

EMERGENCY PROTOCOL

1

GO TO THE NEAREST EMERGENCY TELEPHONE

List locations of telephones nearest the playing facility

2

TELEPHONE THE AMBULANCE

List numbers of ambulance services or dial local 911

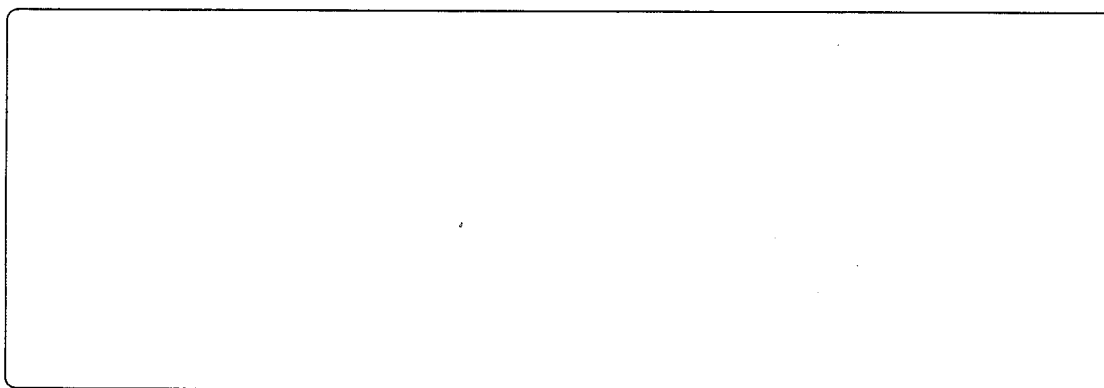
3

MEET THE AMBULANCE

Select a location as per designated emergency route

4

ESCORT AMBULANCE ATTENDANTS TO INJURED ATHLETE



Sketch map of venue and emergency access route

OTHER EMERGENCY TELEPHONE NUMBERS

FIRE/INHALATOR _____

HOSPITAL EMERGENCY DEPARTMENT _____

POISON CONTROL CENTRE _____

POLICE _____

WHEN YOU CALL THE AMBULANCE, STATE:

Your Name: _____

"There has been a suspected (*injury*) at (*location*).

Please send an ambulance to (*designated entrance*).

I will meet the ambulance there."

—Ask estimated time of arrival.

—Give them your telephone number.

TAPE
25 CENTS
HERE

TAPE
25 CENTS
HERE

THIS INFORMATION SHOULD BE POSTED BY ALL DESIGNATED EMERGENCY TELEPHONES AND KEPT WITH THE MEDICAL KIT

PHOTOCOPY FOR FUTURE USE

SPORT MEDICINE COUNCIL

INJURY REPORTING FORM

ATHLETE'S SURNAME _____ MALE AGE: _____
 ATHLETE'S GIVEN NAME _____ FEMALE
 SPORT/EVENT _____ DATE: _____ TIME: _____

HISTORY

ALLERGIES: _____

 MEDICATIONS: _____

 PAST MEDICAL ILLNESSES: _____

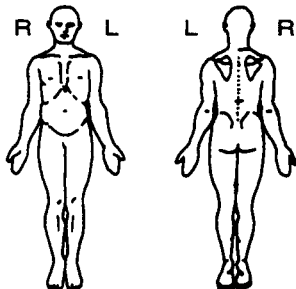
 PAST SURGERIES: _____

PHYSICAL EXAMINATION

INJURY

SPECIFIC BODY PART _____

PHYSICIAN'S DIAGNOSIS: N/A



MECHANISM OF INJURY

FIRST-AID TREATMENTS

- I.C.E.
- AIRWAY MANAGEMENT/AR/CPR
- IMMOBILIZATION
- WOUND MANAGEMENT
- SPLINTING/TAPING/TENSORING
- SLING
- CRUTCHES
- STRETCHING
- COUNSELLING
- OTHER

VITAL SIGNS		N/A <input type="checkbox"/>			
	TIME	PULSE	B.P.	RESP. RATE	TEMP.
1					
2					

TYPE OF INJURY

- | | |
|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> ABRASION | <input type="checkbox"/> LACERATION |
| <input type="checkbox"/> BLISTER | <input type="checkbox"/> SPRAIN |
| <input type="checkbox"/> CONCUSSION | <input type="checkbox"/> STRAIN |
| <input type="checkbox"/> CONTUSION | <input type="checkbox"/> HYPOTHERMIA |
| <input type="checkbox"/> DISLOCATION | <input type="checkbox"/> HYPERTHERMIA |
| <input type="checkbox"/> SUBLUXATION | <input type="checkbox"/> DENTAL |
| <input type="checkbox"/> FRACTURE | <input type="checkbox"/> OTHER _____ |

FOLLOW UP

- HOSPITAL
- FAMILY PHYSICIAN
- NONE
- OTHER _____

TRANSPORTED

- AMBULANCE
- TEAM TRANSPORT
- OTHER
- N/A

NATURE OF INJURY

- ACUTE
- CHRONIC < 6 WEEKS
- CHRONIC > 6 WEEKS
- RE-INJURY

HOME INSTRUCTIONS (IF APPLICABLE)

RELEASE OF HEALTH CARE PROVIDERS from legal action resulting from advice given to the athlete not to participate in an athletic event.

I HEREBY ACKNOWLEDGE that I have been advised not to participate in one or more athletic events and I hereby release _____ from all liability and agree not to institute legal action with regard to that advice.

SIGNATURE OF ATHLETE _____

SIGNATURE OF PARENT/GUARDIAN _____
 (IF ATHLETE IS UNDER 18 YEARS)

SIGNATURE OF ATTENDANT _____

NAME OF ATTENDANT _____ DATE _____

PHYSICIAN PHYSIOTHERAPIST ATHLETIC THERAPIST SPORTS AIDER

PHOTOCOPY FOR FUTURE USE

SPORT MEDICINE COUNCIL



Appendix 1 – First-aid Kit

A complete first-aid kit is essential. This kit must be carefully prepared in order to treat the most common injuries. Furthermore, it must be accessible to those responsible for the team. Here is a list of what a first-aid kit should contain.

Content	Use
Medical record	<ul style="list-style-type: none">◦ important information in case of an emergency
Disinfectants <ul style="list-style-type: none">• soft antiseptic soap• antiseptic cream• antiseptic solution• peroxide	<ul style="list-style-type: none">◦ all skin lesions◦ laceration requiring cleaning before a dressing can be applied
Dressings <ul style="list-style-type: none">• ocular• aseptic (sterile gauze, 50, 75, 100mm rolls)• adhesive bandages (“Band-Aid” type and butterfly closures)• elastic bandages (100 and 150mm)• triangular bandages and safety pins	<ul style="list-style-type: none">◦ cover and close the eye◦ dry compression◦ protection of minor lesions◦ compression◦ multiple uses but primarily to act as an arm support in case of a fracture
Drug products and ointments <ul style="list-style-type: none">• zinc ointment• xylocaine spray	<ul style="list-style-type: none">◦ scratches or blisters◦ sore burns
Other useful items <ul style="list-style-type: none">• cleaning solution for foreign bodies• scissors• tongue depressor• body temperature thermometer• chemical cold bags (if you don’t have access to real ice)• plastic bags• phone number list (cell phone, pen, quarters, paper, participants’ emergency records)• tools• adhesive tape (37.5mm)	<ul style="list-style-type: none">◦ dislodge foreign bodies◦ common use◦ multiple uses◦ check body temperature in case of trauma◦ for ice cubes◦ ensure quick response◦ minor repair of equipment◦ support wounded joints
