

**ATHLETIC TRAINING \SPORTS MEDICINE
EMERGENCY ACTION PLAN (EAP) For
HOWARD HIGH SCHOOL ATHLETICS**



Revised 2023-2024

Created and Annually Updated by

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Howard Huskies

**Howard High School Athletics:
Emergency Action Plan for Athletic Training and Sports Medicine**

Revised Aug 2023

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 sport participant of emergency and/or life threatening conditions. The development and implementation of an emergency plan will help ensure that the best care will be provided.

As emergencies may occur at any time and during any activity, the athletic training staff must be prepared. Athletic organizations have a duty to develop an emergency plan that may be implemented immediately when necessary and to provide appropriate standards of emergency care to all sports participants. As athletic injuries may occur at any time and during activity, the sports medicine team must be prepared. This preparation involves formulation of an emergency 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. Hopefully, 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 appropriately.

Components of the Emergency Action Plan

These are the basic components of the plan:

1. Emergency Personnel
2. Emergency Communication
3. Emergency Equipment
4. Roles of First Responder
5. Venue directions with map

Emergency Plan Personnel

With most any athletic practice and competition, the first responder to an emergency situation is typically a member of the sports medicine staff, most commonly a certified athletic trainer. A team physician may not always be present at every organized practice or competition. The type and degree of sports medicine coverage for an athletic event may vary widely, based on such factors as the sport or activity, the setting, and the type of training or competition. The first responder in some instances may be a coach or other institutional personnel. Certification and/or training in cardiopulmonary resuscitation (CPR/AED), basic first aid, prevention of disease transmission, and emergency plan review is required for all athletics personnel associated with practices, competitions, skills instruction, and strengthening and conditioning. Copies of training certificates and/or cards are maintained in the athletic training facility for those coaches who are certified.

The development of an emergency plan cannot be complete without the formation of an Athletic HealthCare Team (AHCT). The AHCT may consist of a number of healthcare providers including physicians, emergency medical technicians, certified athletic trainers, student trainers, coaches, and, possibly bystanders. Roles of these individuals within the emergency team may vary depending on various factors such as the number of members of the team, the athletic venue itself, or the preference of the head athletic trainer. There are four basic roles within the AHCT.

The **First** and most important role is establishing the safety of the scene and immediate care of the athlete. Acute care in an emergency situation should be provided by the most qualified individual on the scene. Individuals with lower credentials should yield to those with more appropriate training.

The **Second** role, EMS activation, may be necessary in situations where emergency transportation is not already present at the sporting event. This should be done as soon as the situation is deemed an emergency or a life-threatening event. Time is the most critical factor under emergency conditions. Activating the EMS system may be done by anyone on the team. However, the person chosen for this duty should be someone who is calm under pressure and who communicates well over the telephone. This person should also be familiar with the location and address of the sporting event.

The **Third** role will or may require equipment retrieval which may be done by anyone on the emergency team who is familiar with the types and location of the specific equipment needed. Managers, and coaches are good choices for this role.

The **Fourth** role of the emergency team is that of directing EMS to the scene. One member of the team should be responsible for meeting emergency medical personnel as they arrive at the site of the emergency. Depending on ease of access, this person should have keys to any locked gates or doors that may slow the arrival of medical personnel. A manager or coach may be appropriate for this role.

Roles within the Athletic Health Care Team(AHCT)

- 1. Establish scene safety and immediate care of the athlete**
- 2. Activation of the Emergency Medical System**
- 3. Emergency Equipment Retrieval**
- 4. Direction of EMS to scene**

Activating the EMS System

Making the Call:

- 911 (if available)
- Notify Campus Administration: **478-284-8568**
- Telephone numbers for local police, fire department, and ambulance service

Providing Information: (See specific role on handout "How to call 911")

- Name, address, telephone number of caller
- Nature of emergency, whether 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 ("come to north entrance by gymnasium through glass doors")
- Other information as requested by dispatcher

***If non-medical, refer to the specific non-emergency information of the Emergency Action Plan**

When forming the AHCT, it is important to adapt the team to each situation or sport. It may also be advantageous to have more than one individual assigned to each role. This allows the emergency team to function even though certain members may not be present.

Emergency Communication

Communication is the key to quick emergency response. Athletic trainers and emergency medical personnel must work together to provide the best emergency response capability and should have contact information such as telephone tree established as a part of pre-planning for emergency situations. Communication prior to the event is a good way to establish boundaries and to build rapport between both groups of professionals. If emergency medical transportation is not available on site during a particular sporting event, then direct communication with the emergency medical system at the time of injury or illness is necessary.

Access to a working telephone or other telecommunications device, whether fixed or mobile, should be assured. The communications system should be checked prior to each practice or competition to ensure proper working order. A back-up communication plan should be in effect should there be failure of the primary communication system. The most common method of communication is a public telephone but with today's technological advances, mobile has out duded public phones. Therefore, a cellular phone is preferred if available. At any athletic training venue, whether home or away, it is important to know the location of the workable telephone. Pre-arrange access to the phone should be established if it is not easily accessible.

Emergency Equipment

All necessary emergency equipment should be at the site and quickly accessible. Personnel should be familiar with the function and operation of each type of emergency equipment. Equipment should be in good operation, and personnel must be trained in advance to use it properly. Emergency equipment should be checked on a regular basis and rehearsed by emergency personnel. The emergency equipment available should be appropriate for the level of training for the emergency medical providers. Creating an equipment inspection log book for continued inspection is strongly recommended. It is recommended that a few members of the AHCT team be trained and responsible for the care of the equipment.

It is important to know the proper way to care for and store the equipment as well. Equipment should be stored in a clean and environmentally controlled area. It should be readily available when emergency situations arise.

Medical Emergency Transportation\First Responders\EMS

Emphasis is placed at having an ambulance on site at high risk sporting events. However, this is not always feasible. EMS response time is additionally factored in when determining on site ambulance coverage. The athletic training staff coordinates onsite ambulance coverage. Ambulances may be coordinated for other onsite events\sports, such as major tournaments of GHSA regional or championship events. Consideration is given to the capabilities of transportation service available (i.e.) Basic Life Support or Advanced Life Support) and the equipment and level of trained personnel on board the ambulance. In the event that an ambulance is on site, there should be a designated location with rapid access to the site and a cleared route for entering\exiting the venue.

In the medical emergency evaluation, the primary survey assists the emergency care provider in identifying emergencies requiring critical intervention and in determining transport decisions. In an emergency situation, the athlete should be transported by ambulance, where the necessary staff and equipment is available to deliver the appropriate care. Emergency care providers should refrain from transporting unstable athletes in inappropriate vehicles. Care must be taken to ensure that the activity areas are supervised should the emergency care provider leave the site in transporting the athlete. **Any emergency situation where there is impairment in the level of consciousness (LOC), airway, breathing, or circulation (ABC) or there is a neurovascular compromise, this would be considered as a "load and go" situation and emphasis placed on a rapid evaluation\assessment, treatment, and transportation.** In order to provide the best possible care for Howard High School Athletics, transportation to one of the utilized medical facilities is based upon strengths of the facility.

Non-medical Emergencies

For the following non-medical emergencies: Fire, Bomb Threats, Severe Weather, and Violent or Criminal Behavior, refer to the laminated emergency action plan checklist and follow the instructions provided to each staff member by the School Administration.

City of Forsyth Police Department, Monroe County Sheriff's Office, and Monroe County Emergency Services should be on standby at high risk sporting events and are available in case of any non-medical or medical emergencies which would require their assistance.

Athletic Healthcare Team (AHCT)

Team Orthopedics/Physicians

Dr. Dan Grahl
Dr. Jared Hudspeth

Athletic Trainer

Tanner Hamby

Athletic Director

Latavia Coleman

Community Ambulance

Bibb County Emergency Services

Principal

Michael Scott

School Supertinent

Dan Sims

School Resource Officer

Officer Thomas

Team Physician

- The team physician's first responsibility is the safety and well-being of each athlete;
- To provide and direct annual preparticipation sports physical exams to all athletes;
- To work with the athletic trainer in implementing and signing off on all operating medical protocols for the overall provision of providing care to every athlete;
- To educate every athlete accompanied by parent\guardian on their sports-related injuries upon office visit;
- To assist the athletic trainer with athletes' medical playing decisions during home sporting events, especially football;
- To speak at preseason sport and team meetings with parents of his\her responsibilities to all athletes, services his office and staff provide, and the working relationship with the athletic trainer.
- To provide reasonable care to injured athletes who may need medical intervention through surgical procedures.

Certified Athletic Trainer

- The athletic trainer will be able carryout supervisory tasks as assigned by the team physician with regard to the management of the Athletic HealthCare Team and the athletic training staff;
- The athletic trainer must be able to demonstrate and instruct the athletic training staff members in the performance of the following functions regarding athletic injuries: prevention, assessment, treatment, (including first aid) and reconditioning as set forth by the NATA Board of Certification;
- The athletic trainer will demonstrate and instruct the athletic training staff in proper taping, strapping, bracing, and fitting of athletic equipment;
- The athletic trainer must be able to instruct the athletic training staff in proper medical care procedures with regard to carrying out all prescribed treatments and recommendations set forth by the team/event physician/or therapist;
- The athletic trainer will demonstrate ability to design and implement strength\conditioning\rehab programs. The head athletic trainer will maintain NATA, BOC and CPR certification in accordance with those respective institutions;
- The athletic trainer will organize, set up, as well provide medical coverage for assigned pre-season physicals, sports games or matches, and related events under the supervision of the program manager-normally the athletic director;
- The athletic trainer must demonstrate knowledge of the principles of growth and development over the lifespan and possess the ability to assess data reflective of the athlete status and interpret the appropriate information.

Other duties and responsibilities

- Maintain appropriate general treatment orders to be reviewed annually and approved by the team physician;
- Provide athletic training services for all home athletic contests and away varsity football games. If a conflict arises between an away varsity football game and a home contest, the varsity football event will supersede;
- Act as liaison between family physicians and specialists, the school district, athletes and their parents;
- Maintain accurate records of injuries, treatments and provide insurance claim forms for sports injuries treated by a physician (if applicable)
- Develop and maintain an inventory of supplies and a budget for the athletic training program;
- Will arrange and be present for annual preparticipation sports physicals examinations
- Provide the coaches and athletic director with a list of athletes medically eligible to compete under district and state rules and regulations;
- Assist the athletic director as requested and needed.

Athletic Director

- To provide administrative direction and oversight for all athletics programs and activities and supervise the control, issuance and maintenance of recreational athletic equipment and facilities to be deemed safe for play;
- To supervise full and part-time athletics staff including shared responsibility for hiring, disciplining or firing decisions and full responsibility for training, mentoring, and evaluating coaches and athletics staff;
- To coordinate activities of all other coaches, teams and recreational athletics groups;
- To plan, implement, and promote intercollegiate, intramural, and recreational athletic programs including scheduling games for varsity sports, ensuring a robust intramural program, and developing and overseeing a range

of recreational programs and activities offered for credit and not for credit deemed as an official sport by the Georgia High School Association (GHSA).

- To establish and maintain standards with all coaches by establishing team rules, proper sportsmanship, and discipline issues for each team;
- To monitor strict observances of equality of opportunity in men's and women's athletics by keeping informed of legal requirements and consulting with university staff regarding compliance with the law and to initiate and coordinate the certification of academic and health eligibility of all varsity athletes;
- To collaborate with school relations in the preparation of press releases and the arrangement of media coverage for athletic events, and ensure that the appropriate media is informed of the results of all athletic events;
- To develop and manage departmental, team, and special events budgets; order equipment; and ensure departmental compliance with all school cash handling and management policies.

EMS Director

- To provide medical transportation of injured athletes needing immediate medical attention;
- To provide Paramedic\EMT assistance to complete blood pressure readings and other specified assistance during annual preparticipation sports physical examinations;
- To provide and work beside the athletic trainer by assisting with any potential head, neck, or spinal injury by providing all medical supplies needed to transport to the local hospital emergency room and with working with the athletic trainer on understanding and implementing all other medical protocols.
- To provide additional medical coverage for all home Varsity and possible JV football games per request of the school.

Emergency Room Director

- To direct and supervise all staff members in providing professional care to all athletes needing emergency room care
- To work with the athletic trainer in understanding both their roles in relation to the injured athlete;
- To provide follow recommendations of sports injury to the team orthopedic for further evaluation, treatment, or follow-up requirements.

Principal

- To support to the athletic trainer in understanding the role and responsibilities the athletic trainer plays in regards to all athletic teams within the school as well for providing a budget for athletic related medical supplies and equipment;
- To provide a safe playing environment for all athletes as well students by working along with the athletic director in making sure all playing fields, surfaces, and venues are safe and in good playing conditions;
- To provide parents with support and understanding of the role of the athletic trainer within the school setting.
- To oversee all on campus safety protocols are being followed within the school and meets all school board policies in regards to first aid, care, treatment, and rehabilitation of all injuries seen by the athletic trainer.

Team Dentist

- The team dentist is providing his\her services for and when patient care is needed, warranted, and chosen by the parent or guardian of the athlete.
- The team dentist will play an imperative role in informing athletes, coaches and patients about the importance of preventing orofacial injuries in sports.

Emergency Numbers

Fire/Emergency Services/Rescue : 911

Community Ambulance: 800-663-3593

Piedmont Macon North Emergency Room: 478-765-4800

Emergencies can happen anywhere, at any time, to anyone. To ensure area families have access to acute, quality care Piedmont Hospital's Emergency Department features a 24-hour, emergency department staffed by specially trained doctors and nurses. Our ER clinicians are deeply committed to providing each patient with quick, capable, compassionate care.

Athletic Training Services

Location:

The Athletic Training Facility (ATF) is located on the 600 hall of Howard High School, Room 623 on the back side of the Gymnasium

Hours of Operation:

Daily ATF operations are 1:30pm- 6:00pm throughout the school year. Coverage times may depict and determine operating hours. During the summer months, times may and will vary. On game days, the athletic training room is open until one hour prior to any home events.

Team Medical Coverage

Medical Coverage will be provided for all Varsity and JV Home events. Coverage will also be provided for Varsity football (both home and away). If more than one home sport is occurring simultaneously, the sport carrying the highest risk will receive primary coverage.

NOTE: The team orthopedic will and should be available during all home football games but not guaranteed. He\She and or staff members may be present for away football games but not always required. For all other sporting events, they will and can be contacted for services by the athletic trainer as needed.

Contact Information:

Howard High School

6400 Forsyth Road
Macon GA. 31210
478-779-4850

Athletic Trainer:

Tanner Hamby - 770-896-3232

Athletic Director:

Latavia Coleman - 478-284-8568

Community Ambulance:

800-663-3593

Bibb County Sheriff's Office

668 Ogelthorpe Street,
Macon, GA 31201
478-751-7500

Medical Coverage Team

Howard High School and the Bibb County Board of Education provides one on-site, state licensed and Board Certified Athletic Trainer (BOC-AT) currently for the coverage of all home athletic events. In addition to home coverage, the athletic trainer is required to cover away varsity football games. The AT is stationed daily on campus at the athletic training room located on the 600 hall of the high school behind the gymnasium. Athletes are provided treatment and therapy throughout the day according to their individual class schedule under the supervision of an overseeing physician or athletic trainer. The optimal scenario is each athlete needing athletic training services would get those during their Physical Education, Health, or Weights class.

The volunteer team orthopedic is OrthoAtlanta Orthopedics which provides medical coverage for all home football events and is on call for any additional medical needs of Howard athletes if the ATC needs them. The team orthopedic will see athletes in the office or on an as needed basis without a scheduled appointment. Any athlete needing to set up an appointment to see the orthopedic physician should go through the athletic trainer.

Pre-Athletic Event (Friday Night Medical Time Out)

The athletic trainer on site will incorporate the "Friday Night Medical Time Out" policy for all visiting teams, coaches, and EMS staff in regards to emergency protocols and standards currently in place for each event. Though this is not always feasible to do, it will be provided to each team/s athletic trainer, coach, or medical personnel.

The athletic trainer will also meet with any and all medical officials in coverage of football and all other designated games of coverage. If their attention is needed, the athletic trainer will hand motion for them to come forth and may assist with any medical needs beyond the scope and practice of the athletic trainer. Hands signals are used as a backup if neither of the above are able to break away to physically call them to the scene.

EMERGENCY COMMUNICATION HAND SIGNALS-

- "Crossed Arms over head to create "X" indicates EMS needed on the field
- "Arms stretched out horizontally - Safe Sign" Spine Board is needed
- "Pumping both fist together" splints are needed;
- "Steering wheel motion" cart /motor needed on the field
- "Fist pound on heart" automated external defibrillator (AED) is needed

**HOWARD HIGH SCHOOL ATHLETICS
EMERGENCY MEDICAL PLAN PROCEDURES
(General Overview)**

In the event of a medical emergency, the certified athletic trainer, school medical personnel or an EMT\Paramedic will administer immediate emergency aid to the injured person. If none of the above personnel are present, then the head coach or designated first aid person will assume responsibility.

The designated person will immediately initiate the Emergency Medical System (EMS). Please follow these procedures for a prompt and efficient response.

1. The designated first aid person will remain with the injured athlete at all times and send a designated person to go to a predetermined phone location and dial 911 if needed. That designated person shall:

A. Identify themselves and their exact location with the injured person.

B. State the nature of injury. (Head/neck, fracture, loss of consciousness, cardiac, or heat illness.)

C. Instruct the emergency vehicle exactly where and how to reach activity area:

- 1) Street access
- 2) Entry gate
- 3) Building location
- 4) Building entry

D. Stay on line until the 911 operator disconnects.

E. Return to injury scene in case they are needed for other assistance.

2. Designate a person to meet the vehicle at the gate entrance. This person will have all necessary gate/door/keys in his/her possession.
3. Designate a person to contact security for crowd control and other needs.
4. Designate a person to immediately call parents and advise them of circumstances; then call designated administrators and advise them of the circumstances.
5. Designate a person to be responsible for documenting all information relating to injury and emergency response.
6. Designate a person to accompany the injured to the hospital and remain until parents or designated administrators arrive.



Howard Middle School

Basketball / wrestling /
Cheer / Volleyball

Howard High School

Softball / Baseball /
Flag Football

Practice football /
Soccer / Band / Track

HOWARD HIGH SCHOOL ATHLETIC EMERGENCY PLAN

Ed Defore Stadium (Football, Soccer, Flag Football)

2851 Heath Rd, Macon GA, 31206

1. The closest working phone is located: **Cell Phones**
2. Who can access phones are: **Any individual, Howard Coach, Howard AD\Administrator, or Athletic Trainer**
3. **911** is available.
4. The exact address of the activity site is: **2851 Heath Rd. Macon, Ga**
5. The exact entry location for the closest emergency vehicle is: **The main gate entrance that the GPS directs them too**
6. The distance from the emergency vehicle station to the activity site is 7.1 miles and normal response time is **15-20 minutes**.
7. To access the activity area, emergency personnel must **Follow the road straight down PLEASE MAKE SURE TO TELL EMS IF YOU ARE AT THE TOP FIELD OF THE BOTTOM FIELD**
8. The nearest **Automated External Defibrillator (AED)** is located **With the Athletic Trainer**
9. The designated First Aid person for the activity is Certified Athletic Trainer who is **Tanner Hamby or coach on duty**.
10. The closest emergency care facility is **Atrium Health Navicent** which is **7.9 Miles** from the activity site. Normal travel time is **15-20 minutes**.
11. The closest **Trauma 1 facility** is the **Atrium Health Navicent Medical Center** which is **7.9 miles** from the activity site. Normal travel time is **15-20 minutes**.

SPECIFIC DIRECTIONS IF NEEDED

From Mercer University Drive to Ed Defore Stadium. Turn left onto columbus rd. go about 2.2 miles and turn right onto heath Rd. after 0.4 miles turn left onto seminole way. Arrive at destination

Athletic Trainer on duty for Practice Football, Practice Soccer, Tennis Events:

Tanner Hamby



HOWARD HIGH SCHOOL ATHLETIC EMERGENCY PLAN

Thompson Stadium (Football)

1210 Shurling Dr. Macon GA, 31211

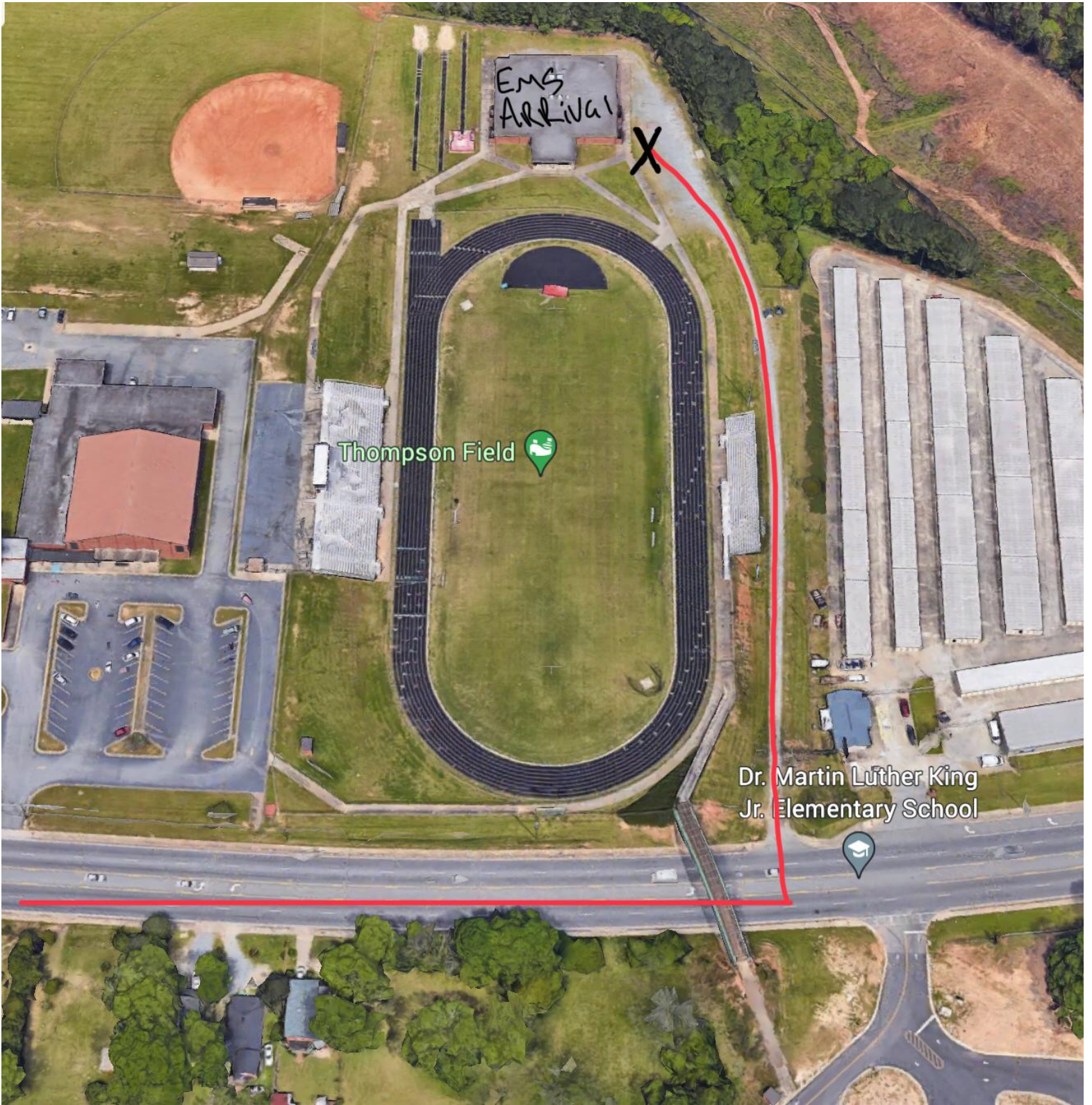
1. The closest working phone is located: **Cell Phones**
2. Who can access phones are: **Any individual, Howard coach, Howard AD\Administrator, or Athletic Trainer**
3. **911** is available.
4. The exact address of the activity site is: **1210 Shurling Dr. Macon GA, 31211**
5. The exact entry location for the closest emergency vehicle is: **the second entrance on the left after the stadium, that leads behind the visitors bleachers**
6. The distance from the emergency vehicle station to the activity site is **4.4 miles** and normal response time is **6-10 minutes**.
7. To access the activity area, emergency personnel must **Turn into the drive and up to the fieldhouse**
8. The nearest **Automated External Defibrillator (AED)** is located **With the Athletic Trainer**
9. The designated First Aid person for the activity is Certified Athletic Trainer who is **Tanner Hamby or coach on duty**.
10. The closest emergency care facility is **Atrium Health Navicent Hospital** which is **3.2 Miles** from the activity site. Normal travel time is **9-12 minutes**.
11. The closest **Trauma 1 facility** is the **Atrium Health Navicent Medical Center** which is **3.2 miles** from the activity site. Normal travel time is **9-12 minutes**.

SPECIFIC DIRECTIONS IF NEEDED

From Gray Hwy to Thompson Stadium: turn right if coming from I-16 or left if coming from Gray onto Shurling Dr. Go approximately 1.5 miles and stadium will be on the left. Ambulance should pass the stadium, go under the overhead walkway, and take a left. Go through the gate and enter field area approx. 0.1 mile on left.

Athletic Trainer on duty for Practice Football, Practice Soccer, Tennis Events:

Tanner Hamby



HOWARD HIGH SCHOOL ATHLETIC EMERGENCY PLAN

Practice Football/Practice Soccer/Track/Practice Tennis Venue Information

6400 Forsyth Rd. Macon, GA 31010

1. The closest working phone is located: **Cell Phones**
2. Who can access phones are: **Any individual, Howard coach, Howard AD\Administrator, or Athletic Trainer**
3. **911** is available.
4. The exact address of the activity site is: **6400 Forsyth Rd. Macon, Ga**
5. The exact entry location for the closest emergency vehicle is: **The First or Third Entrance to the School Depending on The Direction of The Ambulance, The Entrance is Signaled by a Large Bulletin Board Stating Howard Athletics Sponsors**
6. The distance from the emergency vehicle station to the activity site is **3-4 miles** and normal response time is **6-10 minutes**.
7. To access the activity area, emergency personnel must **Turn into the Parking lot Beside the Football Fieldhouse, The First Left you Come up on**
8. The nearest **Automated External Defibrillator (AED)** is located **With the Athletic Trainer or the Football Athletic Training Room**
9. The designated First Aid person for the activity is Certified Athletic Trainer who is **Tanner Hamby or coach on duty**.
10. The closest emergency care facility is **Piedmont Hospital North** which is **6.5 Miles** from the activity site. Normal travel time is **9-12 minutes**.
11. The closest **Trauma 1 facility** is the **Atrium Health Navicent Medical Center** which is **11 miles** from the activity site. Normal travel time is **25-30 minutes**.
12. **Piedmont Hospital North** currently is a **Trauma 2 Facility**.

Athletic Trainer on duty for Practice Football, Practice Soccer, Track, Tennis Events:

Tanner Hamby



HOWARD HIGH SCHOOL ATHLETIC EMERGENCY PLAN

HUSKY GYMNASIUM VENUE INFORMATION

(Men & Women's Basketball\ Volleyball\ Cheer Practice\ Wrestling VENUE INFORMATION)

6400 Forsyth Rd. Macon, GA 31010

1. The closest working hardline phone is located: **The Athletic Training Room**
2. Keys to access phone are: **With any Basketball Coach, Administrator, or Athletic Trainer**
3. **911** is available
4. The exact address of the activity site is **6400 Forsyth Rd. Macon, GA 31010**
5. The exact entry location for the closest emergency vehicle is: **Exterior Doors located on the SW Wing of The Gymnasium/School**
6. The distance from the emergency vehicle station to the activity site is **4.6 Miles** and normal response time is **10-15 Minutes**.
7. To access the activity area, emergency personnel must pass through the **exterior doors(s)**. **To unlock these passageways will be the Coach, Administrator, or Athletic Trainer on site.**
8. The designated first aid person for the activity is Certified Athletic Trainer **Tanner Hamby**
9. The closest emergency care facility is **Piedmont Hospital North** which is **6.5 Miles** from the activity site. Normal travel time is **9-12 minutes**.
10. The closest **Trauma 1 facility** is the **Atrium Health Navicent Medical Center** which is **11 miles** from the activity site. Normal travel time is **25-30 minutes**.
11. **Piedmont Hospital North** currently is a **Trauma 2 Facility**.

Athletic Trainer on duty for all Varsity\JV Basketball & Volleyball Games:

Tanner Hamby



Howard High School

Gymnasium

EMS
Arrival

X

HOWARD HIGH SCHOOL ATHLETIC EMERGENCY PLAN

(Softball/Baseball/Practice Flag Football) VENUE INFORMATION

6400 Forsyth Rd. Macon, GA 31010

1. The closest working phone is located: **Cell Phones**
2. Who can access phones are: **Any individual, Howard coach, Howard AD\Administrator, or Athletic Trainer**
3. **911** is available.
4. The exact address of the activity site is: **6400 Forsyth Rd. Macon, Ga**
5. The exact entry location for the closest emergency vehicle is: **The First or Third Entrance to the School Depending on The Direction of The Ambulance, The Entrance is Signaled by a Large Bulletin Board Stating Howard Athletics Sponsors**
6. The distance from the emergency vehicle station to the activity site is **4.6 miles** and normal response time is **12-15 minutes**.
7. To access the activity area, emergency personnel must **Drive to the parking lot on the SW Side of Campus up to the large Ramp Leading to The Playing Fields**
8. The nearest **Automated External Defibrillator (AED)** is located **With the Athletic Trainer**
9. The designated First Aid person for the activity is Certified Athletic Trainer who is **Tanner Hamby or coach on duty**.
10. The closest emergency care facility is **Piedmont Hospital North** which is **6.5 Miles** from the activity site. Normal travel time is **9-12 minutes**.
11. The closest **Trauma 1 facility** is the **Atrium Health Navicent Medical Center** which is **11 miles** from the activity site. Normal travel time is **25-30 minutes**.
12. **Piedmont Hospital North** currently is a **Trauma 2 Facility**.

Athletic Trainer on duty for Baseball, Softball, Events:

Tanner Hamby

Howard High School

EMS
ARRIVAL



HOW TO CALL 911

(This is to be filled out by the designated caller prior to the activity season, and kept in his or her possession until the season is concluded).

1. **REMAIN CALM.** This will aid the operator in receiving your information.
2. Dial **911**
3. My name is **John\Jane Doe**.
4. I need paramedics at **Howard High School (Specify exact location)**.
5. The exact address is **6400 Forsyth Road, Macon GA, 31210**
6. There is an athlete with a **specific injury** (head/neck, fracture, loss of consciousness, heat illness, cardiac arrest, etc.) The athlete's name is **John/Jane Doe**.
7. The athlete is located at **(specify area)**, which is on the **(navigational direction)** side of the facility.
8. I am calling from **telephone number** extension **(give phone number)** or cell number.
9. **(Person's name)** will meet the ambulance/paramedics at **(the specific location)** and guide them to the injured athlete.
10. Wait until the 911 operator hangs up first.
11. Success in your help in making an athlete's injury much easier to handle.

EMERGENCY MEDICAL PLAN DESIGNATED ROLES

(Complete prior to season)

1. Athletic Trainer\ Coach attends to the injured athlete, controls the scene.
2. Athletic Trainer\AD\Coach calls **911** or other predetermined number.
3. Assistant Coach supervises the team.
4. AD\Coach\Administrator calls security and initiates crowd control.
5. AD\ School Administrator meets paramedics at the gate and guides to injured athlete.
6. Athletic Trainer\AD gives emergency info to paramedics (received from Coach).
7. Athletic Trainer\AD\Coach calls parents or alternate name on
8. Assistant Coach\Parent accompanies injured athlete to hospital.

Athletic Venue EAP Location (Non-Emergencies)

Howard High Gymnasium Complex

Address: 6400 Forsyth Rd, Macon GA, 31210

Telephone:

Venue Directions:

Howard High School is located at 6400 Forsyth Rd, Macon GA, 31210. The gymnasium is located on the far left as you approach the front of the school building. When you reach the front of the school turn left towards the Baseball/Softball Fields. Take the first right you see at the corner of the school. Pull up into the half circle parking area located on the right side of the parking lot. Someone will be standing as a marker of where to go.

Emergency Personnel: Athletic Trainer or Coach on site for practice and competition

Emergency Communication: 911- Emergency, Athletic Trainer- Tanner Hamby (770-896-3232), Athletic Director Latavia Coleman (478-284-8568), Parent\Guardian Contact

Emergency Equipment: Medical Supplies are supplied on site at the school's Athletic Training Facility (ATF) and with the coach in their medical kit provided; AED located with the Athletic Trainer if Present, Secondary AED located in front office of school.

Roles of First Responders

1. Immediate care of the injured or ill student-athlete
2. Activation of emergency medical system (EMS)
911 (Follow Guideline Sheet) on "**How to contact 911**"
3. Emergency equipment retrieval
4. Direction of EMS to scene
 - a. open appropriate gates and doors
 - b. designate individual to "flag down" EMS and direct to scene
 - c. scene control: limit scene to first aid providers and move bystanders away from area

Athletic Venue EAP Location (Non-Emergency) **Howard High Practice Football, Track, Band, Practice Soccer**

Address: 6400 Forsyth Rd, Macon GA, 31210

Telephone:

Venue Directions:

Howard High School is located at 6400 Forsyth Rd, Macon GA, 31210. The Facility is located at the First or Third entrance based on what direction you are coming from. The correct turn in will be signaled by a large billboard, that notes the sponsors of Howard Athletics. Take the first left you see after turn in You will see the parking lot to the fieldhouse and practice facilities. Someone will be standing as a marker of where to go.

Emergency Personnel: Athletic Trainer or Coach on site for practice and competition

Emergency Communication: 911- Emergency, Athletic Trainer- Tanner Hamby (770-896-3232), Athletic Director Latavia Coleman (478-284-8568), Parent\Guardian Contact

Emergency Equipment: Medical Supplies are supplied on site at the school's Athletic Training Facility (ATF) and with the coach in their medical kit provided; AED located with the Athletic Trainer if Present, Secondary AED located in front office of school.

Roles of First Responders

1. Immediate care of the injured or ill student-athlete
2. Activation of emergency medical system (EMS)
911 (Follow Guideline Sheet) on **"How to contact 911"**
3. Emergency equipment retrieval
4. Direction of EMS to scene
 - a. open appropriate gates and doors
 - b. designate individual to "flag down" EMS and direct to scene
 - c. scene control: limit scene to first aid providers and move bystanders away from area

Athletic Venue EAP Location (Non-Emergency) **Howard High Baseball, Softball, Practice Flag Football**

Address: 6400 Forsyth Rd, Macon GA, 31210

Telephone:

Venue Directions:

Howard High School is located at 6400 Forsyth Rd, Macon GA, 31210. The Facility is located on the far left of campus as you approach the front of the school building. When you reach the front of the school turn left and follow the road straight to the small gate designated on the far left of the venue. Someone will be standing as a marker of where to go.

Emergency Personnel: Athletic Trainer or Coach on site for practice and competition

Emergency Communication: 911- Emergency, Athletic Trainer- Tanner Hamby (770-896-3232), Athletic Director Latavia Coleman (478-284-8568), Parent\Guardian Contact

Emergency Equipment: Medical Supplies are supplied on site at the school's Athletic Training Facility (ATF) and with the coach in their medical kit provided; AED located with the Athletic Trainer if Present, Secondary AED located in front office of school.

Roles of First Responders

1. Immediate care of the injured or ill student-athlete
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Athletic Training Room Facilities

Howard High School has one designated Athletic Training Facility (ATF). The main ATF is located on the 600 hall of the main school building on the back side of the gymnasium

The Athletic Training Facility currently serves a total of 400+ athletes sporadically throughout the year and consist of 3 treatment tables, 1 lo-boy stretching table, 1 hydro-collator machine, 1 Combo Electrical Stimulator\Ultrasound machine, 1 Air-Dyne Stationary Bikes, and 1 ice machine availability.

No official area in the ATF was built as a separate office area but the room can be utilized as private space as doors can be locked as deemed necessary for private conversations or examination by the team physician as needed. The athletic director's office in the main school building is also designated as an area for back up if needed for private matters and as needed.

The ATC's Board of Certification, Georgia state licensure, and educational degrees are located on hand with the Athletic Trainer at all times. The operating protocols are within the white notebook located on the bookshelf and labeled as "Operating Protocols" and are available for review at all times and as needed. All AHCT information is located with the Emergency Action Plan.

Equipment

All coaches working in conjunction with the athletic trainer will ensure that all equipment issued meets and the minimal requirements designated by the Georgia High School Association (GHSA) and the National Operating Committee on Standards for Athletic Equipment (NOCSAE). All standard equipment must have and be accompanied by the manufactures sticker of meeting the requirements deemed for safe play. All football helmets will be required to be reconditioned on an annual basis. All other sporting equipment must be examined and reconditioned annual or throughout the sporting seasons and as needed based upon the demands placed on that equipment.

Every coach for their individual sport must be trained on how to properly fit each athlete with protective equipment. They must enforce the rules of safe play in mandating that all protective equipment be worn and used properly at all times. The athletic trainer may and offers assistance to coaches needing help with proper equipment fitting.

Each athlete must be instructed on how to properly wear and use all safety equipment. Each athlete must also be informed on the correct techniques used during all tackling drills and collision sports. This chance of injury by using part if not all pieces of protective equipment can produce injury or potentially death to both the individual as well opponent. Penalty during play can also be given if the equipment is used in a way that could harm an opposing player.

All coaches and or qualified school personnel must ensure that supervision is given and provided at all times while activities are in process. In the event of injury, the coach or school personnel should summon the athletic trainer on duty or make the appropriate measures in providing care for the athlete or student. 911 must be called in the event of any major injury or traumatic event taking place.

All coaches should maintain their CPR\AED certification and be competent in recognizing the signs and symptoms of an athletic related injury or injuries. Additionally, all coaches must maintain on a bi-annual basis the online course on the management of concussions and sudden cardiac arrest (SCA) provided by the National Federation of High Schools (NFHS).

In case of any injury and the athletic trainer isn't present, an accident\injury report must be completed no less than 24 hours after the injury has occurred. The athletic trainer upon his return will take the report and place it in the athlete's personal file.

Equipment Training \EAP Review

All Howard High School coaches and administrators will annually be trained on all inclement weather devices and emergency devices including but not limited to WBGT and AED devices. Emphasis will be placed on using common knowledge in making decisions of play and not to rely on technological tools for making that ultimate decision. Technology is an additional tool that can help make common knowledge decisions along with the NATA recommendations for lightning, humidity, or any medical emergency situation.

All other AHCT members will be reviewed per site coverage on the Howard High School policy in place, instruments currently used for decision making of play, and trained on devices or protocols prudent to their specific titles and needs. A mock scenario may be necessary twice per year if necessary. The minimum is to annually review the EAP in making sure all AHCT members are on track with any updated information regarding each site and coverage in case of inclement weather issues. Any updates, changes, additions, or deletions to the current EAP will be addressed annually with all AHCT members.

AED's & Locations

Howard High School currently has 2 Automated External Defibrillators (AED). One (1) on the Athletic Trainers Trauma Bag (on person at all times), One (1) in the main front office area of the School Building.

1. Located within the Howard High School Main Front Office Area

2. Located on the Athletic Trainers Trauma Bag

An AED will always be present and onsite with the athletic trainer covering all collision and contact sporting events on campus.

Howard High School currently uses (2) Medtronic LifePak Defibrillators. The athletic trainer has been designated to help monitor and provide maintenance on all 7 AEDs. A monthly inspection and log sheet will be maintained by the athletic trainer. Training and discussion of AEDs for all school staff is presented annually in the school-wide emergency meeting presented and conducted by the administrator overseeing school facilities and safety.

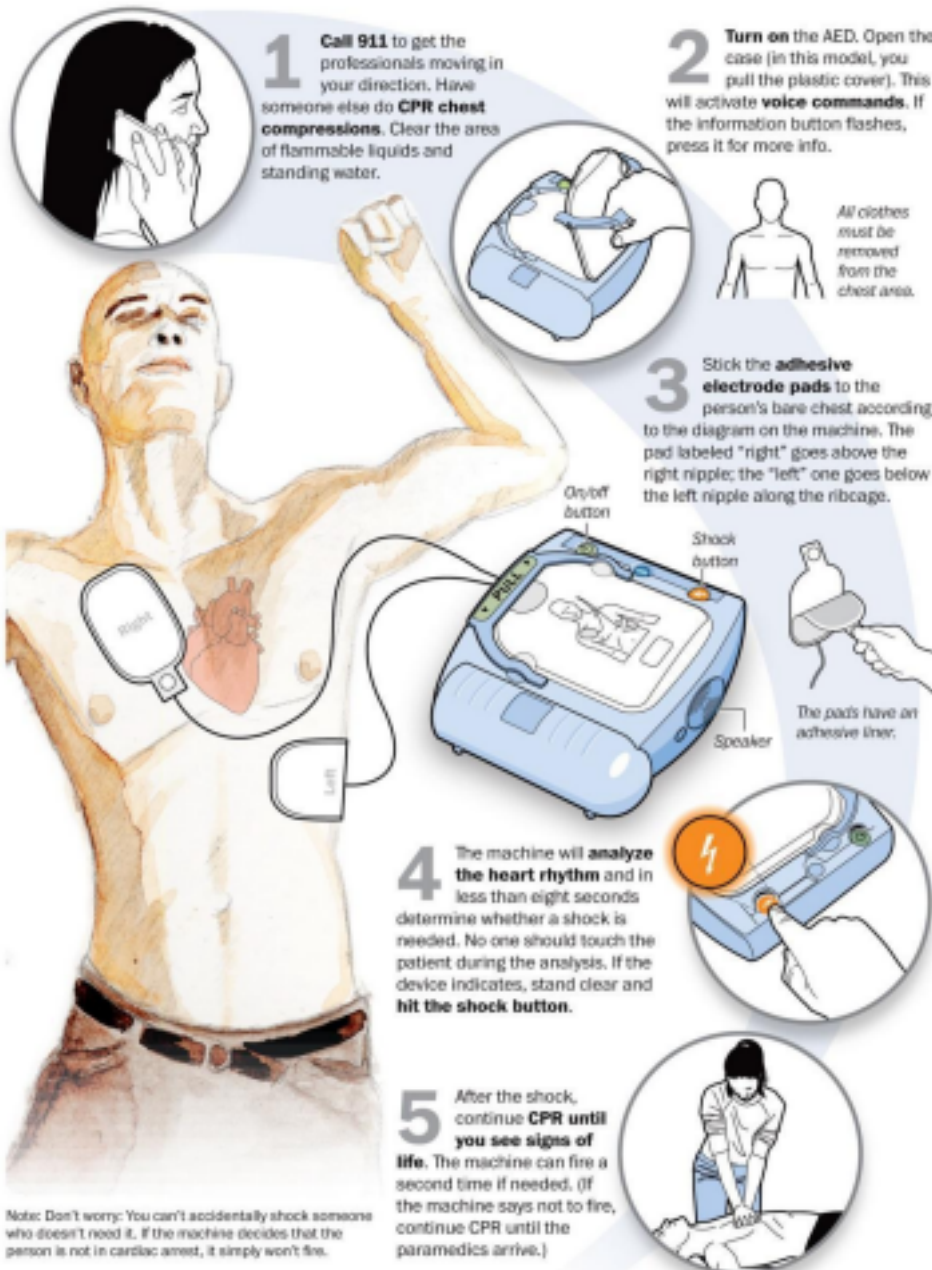
(See following page for handout about how to use and AED).

Howard High School utilizes the following brand of AED's



How to use an AED

You're in the mall, and suddenly the shopper next to you collapses. On the wall is an automated external defibrillator (AED), a device that can shock a heart in cardiac arrest back into a normal rhythm. Although sending electricity through an unconscious stranger's heart may seem like something best left to a professional, AEDs can be used successfully by passersby with no training. And the sooner the better: Survival rates are near 90 percent for people treated within the first minute.



1 Call **911** to get the professionals moving in your direction. Have someone else do **CPR chest compressions**. Clear the area of flammable liquids and standing water.

2 Turn on the AED. Open the case (in this model, you pull the plastic cover). This will activate **voice commands**. If the information button flashes, press it for more info.

All clothes must be removed from the chest area.

3 Stick the **adhesive electrode pads** to the person's bare chest according to the diagram on the machine. The pad labeled "right" goes above the right nipple; the "left" one goes below the left nipple along the ribcage.

The pads have an adhesive liner.

4 The machine will **analyze the heart rhythm** and in less than eight seconds determine whether a shock is needed. No one should touch the patient during the analysis. If the device indicates, stand clear and **hit the shock button**.

5 After the shock, continue **CPR until you see signs of life**. The machine can fire a second time if needed. (If the machine says not to fire, continue CPR until the paramedics arrive.)

Note: Don't worry: You can't accidentally shock someone who doesn't need it. If the machine decides that the person is not in cardiac arrest, it simply won't fire.

SOURCES: HeartStart Inc.; D.C. Fire and Emergency Medical Services

LESLIE TAMURA, BONNIE BERKOWITZ AND ALBERTO CUNDA /THE WASHINGTON POST

Automated External Defibrillator (AED) Use Plan

Howard High School Athletic Training and Sports Medicine

In a medical emergency situation where an AED is used, Howard High School Athletic Training Program has a specified plan in place and follows:

Home Venues:

1. The location of the AED is:

(Gymnasium)

- Onsite with the Athletic Trainer
- Main Front office area of school

(Football, Track, Band, Soccer Complex)

- Onsite with the Athletic Trainer

(Softball, Baseball, Flag Football Complex)

- Onsite with the Athletic Trainer

2. Designated person to retrieve the AED is:

- Athletic Trainer, Student Assistant, or Designated Coach

3. Response Time from AED box to location is:

- Onsite with the Athletic Trainer or less than 2 minutes

4. Doors, Gates, Locks are the responsibility of:

- Designated Coach, Student Assistant, or player

5. CPR\AED Trained Personnel are:

- Athletic Trainer and All Coaches

Visiting Venues

While visiting competitive schools, the Athletic Trainer, Local Emergency Medical Service Team, and or designated personnel in charge of local medical coverage and services for that venue will be located by the visiting team athletic trainer.

If none of the above healthcare professionals are on-site, a designated school administrator, coach, or staff should be noted of who the school uses for medical services if services are needed during participation and events.

Visiting Team Information (To Bibb County)

The Howard High School (HHS) Athletic Training Staff has a mission to administer quality athletic health care. In order to do this, A Certified Athletic Trainer or local EMT\Paramedic will provide services to your sport and will be available to your team before, during and after the athletic events. They will be on site for the events and a team physician will also be either on site or on call. You will have access to our training facilities and will be at liberty to use them for taping and treatment needs if needed and with prior notice to the athletic trainer.

Contact Information

If you are going to be traveling without an athletic trainer or with a non-certified athletic trainer, please notify the Howard High School Athletic Trainer in advance so that they can make necessary arrangements. You can notify them by calling:

Athletic Trainer- Tanner Hamby at 770-896-3232

Athletic Director- Latavia Coleman at 478-284-8568

When you call, please make note of the supplies and the services that you may require.

Athletic Playing Surfaces, Fields, and Courts

All athletic venue playing surfaces are annually inspected prior to each sports beginning season. The gymnasium court undergoes an annual "Strip and Wax program" **beginning** each Friday prior to the Thanksgiving Week break. Grass playing fields and surrounding landscaping are all maintained yearly by the local school district maintenance department. All herbicides and or pesticides that are applied are scheduled around each sports season. If applications are needed within each season, the athletic director will be notified as well as the sports coach and the amount of time needed with no traffic use and drying time will be given.

Individual fields needing more than the normally provided services of update and manicure are normally performed by each sport's team coach and players. All standards for safety are met by the local school district and GHSA regulations for minimal requirements for safe playing facilities and conditions.

Each year, all venues needing safety attention are addressed and brought forth for discussion with the Athletic Director, Athletic Trainer, Principal, Maintenance Director, and School Superintendent. Any items in regards to not meeting safety compliance are addressed at that time.

Coaches and School Officials

Each year, all coaches will attend a meeting with the athletic trainer to discuss and perform those responsibilities that may be required in a medical scenario if the athletic trainer isn't present or on site at the sporting event. Each coach is encouraged to become CPR/AED certified and trained. Coaches are trained but not limited to the following annually: **CPR, AED, Basic First Aid, Concussions, and Special Medical Conditions such as but not limited to Asthma, Sickle-Cell, Diabetes, and Sudden Cardiac Arrest (SCA).**

CPR & AED Certification

School officials, administrators, and staff are provided topics of medical and emergency scenarios during a scheduled meeting provided and given by the overseeing administrator for facilities and safety for the school. **The athletic trainer annually addresses and provides certification opportunities in CPR & AED for all coaches.** A scheduled course for training is offered throughout the school year to all staff. All administrators and staff leaders are required per GHSA by-law 2.54 to be CPR trained and certified prior to any team activity or within a maximum 30 days from the start of team activity and must be renewed every two years.

Pre-Participation Examinations (PPE's)

All athletes participating in any sport at Howard High School are required to have a valid, annual pre-participation examination completed and on file with the athletic trainer. Georgia High School Association(GHSA) requires all athletes to have a valid form completed throughout the state. The following statement is directly from the GHSA website sent out to all membered schools on who is legally bound to provide and sign off on a PPE:

TO: Whom It May Concern

FROM: Georgia High School Association

RE: Pre-Participation Physical Evaluation; pages 3-4

As per Georgia High School Association By-Law 1.41(c) and the new State of Georgia law, the "Pre-Participation Physical Evaluation" form may be signed by a licensed Nurse Practitioner or a Physician's Assistant provided this person has been delegated that task by an M.D. or D.O. Alterations (edits) to this copyrighted document are not permitted. Therefore, the doctor or his/her designee may print and then sign his/her (their) name on the appropriate line(s) found on page 3 and page 4 of the physical form.

The pre-participation examination form below is in word format. It is primarily in the EAP for visual purposes.

Forms are available for pick up or downloading at:

- A. Athletic Training Room Facility
- B. Athletic Directors Office
- c. Individual Sport Coach
- D. Online at web link below

**The pre-participation examination form can be in PDF can be downloaded at the following

link: <http://www.ghsa.net/sites/default/files/documents/forms/GHSA-PPE-4.pdf>

NOTE:

Under no circumstances should an athlete be allowed to participate, tryout, or play in any sport activity until a valid PPE is on file with the athletic trainer and cleared by the athletic trainer. All sports PPE's are considered valid for 365 days after the completion of the annual examination by the physician. Along with a valid PPE completion, a Waiver and Release of Liability form must be included along with the PPE.

GHSA Heat and Humidity Policy for ALL Sports

Policy

The Georgia High School Association (GHSA) has established a Practice Policy for Heat and Humidity that provides guidelines for practices. This policy takes into account temperature, humidity and other environmental factors. Depending on conditions, practices may be unaffected, shortened or cancelled. These guidelines are in a table below for your reference. The GHSA has also instituted Football Preseason Practice Regulations that dictate the number, length and dress for football practices. Those guidelines are also below:

(ALL SPORTS) must follow the statewide policy for conducting practices and voluntary conditioning workouts in all sports during times of extremely high heat and/or humidity that will be signed by each head coach at the beginning of each season and distributed to all players and their parents or guardians. The policy shall follow modified guidelines of the American College of Sports Medicine in regard to:

The scheduling of practices at various heat/humidity levels

The ratio of workout time to time allotted for rest and hydration at various heat/humidity levels

The heat/humidity level that will result in practice being terminated. A scientifically approved instrument that measures Wet Bulb Globe Temperature (WBGT) reading must be utilized at each practice to ensure that the written policy is being followed properly.

(Football Only Specifics) Preseason Practice Regulations

Football may begin five consecutive weekdays prior to August 1st. In the first five days of practice for any student, the practice shall not last longer than 2 hours, and the students shall not wear more than shorts, helmet, mouth piece, and shoes. (Note: the time for a session shall be measured from the time the players resort to the field until they leave the field.)

Beginning August 1st, any student may practice in full pads and may practice two times in single calendar day under the following stipulations:

A student must have participated in five conditioning practices wearing shorts and helmet before being allowed to practice in full pads

If multiple workouts are held in a single day:

- i. No single session may last longer than 3 hours,
- ii. The total amount of time in the two practices shall not exceed 5 hours,
- iii. There must be at least a 3 –hour time of rest between session days must be followed by a single session day or a day off.

These procedures are derived from recommendations created by the Inter - association task force for preseason secondary school athletics participants in the research paper - "Preseason Heat –Acclimatization Guidelines for Secondary School Athletics."

This letter has been sent home so that parents and other guardians are aware of the steps being taken to protect our student-athletes when practicing in the heat and humidity. Any question should be directed to the head coach, athletic director, or athletic trainer.

Georgia High School Association Student/Parent Concussion Awareness

DANGERS OF CONCUSSION

Concussions at all levels of sports have received a great deal of attention and a state law has been passed to address this issue. Adolescent athletes are particularly vulnerable to the effects of concussion. Once considered little more than a minor “ding” to the head, it is now understood that a concussion has the potential to result in death, or changes in brain function (either short-term or long-term). A concussion is a brain injury that results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a blow to the head or body. Continued participation in any sport following a concussion can lead to worsening concussion symptoms, as well as increased risk for further injury to the brain, and even death. Player and parental education in this area is crucial – that is the reason for this document. Refer to it regularly. This form must be signed by a parent or guardian of each student who wishes to participate in GHSA athletics. One copy needs to be returned to the school, and one retained at home.

COMMON SIGNS AND SYMPTOMS OF CONCUSSION

Headache, dizziness, poor balance, moves clumsily, reduced energy level/tiredness • Nausea or vomiting Blurred vision, sensitivity to light and sounds Fogginess of memory, difficulty concentrating, slowed thought processes, confused about surroundings or game assignments, Unexplained changes in behavior and personality Loss of consciousness (NOTE: This does not occur in all concussion episodes.)

BY-LAW 2.68: GHSA CONCUSSION POLICY

In accordance with Georgia law and national playing rules published by the National Federation of State High School Associations, any athlete who exhibits signs, symptoms, or behaviors consistent with a concussion shall be immediately removed from the practice or contest and shall not return to play until an appropriate health care professional has determined that no concussion has occurred.

(NOTE): An appropriate health care professional may include a licensed physician (MD/DO) or another licensed individual under the supervision of a licensed physician, such as a nurse practitioner, physician assistant, or certified athletic trainer who has received training in concussion evaluation and management. a) No athlete is allowed to return to a game or a practice on the same day that a concussion (a) has been diagnosed, OR (b) cannot be ruled out. b) Any athlete diagnosed with a concussion shall be cleared medically by an appropriate health care professional prior to resuming participation in any future practice or contest. The formulation of a gradual return to play protocol shall be a part of the medical clearance.

At Howard High School The Following Medical Professionals are the Only Qualified Individuals that may Clear an Athlete to Begin the Concussion Return To Play Protocol

- 1. Athletic Trainer - Tanner Hamby**
- 2. Team Physician - Dr. Grahl**
- 3. Team Physician - Dr. Hudspeth**

Proper Handwashing Techniques

What are the 7 Steps of Hand Washing?

1. Step 1: Wet Hands. Wet your hands and apply enough liquid soap to create a good lather. ...
2. Step 2: Rub Palms Together. ...
3. Step 3: Rub the Back of Hands. ...
4. Step 4: Interlink Your Fingers. ...
5. Step 5: Cup Your Fingers. ...
6. Step 6: Clean the Thumbs. ...
7. Complete rubbing and washing of hands and fingers for a minimum of 20 secs.



Howard High School Athletics Program

"Preventing the Spread of Staff and Bacteria"

Howard High School Athletics Program

The following information shall be used as a general guideline in helping prevent the spread of the most commonly seen form of staph infection and bacteria in athletics today known as MRSA (Methicillin Resistant Staphylococcus Aureus). Although nothing can be 100% perfect, it is the intention of identifying, recognizing, and providing bacterial prevention recommendations. This will hopefully reduce any bacterial related problems and keep health issues from arising amongst the athletics.

What are bacteria?

Bacteria are a single-celled organism which can only be seen through a microscope. Bacteria come in different shapes and the size of bacteria is measured in micrometer (which is a millionth part of a meter). Bacteria are found everywhere and in all types of environments.

What is MRSA?

Methicillin-resistant Staphylococcus aureus (MRSA) are a type of staphylococcus or "staph" bacteria that are resistant to many antibiotics. Staph bacteria, like other kinds of bacteria, normally live on your skin and in your nose, usually without causing problems. MRSA is different from other types of staph because it cannot be treated with certain antibiotics such as methicillin.

Staph bacteria only become a problem when they cause infection. For some people, especially those who are weak or ill, these infections can become serious.

MRSA infections are more difficult to treat than ordinary staph infections. This is because the strains of staph that are known as MRSA do not respond well to many types of antibiotics-the types of medicines that are normally used to kill bacteria. When methicillin and other common antibiotic medicines do not kill the bacteria which are causing an infection, it becomes harder to get rid of the infection.

MRSA bacteria are more likely to develop when antibiotics are used too often or are not used correctly. Given enough time, bacteria can outsmart antibiotics so that these medicines no longer work well. This is why MRSA and other antibiotic-resistant bacteria are sometimes called "superbugs."

What causes an infection?

MRSA, like all staph bacteria, can be spread from one person to another through casual contact or through contaminated objects. It is commonly spread from the hands of someone who has MRSA. This could be anyone in a health care setting or in the community. MRSA is usually not spread through the air like the common cold or flu virus, unless a person has MRSA pneumonia and is coughing.

MRSA that is acquired in a hospital or health care setting is called hospital-based methicillin-resistant Staphylococcus aureus (HA-MRSA). In most cases, a person who is already sick or who has a weakened immune system becomes infected with HA-MRSA. These infections can occur in wounds or skin, burns, and IV or other sites where tubes enter the body, as well as in the eyes, bones, heart, or blood.

MRSA used to infect people who had chronic illnesses, but now MRSA is becoming more common in healthy people. These infections can occur among people who are likely to have cuts or wounds and who have close contact with one another, such as members of sports teams. This type of MRSA is called community-based methicillin-resistant Staphylococcus aureus (CA-MRSA).

What are the symptoms of MRSA?

Symptoms of a MRSA infection depend on where the infection is. If MRSA is causing an infection in a wound, that area of your skin may be red or tender. If you have pneumonia, you may develop a cough.

Community-based MRSA commonly causes skin infections, such as boils, abscesses, or cellulitis. Often, people think they have been bitten by a spider or insect. Because MRSA infections can become serious in a short amount of time, it is important to see your doctor right away if you notice a boil or other skin problem.

How is an infection diagnosed?

If your doctor thinks that you are infected with MRSA, he or she will send a sample of your infected wound, blood, or urine to a lab. The lab will grow the bacteria and then test to see which kinds of antibiotics kill the bacteria. This test may take several days.

You may also be tested if your doctor suspects that you are a MRSA carrier—a person who has the bacteria on his or her skin but who is not sick. This is done by taking a swab from the inside of the nose.

How is the infection treated?

Depending on how serious your infection is, the doctor may drain your wound, prescribe antibiotic medicine, give you an IV (intravenous) antibiotic, or hospitalize you. You might also be given an ointment to put on your skin or inside your nose and be asked to wash your skin daily with an antibiotic soap called chlorhexidine (Hibiclens) to reduce MRSA bacteria on your skin.

Most cases of community-based methicillin-resistant *Staphylococcus aureus* (CA-MRSA) begin as mild skin infections such as pimples or boils. Your doctor may be able to treat these infections without antibiotics by using a minor surgical procedure that opens and drains the sores.

If your doctor prescribes antibiotic medicine, be sure to take all the medicine even if you begin to feel better right away. If you do not take all the medicine, you may not kill all the bacteria. No matter what your treatment, it is important to call your doctor if your infection does not get better as expected.

How can I prevent from getting or spreading MRSA?

As more antibiotic-resistant bacteria develop, hospitals are taking extra care to practice "infection control," which includes frequent hand-washing and isolation of patients who are infected with MRSA.

You can also take steps to protect yourself from MRSA.

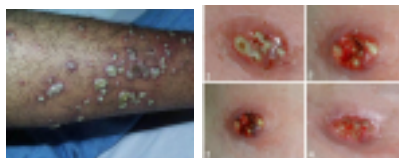
1. Practice good hygiene. Keep your hands clean by washing them frequently and thoroughly with soap and warm water or using an alcohol-based hand sanitizer. Hand-washing is the best way to avoid spreading germs.
2. Keep cuts and scrapes clean and covered with a bandage and avoid contact with other people's wounds or bandages.
3. Do not share personal items such as towels or razors.
4. Be smart about using antibiotics. Know that antibiotics **can** help treat bacterial infections but they **cannot** cure viral infections. Always ask your doctor if antibiotics are the best treatment and avoid pressuring your doctor into prescribing antibiotics when they won't help you get better.
5. Always take all your antibiotic medicine as prescribed by your doctor. Using only part of the medicine can cause antibiotic-resistant bacteria to develop.
6. Do not save any antibiotics and do not use antibiotics that were prescribed for someone else. 7. If you are in the hospital, remind doctors and nurses to wash their hands before they touch you.

Management of potential of MRSA infection:

- **Cover your wound** with clean, dry bandages and follow your doctor's instructions on caring for your wound.
- **Keep your hands clean.** You, your family, and other people with whom you are in close contact should wash their hands frequently with soap and warm water or use an alcohol-based hand sanitizer, especially after changing the bandage or touching the wound.
- **Do not share towels, washcloths, razors, clothing, or other items** that may have had contact with your wound or a bandage. Wash your sheets, towels, and clothes with warm water and detergent and dry them in a hot dryer, if possible.
- **Keep your environment clean** by wiping frequently touched surfaces (such as countertops, doorknobs, and light switches) with a disinfectant.

How do I recognize MRSA and what does it look like?

Staph infection and MRSA (Methicillin-Resistant Staphylococcus Aureus) are commonly visible as skin boils, blisters or pus-filled bumps. Swelling and reddening are common, and larger abscesses under the skin may form. The yellow or white pus inside of bumps and boils often drains on its own without being lanced. Bumps and the surrounding area are often warm to the touch and can be very tender. The infected area is often pink, red or purple in color. MRSA and staph infections can be easily mistaken for a brown recluse spider bite.



Roles and Responsibilities Howard High School Personnel

Athletic Trainer Responsibility

1. Educate athletic teams and coaches on the seriousness of the topic.
2. Display posters and other types of signage in and around athletic facilities that promote proper hygiene and other preventative measures.
3. Communicate with athletes and coaches on a continuous basis on how to prevent the spread of MRSA and other skin infections.
4. Be on the lookout for any skin infections on the bodies of athletes as you conduct your normal duties before or during practices and games.
5. Communicate with the local hospital and primary care physicians on the policies and procedures that have been implemented in the district.
6. Follow the steps that have been formulated that cover the confirmation of a MRSA or other serious skin infection case.
7. If an athletic trainer is uncomfortable with a clearance, they may prohibit the athlete from returning to participation, and contact their principal and district athletic office for further guidance.

Athletic Director Responsibility

1. Ensure that the school principal is notified of all situations that involve a confirmed case of MRSA or other serious skin infection.
2. Ensure that the athletic coaching staff attends the required training and are able to follow the district policies and procedures following a confirmation.
3. Works with appropriate school personnel to facilitate daily cleaning schedules of all athletic facilities. Confirm that the required cleaning products (bacteria and staph killer) are located within the school.
4. Liaisons with the district athletic office to secure any additional services such as cleaning teams, AC repairs, etc.
5. Assists athletic trainer in properly communicating preventative measures with parents and athletes.
6. Remind coaching staff about their responsibilities of educating their athletes about proper hygiene and keeping locker cleaned and personal clothing taken home daily.

Athletic Coach Responsibility

1. Attend any training courses offered by the athletic trainer and athletic director concerning MRSA and related skin infections.
2. Make certain that all student-athletes are educated and understand the importance of proper hygiene.
3. Assist the athletic trainer in watching for signs or symptoms of MRSA or similar skin infections that may be contracted by their student-athletes.
4. Remove any student-athlete from participation immediately if an open wound or other type of skin condition is detected, and report to the athletic trainer at once.
5. All **game/competition** jerseys, pants, socks, and other articles of clothing need to be washed and dried within 24 hours post game or competition. All clothing should be washed with laundry detergent and all drying shall consist of a hot temperature control setting.
6. All **practice** jerseys, pants, socks, and other articles of clothing should be washed on a daily basis or at maximum every 2 days.
7. Instruct all athletes with jerseys worn over padding that they must be removed and hung to dry each day after practice and must not be left on or inside padding overnight. All equipment must be properly stowed away each day and separated from all other sport equipment and clothing.
8. Ensure that all locker rooms are kept clean, picked up, and athlete's personal clothing is taken home each day for cleaning and not left in the locker rooms.
9. All sports equipment should be cleaned and disinfected on a regular basis. This may include equipment

worn by athletes such as helmets, shoulder pads, and protective padding. It is recommended that such items are cleaned, sanitized, and left in direct sunlight for drying.

- Promote to athletes' proper shoe attire while in the locker room. This includes personal flip flops, shower shoes, or tennis shoes to be worn inside locker rooms.

Custodian Responsibility

- Make sure all locker rooms are cleaned on a daily basis. (This includes mopping, sanitizing, and disinfecting).
- Make sure all trash bins are emptied each day and replaced with new liners.
- Remove all unclaimed articles and dirty clothing from the locker room found left on the floor.
- Spray each locker room, locker, and showers on a weekly or routine basis with school approved disinfectant and staph killing agents. Disinfectant must be left to air dry and must not be removed with water, soap, or cleaning materials and works best if left to air dry 10 minutes or longer.
- All toilets must be cleaned and disinfected on a daily basis.
- Provide or have available anti-bacterial showering soaps and hand soaps for all locker rooms. (It is recommended that soap dispensers rather than individual bars of soap be available). This will help reduce and possibly eliminate cross- contamination.

School Nurse Responsibility (If available)

- Monitor all students that may present possible signs of MRSA and report to the school principal cases that have been given a positive diagnosis.
- Communicate with the athletic trainer on a regular basis ensuring that both are updated and reviewed on new procedures pertaining to MRSA.
- Recommend any student with possible signs of MRSA to local physician offices, school nurse practitioners, and/or hospitals for proper care and treatment.
- Make sure all areas of the nurse's station, room, and restrooms are kept clean, sanitized, and disinfected on a daily basis.
- All blankets, pillow cases, and items used for patient comfort are cleaned and disinfected on a regular schedule.

Action Steps for Possible/Confirmed Cases

- Athletic trainer, after examining and treating the athlete, contacts parents to inform them that athletic participation is suspended pending a written clearance is received from a medical doctor.
- Athletic trainer notifies the principal, athletic director if they feel that there is a possibility of a serious skin infection case.
- Athletic director initiates immediate cleaning and disinfecting of all areas.
- Athletic trainer and director communicate with members of the athlete's team in order to review appropriate hygiene procedures. Steps to implement may include all clothing, pads, helmets, knee pads, travel bags, etc. taken home to clean.
- District provides written scripts in order to share information with parents at the school for both proactive and reactive scenarios.
- After confirmation of serious skin infection is received, the school notifies the district office using the appropriate method. Environmental Compliance and Custodial Services administrators will evaluate the situation with the school principal and develop an action plan for cleaning/disinfecting affected areas of the school site.
- Visiting teams that have had contact with affected individuals are notified about the confirmation as soon as possible so that appropriate steps may be taken to limit the spread of the infection.
- Incident report is generated by the athletic trainer and the district athletic director is notified.
- Only skin conditions that have been properly diagnosed and treated by a medical professional may be covered to allow participation of any kind.

Preventative Measures

- All environmental hard surfaces that may come in contact with body fluids should be cleaned and sanitized daily with appropriate products.
- Locker rooms, weight rooms, shower areas and other related facilities should be cleaned daily if used.
- All weight benches and bars should be cleaned and wiped down daily with an anti-bacterial cleaning agent.
- Make sure that padding and other equipment is stored someplace where it can dry out after use. All exposed padding to weight benches shall be removed and replaced with new padding.
- Remind athletes that washing their hands with warm, soapy water frequently is one of the best methods to prevent MRSA and other diseases.
- Encourage immediate showering following activity.
- Remind athletes not to share personal hygiene items (bar soap, towels, and razors), clothing, water bottles, towels or athletic equipment.
- All dirty clothes should be taken home and cleaned on a daily basis. Do not leave jerseys on pads overnight.

9. Cover all cuts and scrapes. If a bandage or wrapping falls off, have it replaced immediately.
10. Include student-athletes and parents in any types of communication that can assist in preventing the spread of skin infections.
11. Remind athletes that they must report every skin wound to their athletic trainer or coach.

HOWARD HIGH SCHOOL LOCKER ROOM INSTRUCTIONS

IT IS UP TO YOU TO PREVENT THE SPREAD OF BACTERIA AND INFECTIONS

1. WEAR CLEAN CLOTHES DAILY
2. PUT DIRTY CLOTHES IN A PLASTIC BAG AND TAKE HOME DAILY
3. PUT TOWELS IN A PLASTIC BAG AFTER USING AND TAKE HOME DAILY
4. DO NOT SET DIRTY TOWELS, CLOTHES ON THE FLOOR OR BENCHES
5. DO NOT LEAVE DIRTY TOWELS OR CLOTHES IN LOCKER OVERNIGHT – TAKE HOME
6. WEAR PERSONAL CROCS/FLIP FLOPS IN LOCKER ROOM – DO NOT WALK AROUND BARE FOOTED
7. DO NOT SHARE PERSONAL ITEMS (TOWELS, RAZORS, SOAP...)
8. COVER ALL CUTS AND SCRAPES
9. WASH YOUR HANDS FREQUENTLY
10. SEE THE ATHLETIC TRAINER IF YOU HAVE ANY OPEN WOUNDS OR CUTS

FOOTBALL AND SOCCER PLAYERS

1. DO NOT LEAVE JERSEYS ON PADS OVERNIGHT
2. PADS NEED TO HANG IN LOCKERS OVERNIGHT TO DRY OUT
3. ALL DIRTY CLOTHES NEED TO GO HOME DAILY
4. DO NOT WEAR CLOTHES FOR MORE THAN ONE WORKOUT
5. PUT PADS OUT IN HOT SUN. BACTERIA HATES THE SUN
6. DO NOT SHARE CLOTHING OR UNIFORMS WITH OTHER TEAM MEMBERS

Howard High School Heat Policy

- 1. Prevention of Heat Illness:** The ability to recognize and assess the signs of heat illness is the key to preventing heat related injuries. All coaches, athletic trainers, and staff working with student athletes need to be knowledgeable in recognizing the signs and symptoms.
- 2. Humidity Issues:** Coaches, athletic trainers, and student athletes should be aware that most adverse heat reactions occur in the first few days of practice and when the heat index is the highest which is usually between 1:00-7:00 p.m. Due to the region in which we live, our relative humidity to temperature ratio will and can cause the heat index to be high to very high category. We in turn must adjust and accommodate changes to conditioning programs.
- 3. Gradual Acclimatization:** This simply means to build up the amount of time spent outside. Acclimatization should occur well before the start of the competitive season and should gradually increase over the first two weeks. For football, workouts should begin in shorts and t-shirts, followed by the addition of helmets, proceeding to shoulder pads, and finally to full equipment. Documentation of attended practices and preseason workouts for each athlete should be maintained. This will allow coaches to accurately keep track of athletes that may be more at risk because of missing workouts.
- 4. Wear lightweight clothing:** This will allow the skin to breathe. The body will be able to easily eliminate heat with lightweight clothing. The clothing also needs to be light in color so as not to attract and absorb excess amounts of heat.
- 5. Hydration:** Hydration is the greatest prevention to heat illness. Hydration and fluid replacement is a daily process. Athletes should hydrate themselves before, during, and after practice. Meals should include an appropriate amount of fluid intake in addition to a healthy diet. It is very important to remember that any athlete who is going to be outside for any length of time will need access to water or other appropriate fluids. The easiest way for an athlete to check his\her level of hydration is by urine color. Urine that is darker in color indicates that an athlete may be dehydrated, and they need to consume more of the proper fluids, Clear, light colored urine means that the athlete is well hydrated, and they should maintain their current habit of replenishing lost fluids.
- 6. Monitor Weight Loss:** Athletic participation should weigh in before and after practice to help determine if they are becoming enough from activity. For every pound of weight lost during practice, the athlete should consume 16 fluid ounces of water or sports drink to replenish the fluid lost.
- 7. Give adequate rest periods:** Coaches will follow the recommendations in the Bibb County School System Heat Policy as to frequency of water breaks based upon the GHSA heat index requirements while at practices. Because exposed skin cools more efficiently, equipment and appropriate clothing should be removed when needed. Adjustments, such as, lengthening the duration of breaks, increasing the number of breaks, and monitoring the intensity of practice should be made by the athletic trainer and coach.
- 8. Monitor environmental factors:** The air temperature and humidity are very important factors in determining when heat related illnesses are more likely to occur. A sling psychomotor shall be used by the athletic trainer\coach to measure the environmental factors and to compute an accurate heat index or Wet Bulb Temperature (WBT) reading. These measurements will be taken at the practice or activity site.
- 9. Educate the athlete:** Athletes will be instructed to let the athletic trainer or coach know if they feel overheated. If an athlete has symptoms of any heat illnesses, he\she will be removed from the activity and given reasonable and prudent immediate care by the athletic trainer or coaching staff. In cases of heat exhaustion, the athlete's parent\guardian will be contacted and advised that if conditions amplify, seek medical attention immediately.

GHSA BY-LAW 2.67 – “Practice Policy for Heat and Humidity

Schools must follow the statewide policy for conducting practices and voluntary conditioning workouts in all sports during times of extremely high heat and/or humidity that will be signed by each head coach at the beginning of each season and distributed to all players and their parents or guardians. The policy shall follow modified guidelines of the American College of Sports Medicine in regard to:

1. The scheduling of practices at various heat/humidity levels
2. The ratio of workout time to time allotted for rest and hydration at various heat/humidity levels
3. The heat/humidity level that will result in practice being terminated

A scientifically approved instrument that measures Wet Bulb Globe Temperature (WBGT) reading must be utilized at each practice to ensure that the written policy is being followed properly.

WBGT READING ACTIVITY GUIDELINES & REST BREAK GUIDELINES

UNDER 82.0 Normal activities --Provide at least three separate rest breaks each hour of minimum duration of 3 minutes each during workout

82.0 -86.9 Use discretion for intense or prolonged exercise; watch at-risk players carefully; Provide at least three separate rests breaks each hour of a minimum of four minutes in duration each.

87.0 – 89.9 Maximum practice time is two hours. For Football: players restricted to helmet, shoulder pads, and shorts during practice. All protective equipment must be removed for conditioning activities. For all sports: Provide at least four separate rest breaks each hour of a minimum of four minutes each

90.0--92.0 Maximum length of practice is one hour, no protective equipment may be worn during practices and there may be no conditioning activities. There must be 20 minutes of rest breaks provided during the hour of practice.

OVER 92 No outdoor workouts; Cancel exercise; delay practices until a cooler WBGT reading occurs

GUIDELINES FOR HYDRATION AND REST BREAKS

1. Rest time should involve both unlimited hydration intake (water or electrolyte drinks) and rest without any activity involved
2. For football, helmets should be removed during rest time
3. The site of the rest time should be a “cooling zone” and not in direct sunlight.
4. When the WBGT reading is over 86:
 - a. ice towels and spray bottles filled with ice water should be available at the “cooling zone” to aid the cooling process.
 - b. Cold immersion tubs must be available for practices for the benefit of any player showing early signs of heat illness.

DEFINITIONS

1. PRACTICE: the period of time that a participant engages in a coach-supervised, school-approved sport or conditioning-related activity. Practices are timed from the time the players report to the field until they leave.
2. WALK THROUGH: this period of time shall last no more than one hour, is not considered to be a part of the practice time regulation, and may not involve conditioning or weight-room activities.

Players may not wear protective equipment.

PENALTIES: Schools violating the heat policy shall be fined a minimum of \$500.00 and a maximum of \$1,000.00.

WHEN DOES THE HEAT POLICY STOP?

Some aspects of the heat policy are always in effect regardless of the sport. The limitations in By-law 2.67 (Institutional Heat Policy) are in effect anytime the Wet Bulb Globe Temperature (WBGT) reading registers in an elevated level. The limitation on activities that are on the published chart must be followed.

WHAT IS THE WBGT?

The Wet Bulb Globe Temperature reading is a composite temperature used to estimate the effect of air temperature, humidity, and solar radiation on the human body. The reading is expressed in degrees, but should not be equated with degrees of air temperature. For example: A WBGT reading of 92 is somewhat comparable to a Heat Index reading of 104-105 degrees. A Heat index reading merely reflects the combination of heat and humidity as “how hot it feels” on a person who is normally dressed and not involved in strenuous activity. Therefore, the Heat Index has little relevance to a football practice setting.

HOW FREQUENTLY SHOULD WBGT READINGS BE TAKEN IN PRACTICE?

Obviously, the reading should be taken just before the scheduled starting time for the practice to determine what levels of activity are permissible – or if the practice will need to be postponed until the WBGT reading gets to an acceptable level. The frequency of readings during the practice will likely depend on when the practice is scheduled. An early practice with temperatures increasing during the practice time may require several readings being taken. A late afternoon or evening practice with temperatures decreasing during the practice time should not require as many readings. The important thing is that the risks to the players are being monitored appropriately.

WHY DOES THE HEAT POLICY APPLY TO PRACTICES AND NOT TO GAMES?

The researchers who conducted the 3-year study on heat illness agreed with the GHSA administrators that there are enough built-in opportunities for players to get rest and hydration breaks during the course of a game. Everyone on the team is not participating intensely at one time. Officials and coaches are available to monitor 22 players in a game setting, while coaches may have 100 or more players to monitor during a practice setting. It is important to remember that scrimmages are practices and they do fall under the heat policy guidelines. These interscholastic contests often occur early in the acclimatization process and extra attention needs to be given to player well-being.

WHAT CONSTITUTES A “CONDITIONING ACTIVITY”?

Conditioning activities involve weight-training, distance running, “gassers”, “running the stadium”, and other such things. Whether these activities are done before or after a practice, they are considered to be a part of the practice and must be figured into the time restrictions. The heat policy should be in effect for “voluntary conditioning” programs since statistics at both high school and collegiate levels indicate that a large percentage of serious heat illness episodes occur during these activities.

WHAT ARE “WALK-THROUGHS”, WHEN MAY THEY BE HELD?

Walk-throughs are not considered a part of a practice since they have so many limitations placed on them. A walk-through session may last no longer than one hour. During a walk-through period, players may not wear protective equipment so no contact drills may be held. No conditioning activities may be held during a walkthrough period. A walk-through may not be held on a day when there are two practices being held. These sessions are designed to work on offensive and defensive schemes and techniques without being involved in contact work.

Howard High School Athletics (COLD TEMPERATURES) Recommendations

1. The local school principal, or designee, will make the final decision as to whether outdoor practice will be allowed. The health, safety, and welfare of the students should be the determining factors.
2. The wind chill factor should be used to determine the severity of the cold temperature, not just the temperature alone.
3. Warm-up and stretch properly up until immediately before the competition or practice.
4. Clothing should be selected for comfort. Do not overdress. Multiple layers provide good insulation.
5. Properly cover the head, neck, legs, and hands. Much of your body heat is lost through these areas.
6. Extreme cold blocks some sensations of pain. Thus, frostbite can easily affect the fingers, toes, ears, and facial areas. Check these areas regularly.
7. Hypothermia is a dangerous and severe level that can occur in cold temperatures. Add extra clothing and move to a warm environment immediately after exercising or practice. Drink warm fluids if possible. Hypothermia has occurred in air temperatures of 50° - 65° F.
8. Early signs and symptoms of hypothermia include shivering, euphoria, confusion, and behavior similar to intoxication. Severe signs include lethargy, muscular weakness, disorientation, depression, hallucinations, and even combative behavior.

WIND CHILL CHART

Wind Speed in MPH 0 10 20 30

Temperature Reading 30° F 30 16 4 2

20° F 20 4 -10 -18

10° F 10 -9 -25 -33

0° F 0 -24 -39 -48

-10° F -10 -33 -53 -63

-20° F -20 -46 -67 -79

Preventing Cold Weather Related Athletic Injuries

Outdoor sports in cold weather, particularly those that are around snow, ice or water, place athletes at risk for both frostbite and hypothermia. Hypothermia is a condition in which the body's warming mechanisms cannot maintain normal body temperature and the body cools. Hypothermia is generally caused by prolonged exposure to wet, windy and cold environments. Contributing factors for body cooling include air temperature, humidity, wind and the condition of the skin (wet or dry).

Frostbite may occur as a result of being underdressed for the weather conditions, or by remaining too long in the cold without adequate protection. Frostbite is the freezing of local skin or body areas. Signs of frostbite are skin that is waxy, cold to the touch, or discolored (flushed, white, yellow or blue). Frostbite may result in disability or loss of body tissue. Hypothermia and frostbite may occur together or separately.

Guidelines to Prevent Hypothermia:

- *Be aware of the wind chill.
- *Dress appropriately and even then avoid staying in the cold too long
- *Drink plenty of warm fluids or water.
- *Avoid caffeine and alcohol.
- *Stay active to maintain body heat.
- *Take frequent breaks from the cold.
- *Wear rain gear or wool clothes if possible. Wool will insulate you even when it is wet. Wear layers of clothing and wear a hat. As much as 60% of body heat loss occurs through the head.
- *Have high-energy foods available, such as a chocolate bar. Sugar stimulates shivering which is the body's mechanism for re-warming itself.
- *Do not start an activity in an extremely wet and cold environment.

Inclement Weather \ Lightning Safety

RECOMMENDATION

(PA Announcement)

May I have your attention? We have been notified of approaching inclement weather that has lightning associated with it. All activity will cease until we have determined when it is safe and the risk of lightning has diminished.

We advise everyone to seek shelter underneath the home side stadium or your personal vehicle.

Everyone must exit the seating area.

Once again,

We have been notified of approaching inclement weather that has lightning associated with it. All activity will cease until we have determined when it is safe and the risk of lightning has diminished.

We advise everyone to seek shelter underneath the home side stadium or your personal vehicle.

Everyone must exit the seating area at this time.

Thank you for your cooperation.

****REPEAT several times until everyone has exited the stadium
GHSA REQUIRES A LIGHTNING DETECTOR BE PRESENT AND OPERATIONAL**

Howard High School Lightning Policy

Howard High School Athletics currently uses PerryWeather App for athletics. Athletic Trainer and all game administrators have access to this paid app.

All coaches and Howard High School Athletics will follow the National Federation of High Schools (NFHS) & National Athletic Trainers' Association (NATA) recommendations for lightning protocols.

It is stressed to all coaches, staff, and administrators that no machine can override common sense and knowledge of approaching bad weather and that caution should always be taken. **The 30/30 rule** of when you see lightning that is followed by thunder within 30 seconds, it's time to clear the practice or game facility until after the approaching storm has passed.

Howard High School Athletics will follow the 30/30 rule if for some reason the Sky Scan system isn't functional. No activity will resume until 30 minutes of the last lightning strike is observed or noted as ALL CLEAR by the PerryWeather App. All Howard coaches and staff members will all follow this protocol and is not optional under any circumstances.

Howard High School Athletic Policy (Severe Weather-Tornado)

Practice Football, Practice Soccer, Band,Track

All schools will have and maintain a weather radio or other means of communication to monitor weather bulletins.

Tornado Watch- means that weather conditions are such that a tornado may develop. Monitor conditions and stay in contact with local emergency management agency personnel.

Tornado Warning- means that a tornado has been sighted or detected by radar and protective measures should be taken. Implement severe weather evacuation plan as follows:

1. Announcements will be made by PerryWeather and the on site Athletic Trainer
2. Players, coaches, officials will exit the field to the field house.
3. Weather Status will continue to be monitored by the on site Athletic Trainer

Howard High School Athletic Policy (Severe Weather-Tornado)

Basketball, VolleyBall Practice Cheer, Wrestling

All schools will have and maintain a weather radio or other means of communication to monitor weather bulletins.

Tornado Watch- means that weather conditions are such that a tornado may develop. Monitor conditions and stay in contact with local emergency management agency personnel.

Tornado Warning- means that a tornado has been sighted or detected by radar and protective measures should be taken. Implement severe weather evacuation plan as follows:

1. Announcements will be made from the public address system and by the on site Athletic Trainer
2. Players, coaches, officials will exit the court to the team specific locker rooms
3. Spectators will be directed to the public restrooms or empty class rooms if necessary
4. Weather status will continue to be monitored by the on site Athletic Trainer

Howard High School Athletic Policy (Severe Weather-Tornado)

BaseBall, Softball, Practice Flag Football

All schools will have and maintain a weather radio or other means of communication to monitor weather bulletins.

Tornado Watch- means that weather conditions are such that a tornado may develop. Monitor conditions and stay in contact with local emergency management agency personnel.

Tornado Warning- means that a tornado has been sighted or detected by radar and protective measures should be taken. Implement severe weather evacuation plan as follows:

1. Announcements will be made from the public address system and by the on site Athletic Trainer
2. Players, coaches, officials will exit the field to the locker rooms located in the school just above the playing fields
3. Spectators will be directed to the public restrooms or empty class rooms if necessary
4. Weather status will continue to be monitored by the on site Athletic Trainer

Protocols

I. Heat Illness

Practice and/or competition in hot and/or humid environmental conditions possess special problems for student athletes. Heat stress which can result in heat illness is of primary concern under these environmental conditions. Student athletes practicing outdoors are directly affected, but those student athletes participating in indoor activities can also be affected when poor air circulation is present. Since it is impractical to suspend practice and/or competition when the temperature is above 90 degrees and humidity is greater than 70%, prevention becomes the primary objective.

Heat illness is experienced when the body is unable to efficiently reduce its core body temperature. Sweating is the body's most effective cooling process, but the moist air caused from high humidity levels inhibits the evaporation of sweat causing an elevated core body temperature.

Four Keys to Heat Illness Prevention

1. Education – It is vital to understand and remember that the body is less effective in cooling itself in hot and/or humid environmental conditions. Therefore, it is advised to keep duration and intensity of practice to a moderate level. It is also advised, when feasible, to change the time of practice to a time when temperature and/or humidity levels are lower. It is essential that all coaches and student athletes are aware of the risk factors, signs, and symptoms of heat stress syndromes.

2. Clothing – Clothing and equipment add insulation to the body and reduce the amount of skin surface area for sweat evaporation. When clothing becomes soaked with sweat the process of sweat evaporation is hindered causing an increase in body heat. Student athletes participating in outdoor sporting activities that require hats/helmets to be worn are at a greater risk for heat stress syndromes because the hat/helmet does not allow for the release of body heat. When possible, it is encouraged to change sweat soaked clothes often, and limit the amount of equipment worn (e.g. shirts, shorts, helmets, pads)

3. Hydration – Progressive dehydration reduces sweating leading to an increase in core body temperature therefore, it is essential to keep well hydrated before, during and after physical activity in hot and/or humid environmental conditions. It is advised that water be made readily accessible throughout the duration of practice and/or competition as well as water breaks be given at least every twenty minutes. Avoidance of beverages containing caffeine (e.g. soda, coffee, tea) should be encouraged since these fluids act as a diuretic increasing the chances of dehydration.

4. Fitness – Prior physical conditioning and heat acclimation increases the body's ability to maintain a normal body temperature. Student athletes who are in poor physical condition, have excess body fat, overexert themselves during practice, and/or have a history of heat illness, circulatory, and/or respiratory conditions are at a greater risk. It is advised that a period of acclimation be incorporated into a team's practice schedule.

Three Categories of Heat Stress Syndromes

1. Heat Cramps – These are the least severe, but considered the most painful. They are caused from dehydration and are mostly experienced in the stomach and/or calf muscles. If untreated the student athlete can progress into the next stages of either heat exhaustion or heat stroke.

2. Heat Exhaustion – A student athlete will exhibit signs and symptoms of fatigue, dizziness, profuse sweating, nausea, rapid respiration and pulse, and/or cool, clammy, and pale skin. If untreated the student athlete can progress into the next stages of heat stroke.

3. Heat Stroke – A student athlete will exhibit signs and symptoms of diminished and/or loss of consciousness, a core body temperature greater than 103 degrees, rapid pulse, vomiting, and/or red, dry skin. Heat stroke is considered to be a life threatening illness therefore deemed a medical emergency.

Treatment for early signs of Heat Stress Syndromes

1. Relocate the athlete to a cool place, preferably indoors
2. Loosen and/or remove as much clothing as possible
3. Apply cool, wet cloths to the skin
4. Fan the student athlete, or place them in front of fan
5. Provide cool water to be sipped (not chugged)

Treatment for progressive signs (vomiting, loss of consciousness) of Heat Stress Syndromes

1. Call EMS immediately
2. Place student athlete on his/her side
3. Continue to apply cool, wet cloths to skin
4. Immerse the student athlete in cool (not cold) water (e.g. whirlpool, tub, Cold shower, or water hose), when possible

II. Head Injury Protocol

Concussions and second-impact syndrome (rare but often fatal) are becoming increasingly common among all student athlete injuries.

Common Signs and Symptoms of a Concussion

Headache
 Confusion/Disorientation
 Tinnitus (ringing in the ears)
 Dizziness
 Nausea or Vomiting
 Amnesia

- o Post-Traumatic
- o Retrograde

 Irritability
 Hyper-excitability
 Loss of Consciousness
 Unsteadiness
 Visual Disturbance
 Concentration Difficulty

Concussion Grading Scale (as delineated by the American Academy of Neurology)

- Grade I – A student athlete experiences no loss of consciousness and has symptoms lasting less than fifteen minutes.
- Grade II – A student athlete experiences no loss of consciousness but symptoms last longer than fifteen minutes
- Grade III – A student athlete experiences loss of consciousness

Implemented Course of Action per Suspected Concussion Grade

- Grade I – A student athlete is immediately removed from activity and given a thorough concussion evaluation. Based upon findings, the student athlete may only return to play if he/she remains asymptomatic at rest and exertion.
- Grade II – A student athlete is immediately removed from activity and given a thorough concussion evaluation. Based upon findings, student athlete is disallowed to return to activity and must be re-examined the following day. A student athlete's clearance to resume activity is based upon the "guidelines for return to activity." If symptoms still persist, the student athlete is referred to either the emergency room or a licensed physician for further diagnostic testing.
- Grade III - EMS is immediately activated due to the student athlete experiencing a loss of consciousness. A student athlete's clearance to resume activity is based upon the "guidelines for return to activity" and/or the treating doctor's protocol.

Guidelines for Return to Activity

Grade I

- o First Occurrence – A student athlete may only resume activity if asymptomatic at rest and after exertion, following a fifteen-minute observation period.
- o Second Occurrence – A student athlete is allowed to resume activity when asymptomatic at rest and after exertion following a one-week rest period.
- o Third Occurrence – A student athlete should consider ceasing activity for the remainder of the sporting season.

Grade II

- o First Occurrence – A student athlete is allowed to resume activity when asymptomatic at rest and after exertion following a one-week rest period.
- o Second Occurrence – A student athlete is allowed resume activity when asymptomatic at rest and after exertion following a two-week rest period.
- o Third Occurrence – A student athlete is advised to terminate the remainder of the sporting season. The athlete may return to participation in sports the following season if asymptomatic.

Grade III

- o First Occurrence – A student athlete may resume activity when asymptomatic at rest and after exertion following a one-month rest period.
- o Second Occurrence – A student athlete is to terminate the remainder of the sporting season as well as consider life-long termination of impact activities.

All decisions regarding return to play from a concussion will be A team effort between the Athletic Trainer and Team Physicians

MISSION STATEMENT

The Bibb County School District Athletic Department provides student-athletes with a rich co-curricular program that encourages our students to grow as individuals and leaders by experiencing the importance of being part of a team. The Bibb County Athletic Department fosters commitment and loyalty to teamwork, pride, leadership, and fair play.

VISION STATEMENT

The Bibb County School District Athletic Department strives to be an all-inclusive program that provides access and opportunity for all students.