junior High/High School Athletics

120 Championship Drive Pikeville, Kentucky 41501

Purpose of EAP:

To provide Pikeville Junior High/High School Athletics with an emergency action plan (EAP) in case of a serious or life-threatening condition that arises during practice or competitions. The athletic director, coaches, and others involved in athletics must constantly be on guard for potential injuries, and although the occurrence of limb-threatening or life-threatening emergencies is not common, the potential exists. Therefore, prepared emergency responders must have planned in advance for the action to be taken in the event of such an emergency.

Need for EAP:

The EAP has been categorized as a written document that defines the standard of care required during an emergency situation. Serious emergencies rarely happen but when they do, a quick, organized response can make a difference between a successful and unsuccessful reaction to an emergency. An EAP that is well planned and rehearsed will provide responders with the approach they need for an effective response. Also of significance is the legal basis for the development and application of an emergency plan. It is well known that organizational medical personnel, including coaches, have a legal duty as reasonable and prudent professionals to ensure high-quality care of the participants.

Emergency Contacts:

Fixed phones are not available in some locations outside of the school building. A phone is available inside the main office and coach's office and can be used for sports played inside school (ie. volleyball, basketball). In the instance that a fixed phone line is not available, cell phones are carried by the administrator in attendance, coaches, and athletic staff and even spectators if necessary. The following is a list of important phone numbers needed in case of emergency:

Athletic Director Cell Phone(AD)	422-6565
School Office Phone.	432-0185
Pikeville Fire Dept. and EMS.	437-6234
Poison Control Center.	1-800-222-1222
Ambulance, Fire, Police.	911

Information to be provided over the phone in case of emergency:

1. Name and phone number you are calling from
2. Exact location of emergency and directions (street names, buildings, landmarks, entry into building, specific areas, etc.)
3. Type of injury or illness
4. Condition of patient(s) and type of aid being provided
5. Number of people injured

6. Other information as requested and be the last one to hang up

The Pikeville High School Administrator in attendance (afterwards called The Administrator) will make the decision to call EMS and will personally make the call or they may assign a responsible person to call. Local EMS should also have a map of campus to aid in the response of an emergency. A map is located at the end of this document.

Chain of Command:

The Administrator is in charge of emergency until EMS arrives. Doctors will assist if summoned by The Administrator. Coaches and assistant coaches are also available to assist The Administrator but only if asked. The only exceptions are if the visiting team has an athletic trainer or team doctor, who is responsible for their team, and when The Administrator is not at games or practices the head coach is in charge until The Administrator or EMS arrive.

Emergency Qualifications:

It is required that coaches and coaches are all trained in CPR and first aid. The Administrator for any event may have other coaches onsite at competitions and practice as well as event coaches to assist in providing emergency first aid as The Administrator sees fit. All athletic staff will be trained in first aid including but not limited to CPR and use of AED. It is recommended that all personnel also be trained in the prevention of disease transmission. New athletic department personnel will comply with this rule as soon as possible. EMS may or may not be on site for games or practices since they are located close enough to respond quickly to an emergency. Visiting teams should also be informed of EAP procedures.

EAP Training and Personnel:

Once the importance of the emergency plan is realized and the plan has been developed, the plan must be implemented. Education and rehearsal are necessary for EAP to be successful. Personnel involved in EAP training should include, but are not limited to, The Administrators for the school, AD, team doctors (if there is one) all coaches, paramedics and other EMS responders. The AD will be in charge of annual training and will meet with coaches before each season begins to rehearse EAP for each sport that season. Training will involve a review of EAP, a presentation of expectations and standards that each person will be held accountable for, assignments of responsibilities, and rehearsal EAP. If there are team doctors they should be at these meetings but if a conflict arises, The Administrator will meet with doctors as soon as time permits. A thorough understanding of the procedures associated with the emergency care plan is required to ensure quick and successful care. Training and review is required each time a member joins the personnel involved in emergency situation.

Responsibilities of Emergency Team Members:

During home games, the home team Administrator and the visiting coach or administrator are responsible for their own teams but may assist the other coach if needed. Since there is only one AD on campus, all coaches are responsible for emergencies during practice and games until the AD, EMS, or doctor arrives on scene. Since insurance coverage varies among athletes, parents may decide how their athlete is cared for and where they are cared for. Parents are the primary person to accompany student to hospital. If parents are not around, an assistant coach will accompany athlete to hospital.

Equipment and Supplies:

All available supplies and equipment are stored in the coaches office, carried with the coaches or in the case of AEDs at the Hambley Athletic Complex, inside the T. W. Oliver Gymnasium and inside the Principal's Office in the Main building. . All available equipment will be on site for games and quickly accessible including a fully stocked and complete medical kit for all games and competitions. Coaches are required to carry a medical bag to all competitions. Equipment should be in good condition and personnel must be trained, in advance, to use it properly. To ensure that emergency equipment is in working order, all equipment should be checked on a regular basis. In addition, medical records and emergency contacts for all athletes should be available both at the school and on the road.

Environmental Conditions:

In case of lightning, referee or athletic director is responsible for the decision to stop the game. However, ATC can inform referee and/or athletic director of possible hazard. Heat issues are not usually a problem in this area except during summer pre-season practice, especially during football. Cold conditions are also a possibility in this area. The AD and Coaches should be current on both heat and cold injuries signs and symptoms and be able to treat ill or injured athlete(s) accordingly. If the situation does arise where weather conditions might affect athletes, the coach or AD will keep track of weather conditions via psychrometer or if one is not available the AD or Coach will refer to weather conditions by use of internet websites such as weather.com, noaa.gov or local news website. The AD and Coaches should also follow the NATA Position Statement: Exertional Heat Illnesses as a reference for determining attire, extent of practices, signs and symptoms, prevention, and treatment of heat injuries and illnesses.

In case of a fire, everyone inside building will proceed to nearest exit and remain outside and away from building. Someone should also call 911 to inform them of situation. In case of an earthquake, everyone inside school will immediately drop, cover, and hold on. If necessary, move only a few steps to a nearby safe place avoiding windows. Stay indoors until the shaking stops and you're sure it's safe to exit. If inside the school, expect the fire alarms and maybe sprinklers to go off during a quake. If you are outdoors, find a clear spot away from buildings, trees, and power lines and drop to the ground. Once the shaking stops check yourself and others for injuries. Expect aftershocks and each time you feel one, drop, cover, and hold on. Get everyone out if your home is unsafe. Someone should also call 911 to inform them of situation.

Emergency Care:

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

1. Check life threatening conditions
 - a. Level of consciousness – if unconscious call 911 immediately
 - b. Airway – is airway blocked
 - c. Breathing – is person breathing
 - d. Circulation – does person have pulse
 - e. Bleeding – is person bleeding severely
2. Call 911 now if necessary
3. Emergency equipment
 - a. AED, spine board, cervical collar, first aid kit
4. Apply basic first aid as situation requires
 - a. Adult CPR: 30 compressions then every 2 breaths
 - b. Bleeding: direct pressure over injury; elevate injury over heart if possible; apply sterile dressing over injury
 - c. Splint fractures
 - d. Cervical Collar – apply if suspected neck injury; prevent any movement of neck when applying cervical collar
 - e. Spine Boarding – use if suspected head, neck or spine injury; prevent any movement of spine while attaching to spine board
 - f. Treat for Shock – if necessary
5. Any other emergency procedures as necessary
6. Other things to consider during emergency situation:
 - a. Reassure and calm athlete
 - b. Don't move severely injured athlete unless he/she is in danger
 - c. Don't reduce fractures or dislocations
 - d. Sufficient lines of vision between the medical staff and all available emergency personnel should be established and maintained
 - e. Once the medical staff begins to work on an injured player, they should be allowed to perform services without interruption or interference
 - f. Keep players, coaches, spectators away and prevent them from helping injured athlete

START Triage Plan:

The concept of triage is simply a method of quickly identifying victims who have immediately life-threatening injuries and who have the best chance of surviving so that when additional rescuers arrive on scene, they are directed first to those patients.

When the situation arises where there is a need to treat multiple victims, the Administrator or coach at the site will be in charge of determining the order of care for the victims. All victims will be identified using athletic tape as follows:

- *IMMEDIATE* – 1 strip of tape for the serious, life-threatening injuries that need immediate care. These patients are at risk for early death - usually due to shock or a severe head injury. They should be stabilized and transported as soon as possible.
- *DELAYED* – 2 strips for moderate injuries that aren't immediately life threatening. Patients who have been categorized as *DELAYED* are still injured and these injuries may be serious. They were placed in the *DELAYED* category because

their respirations were under 30 per minute, capillary refill was under 2 seconds and they could follow simple commands. But they could deteriorate. They should be reassessed when possible and those with the most serious injuries or any who have deteriorated should be top priorities for transport. Also, there may be vast differences between the conditions of these patients. Consider, for example, the difference between a patient with a broken leg and one with multiple internal injuries who is compensating initially. The second patient will need much more frequent re-assessment.

- *MINOR* – 3 strips for mild injuries that require the least amount of emergency care. Ask those who are not injured or who have only minor injuries to identify themselves. Tag those with minor injuries as *MINOR*. Patients with *MINOR* injuries are still patients. Some of them may be frightened and in pain. Reassure them as much as you can that they will get help and transport as soon as the more severely injured patients have been transported. Any of these patients also could deteriorate if they had more serious injuries than originally suspected. They should be reassessed when possible.

As an AD or coach and first one on the scene, not starting CPR may be the hardest thing you must do at a multiple casualty scene. But if you perform CPR on one patient, many others may die. ATC will assign doctors, AT students, or coaches to assist in care until ATC or EMS can attend to athlete.

Documentation:

All actions and treatments pertaining to the emergency situation should be recorded on a standardized form. This is important for future reference for the EAP personnel. They need to be able to look back at the situation and response and improve or revise the EAP as they see fit. This will ensure better reactions and effectiveness for potential emergencies. The Athletic Director will be mainly in charge of recording information. Doctors may assist if they provide care or treatment.

Documentation should include the following:

1. Documentation of response and actions during emergency situation
2. Follow-up documentation on evaluation of response to emergency situation
3. Documentation of personnel training and rehearsals

All medical records should be kept at the school and copies made to be brought along when traveling. Records left at school are kept in main office and keys are held by custodians and AD.

Procedures for Various Sport Locations for venues used by Pikeville HighSchool

TW Oliver Gymnasium – Boys/Girls Basketball (High School and Junior High) Volleyball (High School and Junior High)

In case of emergency a cell phone at the court will be used by The Administrator in attendance. The Administrator will give directions for EMS to the gym at Pikeville High School if necessary. The school is located at 120 Championship Drive in Pikeville. Someone will be assigned to meet EMS at the Main entrance to parking lot and at the

main door of the building. They will guide EMS to the court which can be accessed by using the glass doors on the front of school. The main gym doors are located inside and to the left of the student center.

Blue Goose–Practice Facility

In case of emergency a cell phone will be used by Coach to call EMS and the Athletic Director. The coach will give directions for EMS if needed to the Blue Goose gym on Hambley Boulevard someone will be assigned to meet EMS in the parking lot beside the Blue Goose. They will guide EMS to the court inside the Blue Goose.

Auditorium Stage – Dance team practice

In case of emergency a cell phone will be used by the coach to call EMS and the Athletic Director. The coach will give directions to the Auditorium in Pikeville High School if necessary EMS if necessary. Someone will be assigned to meet EMS at the main entrance to the school. They will guide EMS to the Auditorium if necessary.

Elementary School Gym: Cheerleader practice

In case of emergency a cell phone will be used by the coach to call EMS and the Athletic Director. The coach will give directions to EMS if necessary. Someone will be assigned to meet EMS at the main parking lot of Pikeville Elementary. They will guide EMS to the gym.

Bob Amos Park: track and field, tennis, cross country and boys and girls Soccer.

In case of emergency a cell phone will be used by the coach to call EMS and the Athletic Director. The coach will give directions to EMS if necessary and direct them to the event location. Someone will be assigned to meet EMS at entrance to the soccer field to direct EMS to the correct event venue.

Green Meadows Country Club: Boys and Girls Golf

In case of emergency a cell phone will be used by the coach to call EMS and the Athletic Director. The coach will give directions to the Green Meadows Country Club 6887 N Mayo Trail, Pikeville to EMS if necessary and direct them to the event location. Someone will be assigned to meet EMS at entrance to the parking lot to direct EMS to the correct location.

Elk Run: Junior High Golf

In case of emergency a cell phone will be used by the coach to call EMS and the Athletic Director. The coach will give directions to the Elk Run Golf Course 8709 Lower John's Creek Road to EMS if necessary and direct them to the event location. Someone will be assigned to meet EMS at entrance to the parking lot to direct EMS to the correct location. (Directions to Elk Run: Take US 23 North from Pikeville, turn right on Kelsey Friend Boulevard (KY 3218) to the Pikeville/Pike County Airport. Turn right on Airport Road. Turn left on KY 194. Go approximately 3 miles; golf course is on the left.)

Hambley Athletic Complex: Football, Baseball, Softball

In case of emergency a cell phone will be used by the Administrator at the event or the coach if no administrator is on site to call EMS and the Athletic Director. The

Administrator will give directions to the venue at The Hambley Athletic Complex Pikeville to EMS if necessary and direct them to the event location. For Football and Baseball someone will be assigned to meet EMS in the Parking lot directly across from the Community Trust Bank behind the City Swimming Pool. For softball someone will be assigned to meet EMS at the South end of the Main Building and direct EMS to the softball field

Pikeville High School Emergency Action Plan

Abridged Version*

Emergency Contact Phone Numbers:

Athletic Director Cell Phone(AD). 422-6565
School Office Phone... 432-0185
Pikeville Fire Dept. and EMS. 437-6234
Poison Control Center 1-800-222-1222
Ambulance, Fire, Police. 911
Poison Control Center. 1-800-222-1222

Notify School Administrators, AD , and EMS Immediately if an Emergency occurs

Emergency Care:

Apply basic emergency care as situation requires.

1. Check life threatening conditions
 - a. Level of consciousness – if unconscious call 911 immediately
 - b. Airway – is airway blocked
 - c. Breathing – is person breathing

- d. Circulation – does person have pulse
- e. Bleeding – is person bleeding severely
2. Call 911 now if necessary
3. Apply basic first aid as situation requires
 - a. Adult CPR: 30 compressions for every 2 breaths (slow, don't force)
 - b. Bleeding: direct pressure over injury; elevate injury over heart if possible; apply sterile dressing over injury;
 - c. Splint fractures
 - d. Cervical Collar – apply if suspected neck injury; prevent any movement of neck when applying cervical collar
 - e. Spine Boarding – use if suspected head, neck or spine injury; prevent any movement of spine while attaching to spine board
 - f. Treat for Shock – if necessary

Information to be provided over the phone:

1. Name and phone number calling from
2. Exact location of emergency and directions (street names, buildings,

landmarks, entry into building, specific areas, etc.)

3. Type of injury or illness
4. Condition of patient(s) and type of aid being provided
5. Number of people injured
6. Other information as requested and be the last one to hang up

Equipment and supplies:

All available emergency equipment carried by the coach to the event and AEDs are located at the Hambly Athletic complex, in the Principal's Office in the main building and in the TW Oliver Gymnasium

Documentation:

Medical records and other documents are kept in the Main Office

Environmental Conditions:

Heat Injuries

•**Heat Cramps** – dehydration, thirst, sweating, muscle cramps, fatigue

•**Heat Syncope** (fainting) – dehydration, fatigue, tunnel vision, pale or sweaty skin, decreased pulse rate, dizziness, lightheadedness, fainting

•**Heat exhaustion** - normal or elevated temperature, dehydration, dizziness, lightheadedness, fainting, headache, nausea, diarrhea, decreased urine output, persistent muscle cramps, pale skin, profuse sweating, chills, cool/clammy skin, intestinal cramps, urge to defecate, weakness, hyperventilation

•**Heat stroke** - high body-core temperature, central nervous system changes, dizziness, drowsiness, irrational behavior, confusion, irritability, emotional instability, hysteria, apathy, aggressiveness, delirium, disorientation, staggering, seizures, loss of consciousness, coma, dehydration, weakness, hot and wet or dry skin, fast heart beat, low blood pressure, hyperventilation, vomiting, diarrhea; cool athlete immediately in any way possible, **can lead to death**

Cold Injuries

•**Frostnip** – white/waxy skin, numbness; typically cheeks, earlobes, fingers, and toes

•**Frostbite** – white skin, “wooden” feel to affected area, numbness, possible anesthesia; warm slowly, no rubbing

•**Hypothermia** – shivering, loss of function, slurred speech, dazed, irrational behavior, pale skin, dilated pupils, decreased pulse

START Triage Plan Flowchart



