

Emergency Action Plan (EAP)

In accordance with By-law 2.150, a school shall have on file for each student that participates (including practice) in interscholastic athletics a certificate of physical fitness issued by a licensed physician, physician's assistant or nurse practitioner as set forth in the Illinois State Statutes not more than 395 days preceding any date of participation in any such practice, contest or activity. As this By-law addresses pre-participation certification only, there is not a guideline or By-law in place to address release to interscholastic activity following an injury, with the exception of head injury/concussion. With the understanding that schools throughout the state have different needs and services available to them, this document was produced to provide guidelines on an athlete's return to activity following an injury.

Each school should have a written Emergency Action Plan (EAP) in place for each athletic practice/competition venue to address medical emergencies among athletes, staff, and officials. The EAP should also address spectator injuries, severe weather, fire, electrical failure, bomb threat, criminal behavior, or other possible emergencies or should be included and/or addressed in the school EAP. This plan should be developed to address the unique needs of the individual sport and venue.

EAP's should consist of the following components:

- Personnel
 - Roles
 - Training (AED/CPR/First Aid)
- Communication
 - On and off site communication
 - Land and cell phones/radios/etc.
- Equipment
 - AED
 - Medical Kit/Supplies
- Emergency Medical Care
- Player Medical Information
- Game day Responsibilities (includes appropriate sideline preparedness)
- Catastrophic Incident Plan

While each school's sports medicine/medical service needs and availability are different, guidelines should be developed per school to assist the coaching staff on what injuries should be allowed to return to competition without a medical release/medical professional clearance (including concussion/head injury). It is not practical to identify every situation or injury; however the following guidelines should assist the school/coaching staff on determining if the athlete should be allowed to return to activity without a release/medical professional clearance.

1. No swelling or deformity.

2. No headache, nausea, blurred vision, tingling, numbness, cognitive or sensory changes.
3. Symmetrical (equal to the other side) joint range on motion and strength.
4. Ability to bear weight, without a limp, if injury occurs to the lower body. Ability to put weight thru upper extremity if upper body injury.
5. Ability to complete full functional sporting activities without compensation.

Please remember that the majority of high school athletes are minors. If there is a question as to their injury and ability to participate, the parents/guardian should be consulted.

Athletes that are unable to meet the above criteria should be encouraged to seek medical attention prior to return to interscholastic activity. Those athletes that seek medical attention should be required to provide a written medical release indicating their ability to participate. Without obtaining this release, the school may assume legal liability if the athlete is allowed to participate in activities not permitted by their medical provider.

A proper plan establishes accountability, should be comprehensive, yet flexible, practical, and easily understood. The written EAP must be revised, approved, distributed, and should be rehearsed regularly prior to every athletic season. The athletic department, administration, and sports medicine team share the responsibility to establish, practice, and execute the EAP.

A sample venue-specific is included as a part of this document, which was developed from portions of the third and fourth editions of National Federation of State High School Associations Sports Medicine Handbook. Persons interested in purchasing this handbook can do so at the following location: <http://www.nfhs.org/resources/publications/>

Venue-Specific Emergency Action Plan

(sample)

Venue

Sport: _____
Location: _____

Emergency Personnel

Present: _____
On-Call: _____

Emergency Equipment

Location On-Site:

- First-Aid Kit
- AED
- Items for proper care of blood-borne pathogens
- Ice or chemical ice packs, water, and towels
- Player Medical Information
- Environmental accommodations (cooling tubs, shelters, etc.)
- Other equipment as deemed necessary by local circumstances and qualifications of available personnel

Communication

Access to 911: _____
Access to on-call emergency medical personnel: _____
Access to school medical personnel _____

Role of First on the Scene

1. Control scene (gain access to athlete/injured individual)
 - a. Initial Assessment (to determine ABCs - airway, breathing, circulation)
2. Detailed Assessment (to determine extent of injury/illness)
3. Send designated personnel to summon help if needed:
 - a. EMS: Call 911
 - b. Athletic Trainer: Call Athletic Training Room or Cell: _____
4. Send designated personnel to obtain necessary supplies
5. Initiate immediate care to the sick or injured athlete and stay with injured athlete/individual until medical care arrives or deemed appropriate to move

EMS Access

If EMS is called provide directions/access to scene

Directions to site/location: _____

Open access gates

Designate individual to meet EMS

Last updated: _____

Last practiced: _____