

**ATHLETIC TRAINING POLICIES AND PROCEDURES  
MAY 2015**

<b>Basic Athletic Training Rules and Regulations</b>	<b>2</b>
<b>Student Dress and Appearance Code</b>	<b>4</b>
<b>Travel Procedures</b>	<b>5</b>
<b>Use of Supplies</b>	<b>5</b>
<b>Visiting Teams</b>	<b>5</b>
<b>Game Conduct</b>	<b>5</b>
<b>Practice Coverage</b>	<b>6</b>
<b>General Public and Media</b>	<b>6</b>
<b>Athletic Training Communication: Chain of Command</b>	<b>6</b>
<b>Procedure for Record Keeping</b>	<b>9</b>
<b>Medication Use</b>	<b>12</b>
<b>Emergency Action Plans</b>	<b>14</b>
<b>Lightning Safety Policy</b>	<b>33</b>
<b>Lightning Safety Compliance Statement</b>	<b>39</b>
<b>Concussion Management Guidelines</b>	<b>40</b>
<b>Student Responsibility Statement</b>	<b>42</b>

## **BASIC ATHLETIC TRAINING STAFF RULES AND REGULATIONS**

The following rules and regulations are important for a properly functioning athletic training program. We are professionals working in an allied health facility, and these guidelines serve as a blueprint to ensure a professional atmosphere and medical facility.

### **ATHLETIC TRAINING ROOM RULES**

#### Athletic Training Staff

1. The athletic training room is a medical facility and should be treated as such.
2. The athletic training room must be kept spotless to maintain a clean, sanitary working environment. It is the responsibility of every athletic trainer and athletic training student to clean and maintain all equipment in the athletic training room.
  - a. Opening Procedures
    - i. Arrive prior to scheduled opening time
    - ii. Pull the files of the athletes that you know you will be treating
    - iii. Wipe down tables with commercial cleaner after each patient when possible
    - iv. Fold towels and put them away
    - v. Restock supplies as necessary
    - vi. Site specific treatment/practice preparations as necessary
  - b. Closing procedures
    - i. Wipe down table and counter tops with disinfectant following directions for length of time for surface contact. It is expected that you move items to clean and not clean around them.
    - ii. Clean coolers and place them in storage
    - iii. Bring kit in and restock
    - iv. Restock supplies as necessary
    - v. Take out trash
    - vi. Disinfect whirlpool and knee tank
    - vii. Complete any paperwork (SOAP, injury reports, treatment log)
    - viii. Vacuum, sweep, and mop the floor
    - ix. Regular communication with coaches and strength coaches.
    - x. Put towels in the wash.
    - xi. Check the water in the hydrocollator
    - xii. Make sure the athletic training room doors are locked.
  - c. Weekly duties
    - i. Clean the hydrocollator
    - ii. Clean rehab and exercise equipment; wipe down cuff weights, med balls, etc.
    - iii. Clean the exterior of the ice machine (wipe down the interior if you see any mildew)
    - iv. Restock supplies as necessary

- e. Semester duties
  - i. PE and FB athletic training rooms ask custodian to shampoo carpet. BSB/FB scrub the floor
  - ii. Scrub out all coolers, clean spouts
  - iii. drain and clean pool; change/clean filter
3. Allow no one to be in the athletic training room without personal supervision.
4. Nothing will be taken from the athletic training room by an ATS without permission from a staff member.
5. Do not allow any horseplay, visiting, loitering, swearing, or shouting. The athletic training room is not a lounge.
6. The athletic training room phone should be answered professionally in the following manner:
  - i. "Athletic Training Room, (your name) speaking."
  - ii. Phone messages should be taken accurately with your signature, date, and time of call.
9. Make sure athletes shower before receiving treatments after practice, if locker room is available.
10. The computers in the athletic training rooms are not for personal use (ie. checking email, surfing the net, downloading, etc.). The computer is for staff use, record keeping, and internet logging for educational hours. It should be re-started on Mondays to update the anti-virus software.
11. Cell phones must be in the non-ring mode. Non-emergent calls are not permitted. Athletic Training Students are not permitted to be using or checking their cell phones/texting during their clinical rotations.
12. No hats are permitted in the athletic training facility.
13. No food or drink is permitted in the athletic training facility.

#### Student Athlete

1. The athletic training room is a medical facility and should be treated as such.
2. Nothing will be taken from the athletic training room by a student athlete without permission from a staff member.
3. Horseplay, visiting, loitering, swearing, or shouting, etc. is prohibited. The athletic training room is not a lounge.
4. You must shower before receiving treatment following practice and/or games, if locker room is available.
5. Cell phones are not allowed in the athletic training facility, per federal HIPPA regulations. If necessary, it can be left in the assigned location for cell phones.
6. No hats are permitted in the athletic training facility.
7. No food or drink is permitted in the athletic training facility.
8. Report injuries as soon as they occur.
9. The policy for personal items left in an athletic training facility is, "If you leave it we will freeze it."

## STUDENT DRESS AND APPEARANCE CODE

An athletic training student shall act and dress like an allied health professional in the athletic training room, at practice, at games, and while traveling. It is the responsibility of each student to keep his/her uniform neat and clean. A professional, neat, and clean personal appearance while on duty is an important factor in gaining respect of athletes, coaches, faculty, and the general public.

## DRESS AND APPEARANCE CODE

### Daily Operations

1. Students are expected to present a professional appearance and attitude at all times.
2. You must wear issued VSU Athletic Training clothing.
3. Shirts must be tucked into the waistline of the shorts or pants at all times. (No exceptions)
4. Inclement weather: check with supervising ATC
5. NO jeans, sweat pants, yoga pants. Wind suit pants or khaki pants are acceptable during cooler weather.
6. Maintain appropriate hair length and professional looking hairstyle that is well groomed and a natural hair color. Males: side burns above the middle of the ear, and you must be clean shaven daily. Females with shoulder length hair must have hair pulled back, and hair beyond shoulder length must be in a ponytail. Pre wrap is not an appropriate headband.
7. NO facial piercings. Female piercing is limited to ears that look professional. Female earrings must be modest for safety purposes (no large hoops or dangling earrings). No visible body piercing is permitted.
8. It is not permissible to wear program clothing outside of your clinical experience.
9. Fingers must be properly manicured per OSHA regulations. No nail polish or fake nails are permitted. Nails must be trimmed so they do not protrude beyond finger.
10. No visible tattoos. Tattoos must be covered before arriving in the ATR with student's personal supplies, not supplies from the ATR. AT may require long pants or long sleeves be worn if they cannot be covered appropriately otherwise.
11. Athletic shoes must be worn at all times within the athletic training setting. **Shoes must be black, white, red, or gray with black or white socks.** No sandals, flip-flops, open heel, or high heel shoes will be allowed.
12. If you wear any unacceptable clothing, you will be sent home for the day including:
  - a. Hats with non-VSU logo
  - b. Pants worn too low (left to discretion of supervising ATC)
  - c. Shorts too short or tight
  - d. Cargo pants/shorts
  - e. Skinny pants
13. Athletic Training Students must wear a watch with seconds reading.

### Game Operations

1. Khaki shorts or pants. The length of shorts will be considered appropriate when the shorts extend beyond the fingers with your arms resting at your side, and not going

below the knee. **Cargo shorts and skinny pants are unacceptable.** A belt must be worn and no underwear may be showing.

2. Dress appropriately according to sport (i.e. basketball, volleyball). Check with your supervising ATC regarding appropriate dress.
3. Inclement weather: check with supervising ATC
4. Clothing must be modest. All clothing must cover the belly and buttocks. Shorts must be of at least mid-thigh length, adhering to the length requirements stated above. Shorts must have a hem (no cutoff jeans or slacks). Clothing with holes in revealing areas and tank tops will not be allowed. Clothes must not be too tight. "Tightness" will be determined by supervising ATC

## TRAVEL PROCEDURES

An athletic training student can travel only if invited by the supervising ATC. You may refer to the travel policy in the clinical portion of the manual. Each clinical supervisor may establish specific travel procedures for their site.

While traveling you are on the same schedule as the athletes, thus you are expected to follow the schedule and be on time and ready to go. Each athletic training student is responsible for packing the necessary equipment and supplies for away contests. **Make sure you have everything (going and coming) and be on time!!!**

## USE OF SUPPLIES

The supplies in the athletic training room are for the athletes of Valdosta State University. It is the responsibility of the entire athletic training room staff to make sure supplies are not taken from the athletic training room without permission. If supply of a particular item is low notify a staff athletic trainer. If you take something out of storage, make sure you record it on the inventory sheet. **Keep storage rooms neat and replenish kits from athletic training room supplies (not from supplies in the storage closet).**

## VISITING TEAMS

Athletic training students will introduce themselves to visiting athletic trainers, and find out the name of the ATC covering the event and where they will be during competition. You should offer your assistance and explain what services will be provided. Be sure to explain the emergency plan, location of nearest athletic training room for ice, water, and modalities to visiting athletic trainers. This is very important and is a positive reflection on our program. Be professional and show good sportsmanship. Be sure to follow the conference guidelines as a host team.

## GAME CONDUCT

Be on time and in uniform. Arrive early enough to prepare necessary equipment (kit, water, ice, emergency equipment, etc.). Introduce yourself to the visiting coach and/or athletic trainer and offer available services. Do not make critical comments in regard to an athlete's performance or an official's call. **Keep your eyes on the action to witness mechanism of injury and to protect yourself.** Athletic Training Students are not permitted to be using or checking their cell phones/texting during their clinical rotations.

## PRACTICE COVERAGE

Practice coverage is an integral part of the athletic trainer's function. It may seem that you are performing some mindless or unimportant task like providing water, but no task is meaningless. View each job as a learning experience. Choose an advantageous position on the field (close to the action but not in the way). Always keep your eyes on the action to witness mechanisms of injuries. You are looking for mechanisms of injury. Be alert and attentive. Do not stand in a group. The proper equipment (kit, ice, water, emergency equipment, etc.) should be in the proper location and in good working order. Carry necessary supplies (scissors, tape, gauze pads, etc.) with you during practice. Injuries can occur during the first and/or final minute of practice, so always be prepared. Athletic Training Students are not permitted to be using or checking their cell phones/texting during their clinical rotations. Some discussion among athletic training students is permissible as long as it is not interfering with practice or your clinical experience. If these discussions become a problem, you will be asked to leave practice and your clinical coordinators will be notified.

## GENERAL PUBLIC/MEDIA

On occasion you will be confronted with questions about the health of an athlete. This information is confidential, protected by federal law (HIPAA) and is not to be discussed outside of the athletic training room. All questions pertaining to athletes should be referred to a staff certified athletic trainer.

## **ATHLETIC TRAINING COMMUNICATION**

### CHAIN OF COMMAND

In order to establish effective communication, a chain of command must be established. It is important that all members of the program follow this process. It is as follows:

1. Medical Director and/or Team Physician
2. Staff Certified Athletic Trainer
3. Graduate Assistant Athletic Trainers
4. Coaches
5. Athletic training students with the most experience

Failure to follow this chain of command can result in a breakdown of the total program.

## COMMUNICATION WITH OTHER STAFF AND PERSONNEL

### Team Physician

Athletic training students will have the opportunity to observe, listen, and work with either the team physician, medical director, or other medical specialists associated with the program. Watching and listening is a great way to learn. Be tactful with physicians and office staff, look and act professional, and be assertive in observing.

Athletic training students are **not** in a position to refer athletes to the team physician, unless it is an emergency. Consult with a full time staff member concerning whether an athlete should be seen by a physician. If you are called upon to report with an athlete to the doctor, be sure you give detailed information and follow their orders immediately and efficiently.

The team physician will make the final decision concerning the participation or non-participation of an injured athlete. This does not mean he will make all decisions. In the absence of the team physician the designated certified athletic trainer will make the final decision.

### Staff Athletic Trainers

The staff certified athletic trainers are your supervisors and have full responsibility for the athletic training program. They are directly responsible for you and your actions, thus you should follow their directions at all times. Feel free to discuss anything with them at any time.

### Graduate Assistant Athletic Trainers

Graduate Assistant Athletic Trainers are certified and licensed and staff by university definition. As a student it is your responsibility to interact and communicate with the graduate assistants in a professional manner. The graduate assistants are working under the guidance of the staff athletic trainers. You are accountable for following their directions.

Graduate Assistant Athletic Trainers are required to adhere to the policies and procedures for the university, athletic department, and athletic training program. Graduate students are not permitted to date, fraternize, etc. with student athletes. Failure to adhere to these policies and procedures will result in dismissal.

### Coaches

An athletic trainer must make decisions that many times a coach does not like. Therefore, respect and trust may well be two intangible assets in developing a relationship with a coach. While you are primarily working under the direct supervision of certified athletic trainers, you are also working with coaches and athletic department administrators. Respect, courtesy, and cooperation should characterize your relationship with all department personnel. You are not responsible for "coaching", "second guessing", or "cheerleading". This type of attitude will quickly lose the respect of coaches and athletes alike. Direct medical responsibility for athletes comes under the team physicians and certified athletic trainers while athletes are primarily responsible to their coaches. It is imperative that a good athletic trainer-coach relationship is established on the team for which you are responsible. This involves a consistent communication process, both written and verbal on the daily health status of the athletes. Remember, discuss but never argue with a coach. If you have a conflict with a coach it should be reported to a staff athletic trainer. The staff athletic trainer will assist you in effectively communicating with the coaching staff.

Many coaches rely on athletic trainers in relaying their perception of team moral and attitude. A good rule of thumb is the discussion of non-medical issues be done only when asked by a coach. Observing your supervising certified athletic trainer in his/her interaction with a

coach is an excellent learning opportunity. You may also have the opportunity in interacting daily with coaches, take advantage and refine this skill. It is an essential tool for athletic trainers.

Coaches, because they are university employees, are above athletic training students in the chain of command. If teams are traveling without a VSU certified athletic trainer, coaches will consult with the host certified athletic trainer on decisions of return to play for injured athletes.

### Athletic Training Student

Servicing and caring for a large number of athletes takes a well-coordinated and efficient effort on everyone's part. All members of the athletic training staff are dependent upon each other. It is expected there will be nothing less than excellent rapport among the athletic training students. Petty arguments, misuse of authority, or any negative attitudes not conducive to learning and productivity will not be tolerated. Upperclassmen should take it upon themselves to instruct younger students on a daily basis. Inexperienced students should seek advice from experienced students and freely accept constructive criticism. Remember, the greatest tool for learning is experience, so share it.

### Student Athlete

Earning the respect of the athlete is an important goal to reach and is in turn very gratifying. Treat all athletes with integrity, respect, and courtesy. Combine friendliness with professionalism. Respect can be gained most readily by exhibiting competence. Never guess or pretend to know something that you do not. Show concern, but do not overprotect the athlete. You must draw a line between providing competent and friendly care, and fraternization. In time you will gradually learn the attitudes, temperaments, and peculiarities of individual athletes; use this insight to foster your professional relationship with them. We want to help the athlete pursue an injury-free career. For this to happen all athletes are to adhere to the rules and regulations pertaining to them in the athletic training room. Violations of these rules are to be handled by the individual staff certified athletic trainer in a sensible and courteous but firm manner. Guidelines for dealing with athletes:

1. Gain respect through competence.
2. Do not let the athletes dictate to you what is to be done. Base your clinical decisions on what you have learned in class or from the ACI, not what the athlete asks. Do not discuss an athlete's injury with anyone who is not a member of the athletic training or coaching staff. This pertains especially to other athletes.
4. Don't become an athlete's "buddy" and bend rules for him/her or provide special privileges.
5. Do not cover up for an athlete.
6. Be careful when talking about an injury. In some cases the more an athlete knows the more he /she worries. Let the team physician or certified athletic trainers estimate how long an athlete will be out due to injury or illness.
7. Treat all athletes without bias and free from discrimination.
8. Hold athletes accountable to athletic training rules and team rules.
9. Relationship guidelines with student-athletes is addressed in the clinical section of the manual.

## EQUIPMENT PERSONNEL

The relationship with equipment personnel should be a close working nature. We will help them during travel, practice, and game set up when necessary. It is vitally important to establish a good working relationship with the equipment personnel and managers. Make sure to properly check out equipment or other materials with the appropriate person.

## PROCEDURE FOR FILING AND RECORD KEEPING

Record keeping is one of the most important duties of an athletic trainer. Record keeping serves three purposes: 1) accountability, 2) providing data for research, and 3) providing us with medical histories of our athletes. To achieve these three purposes an athletic trainer must always record:

- A. Injuries (time loss or restricted activity)
- B. Treatment of injuries
- C. Medication that is administered
- D. Rehabilitation of injuries
- E. Special reports (i.e. x-ray, lab work)
- F. Coaches reports

These records as well as a medical history and physical examination are always kept in an athlete's personal file. It is the responsibility of the certified athletic trainers that these records are neat, accurate, and updated. The filing system in each athletic training room is to be uniform and organized according to the sample file. The following are guidelines for each area of record keeping.

## PHYSICAL EXAMINATION AND MEDICAL HISTORY

Physicals will be given prior to the beginning of the season for each sport. New athletes at VSU will go through a comprehensive medical history and physical examination. Returning athletes go through a follow up medical history and physical examination. These are to be separated by year and organized neatly in the folder for easy access.

## TREATMENT LOG - SPORTSWARE

Every treatment received by an athlete must be entered into the Sportsware treatment database. This can prove to be difficult during peak training room hours, but everyone must be sure to record all treatments. By the end of each day all treatments must be recorded

## INDIVIDUAL INJURY REPORTS- SPORTSWARE

1. Enter injury into the individual injury report database. Make sure to completely fill out the injury report including: background information and narrative evaluation notes/SOAP notes (initial assessment, progress note, and discharge) in the notes section).

2. Complete individual injury report. Be sure to include signature (or initials) and title (ATS or ATC). If you need help filling out a report be sure to ask a certified staff member. Do not leave records incomplete.
3. Update athlete's progress with soap notes in Sportsware.
4. Always record date when athlete returns to practice and place in personal file documenting evaluation findings upon return to play.
5. Close the injury out on the database by clicking the "closed" box.

#### SPORTSWARE

All personal, insurance, and medical alerts must be entered into SportsWare.

MEDICATION – Enter into Sportsware

Refer to the Drug Administering policy.

#### REHABILITATION REPORTS

All rehabilitation received by an athlete must be documented on the progress/soap note (or individualized rehab progression) and placed in their respective file.

#### SPECIAL REPORTS

Occasionally an athlete will require special testing such as an x-ray or lab work. These orders and reports are to be placed in the athlete's medical file.

#### STUDENT HEALTH REFERRALS

1. Call and make an appointment for the student athlete and student must take VSU ID.
2. Send white and yellow copy of referral with the student athletic, and keep the pink copy as a reminder of the referral.
3. Discard the pink copy once the student athlete returns the white copy, and file the white copy in the student athlete's medical file. Remind the athlete that the white copy is to be returned the day of the appointment.
4. Do not make an appointment during practice time without consulting the coaches.
5. Student Health Center policy: if student misses an appointment once they will be warned. Following that, they will be charged \$15 for any subsequent missed appointments. If they are going to miss their appointment they need to call ASAP and preferable >5 hours before scheduled appointment

#### APPOINTMENTS AT THE HUGHSTON CLINIC

1. ATC will make appointment with GA for Dr. Jacobson or Kathy Gordon for any other Hughston physician and check if preauthorization is needed.
2. The GA will make sure their insurance has been sent to the Hughston Clinic
3. The GA will remind the staff of re-checks a week ahead of time, and give them a Hughston appointment reminder to give to the athlete
4. Give athlete directions and stress importance of being on time.

5. GA/ATS should obtain the following information during appointment: diagnosis, prognosis, treatment plan, status, any other tests required, set up return appointment with GA if necessary, answer any questions of the athlete, then record notes from visit into athlete's SOAP note.
6. Dictation report must be communicated to respective ATC the day of the appointment. Hard copy must be delivered (fax) to respective ATC that day as well.



**Valdosta State University  
Athletic Training Program  
Policy and Procedure of Medication Use**

Purpose: To be consistent with the NCAA policy on the administering of prescription medication and over-the-counter (OTC) medication.

**General Guidelines**

1. OTC medications are to be stored in a locked cabinet in the athletic training rooms with only certified athletic training staff access to the keys. For OTC's, one box or container of the OTC will be available at a time, the rest of the inventory shall be locked in the storage room.
2. OTC's will be maintained in single-dose packets, complete with information required by the FDA's 7-point label guideline.
3. Administration of OTC's, iontophoresis, and phonophoresis will follow established protocols approved by team physicians and/or the Student Health Center. Documentation should take place in the student-athlete's medical file.
4. Distribution of OTC's is to be recorded in the student-athlete's medical chart and/or injury reporting software. Injections administered by physicians are reported in software.
5. Inventory of OTC's will take place along with the regular inventory paying particular attention to expiration dates, and reconciliation with ordered, distributed, and available.
6. Emergency medications should be prescribed to specific patients based on their particular condition. One emergency epiPen will be kept in each location for a one time emergency use.
7. Expired medications will be delivered to the Student Health Center for disposal.
8. A drug dispensing log may be used in each facility then entered into the student-athlete's medical record.

9. OTC's will be given out as a dosage package when requested by the athlete or prescribed as a form of treatment by the team physician. Unit doses may be administered for a 24 hour period if requested by the student athlete, or 48 hours if over a weekend.

#### **Kits/Travel**

1. All emergency and travel kits containing prescription and OTC drugs should be routinely inspected for drug quality, security and expiration dates; all medication should be removed from kit when not in use.
2. The amount of medication to be taken when traveling will be determined by the amount of days of the trip; usually for weekend trips, practices, or games 12 dosage packets should be enough. Keeping a minimum amount of OTC's will help to prevent the breakdown of the medication due to exposure to excessive temperature.
3. All OTC's and prescription medication should be within the possession of the athletic trainer when traveling or athletic training kits.
4. Teams traveling without an ATC will not have OTC's in the medical kits.
5. International travel will take special consideration.

#### **Minors**

1. OTC's cannot be administered to minors without the parents signed consent.

## **VSU EMERGENCY PLAN**

Revised May 2015

Emergency situations and/or life threatening conditions may arise at any time during athletic events and quick action must be taken in order to provide the athlete with the best possible care. Developing and implementing an emergency plan will assure that these situations are handled appropriately.

Valdosta State University has a duty to develop an emergency plan that can be implemented immediately and provide adequate health care for all sports participants. The ONLY way to effectively respond to an emergency is to be PREPARED. To be adequately prepared requires: an emergency plan, proper event coverage, proper training of personnel, maintenance of appropriate medical equipment, utilization of appropriate medical personnel, adequate means of communication, and continuing education in emergency medicine for all personnel. Despite pre-participation physical exams, adequate medical coverage, safe practice and training techniques, and preparation of the sports medicine team injuries and accidents are an inherent part of sports.

What conditions are considered to be emergencies?

- Unconscious athlete
- Suspected C-spine injury
- Hemorrhage
- Heat Stroke
- Shock
- Absence of pulse
- Absence of breathing
- Diabetic shock or coma
- Exercise Induced Bronchospasm and/or Asthma
- Sickling Event

What conditions require immediate medical attention?

- Fractures
- Dislocations
- Severe sprains
- Dental injuries
- Eye injuries

What is the VSU chain of command?

- Team physician/Medical Director
- Staff AT
- Graduate Assistant AT
- Coach
- Athletic Training Student

## Components of an Emergency Plan

- A. emergency personnel
- B. emergency communication
- C. emergency equipment
- D. emergency transportation

## VSU EMERGENCY POLICIES AND PROCEDURES

### EMERGENCY PERSONNEL:

The first responder to a VSU athletic emergency situation is usually either an athletic training student or a certified athletic trainer but could be a coach or team member. The team physicians are not present at practices or games. Certification in CPR, first aid, prevention of disease transmission, Oxygen administration and review of the emergency plan are required for all athletics personnel associated with practices, competitions, skills instruction, and strength and conditioning.

1. Form an emergency team (ET): physicians, certified athletic trainers, athletic training students, coaches, EMTs, managers, and ER staff
  - a. the role of the ET members may depend upon the numbers of athletes on the team, the venue, the preference of the ATC
    - i. immediate care of the athlete: acute emergency care should be provided by the ET member on site with the most expertise
    - ii. equipment retrieval: may be performed by any ET member who is familiar with the location of the equipment and what will be needed
    - iii. EMS activation: this MUST be done as soon as it is determined that an emergency or life threatening situation has occurred. Any ET member can activate EMS; however, choose a person who stays calm under pressure and has good phone communication skills. SEE BOX FOR WHAT TO TELL EMS.
    - iv. Directing EMS to the scene: Can be performed by any ET member who has appropriate keys.

#### Activating EMS

1. call 911, if available. If on campus [using a VoIP phone dial 8-911](#), [if on campus using a landline phone dial 9-911](#); or use the emergency channel on the radio.

#### *What information to give?*

1. name of the caller, address and phone number calling from.
2. number of athletic participants involved.
3. condition of athletic participant(s)
4. first aid treatment initiated by first responder
5. specific directions as needed to locate the emergency scene
6. other information requested by EMS

Stay on the line until the dispatcher instructs you to hang up.

**Call Public Safety once EMS has been activated. (259-5555)**

- **If the Internet is down, landline phones are located in the Baseball, Softball, Football, and Athletic offices at fax machine locations. There is signage with directives at each phone location. Cell phone will be alternate if the VoIP is down due to internet outage, or landline not accessible.**

#### EMERGENCY COMMUNICATION:

In order to deliver emergency care a good communication system is a necessity. Communication between members of the ET is paramount both prior to the emergency and while providing care. Every ET member should know what his or her role is during an emergency (and you should have a designated backup for critical duties).

Securing a working telephone or other telecommunications device (radio) should be done prior to any athletic activity. A back up communication system should be in place in the event the primary communication system is not in proper working order. If using a cell phone especially in a rural area you should have the direct EMS number verses calling 911. After you have called EMS, contact campus police if you have another phone line available (259-5555).

##### Emergency Signals

1. *Physician or ATC: tap the top of your head*
2. *Spine board: arms crossed against your chest*
3. *Splint bag: grasp forearm*
4. *AED and Oxygen: hand on heart*
5. *Kit: arm out like carrying luggage*

#### EMERGENCY EQUIPMENT

All necessary emergency supplies and equipment must be on site and immediately accessible. All the personnel should be familiar with the equipment and it must be in proper working order. Rehearsal of the use of the emergency equipment should occur on a regular basis. The emergency equipment should be appropriate to the level of training of the personnel providing care.

It is important to know how to appropriately store and care for equipment. Equipment should be stored in a clean environmentally controlled environment.

#### TRANSPORTATION:

If possible, EMS should be on site especially at high risk sporting events (i.e. VSU football games). If there is a long EMS response time to the venue this is another reason to request an ambulance to be on site. When an ambulance is on site there should be a designated location for the ambulance and rapid access to the site should be available.

In the 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 appropriate care. Emergency providers should refrain from transporting unstable athletes in inappropriate vehicles.

**EMERGENCY INFORMATION TO PROVIDE TO VISITING TEAM:**

1. Introduction of self
2. Location of AT and location of physician if present at practice or game
3. Available Emergency equipment and where located
4. Location of phones
5. Emergency signals, if used
6. Lightning policy

**WHEN AWAY FROM VSU, INFO TO REQUEST:**

1. Introduce Self
2. Location of AT and location of physician if present at practice or game
3. Emergency Equipment on site and its location
4. Location of Phones
5. Signal for assistance from Home AT staff
6. Lightning Policy

**Instructions for VSU Coaches:**

First Aid and CPR certification and training in disease transmission prevention is required by the NCAA for all personnel associated with practices, competitions, skills instruction, and strength and conditioning (Sports Medicine Handbook 2014-15, 25<sup>th</sup> ed.).

## Emergency Guidelines for Valdosta State University

### Cardiac Episode

1. Activate EMS
2. Assess Airway, Breathing and Circulation, administer CPR if necessary. Attach AED if unconscious.

### Cervical Injury

1. Immediate immobilization of C-spine. If you are unsure of what happened, or  
at all suspect C-spine/head injury, immobilize.
2. Activate EMS
3. Assess Airway, Breathing and Circulation, administer CPR and attach AED if necessary. Continual monitoring of vitals- every 5 minutes if unstable, every 15 minutes if stable
4. Do appropriate secondary evaluation
5. Apply cervical collar as soon as possible
6. Spine board athlete if appropriate number of trained individuals are available. If prone, logroll and then z-slide to get patient centered on board. If supine, do a 6+ person lift or a modified 5 person lift (1 at head, 3 along body, 1 to slide board under patient)

### Significant Orthopedic Injury

1. Call team physician on call for further directions on transport
2. Stabilize limb and continue stabilizing until secure for transportation. Consider OSHA concerns. For open fractures, cover with sterile gauze or a clean/dry towel- be cautious of direct pressure over an obvious fracture
3. Continual monitoring of vitals. Be sure to include distal pulse
4. Splint as appropriate for the specific site. Try to splint in the position you found it if possible. Spine board as necessary.
5. If you transport the athlete with a vacuum splint, send the air pump and  
make  
sure EMS knows not to cut the splint off

### Heat Stroke

1. Continual Monitor vitals including *rectal* temperature if suspected. If you do not have a rectal thermometer and heat stroke is suspected, do not use an alternate method as they are not accurate- just assume heat stroke
2. Activate EMS. Administer CPR if necessary and have AED available.
3. Begin aggressive cooling. COOL 1st- TRANSPORT 2nd!! Remove pads and excess clothing. Full body emersion in ice water is method of choice, but if not available other methods may include: rotation of wet towels and ice, and/or removal to an air conditioned facility, and/or partial body submersion in ice water. It may take 10-15 minutes to get a significant decrease in temperature
4. Remove from ice submersion when athlete starts shivering and/or temperature has decreased below 102 degrees with rectal monitoring.

### Respiratory Distress

1. Activate EMS and communicate the athlete's medical history upon their arrival
2. Assess Airway, Breathing and Circulation, administer CPR and attach AED if necessary.
  - If an asthmatic episode, have conscious athlete administer rescue inhaler as prescribed
  - If anaphylactic episode, have conscious athlete administer epipen. If semi-conscious to unconscious, athletic trainers will have an emergency two dose epipen
3. Assess and regular monitoring of vital signs
4. Give oxygen via face mask at 12-15 L/min. If using a non-rebreather mask, be sure to let the air bag fill up before placing it on the patient.
5. Remove athlete to a cooler climate or shade if possible

### **EMERGENCY ACTIVATION PLAN: PE COMPLEX (basketball, volleyball, etc.)**

**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** landline telephone in PE Athletic Training room (333-5477) and VoIP telephones in athletics office. Call EMS or 911

**Emergency Equipment:** spine board, vacuum splints, oxygen accessible in PE Athletic training room. AED is located in the Athletics Office in the fax/copy room on the top shelf.

### **Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- PE COMPLEX at 401 Baytree Rd; Valdosta, GA 31602
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **From BAYTREE RD, turn onto SUSTELLA AVE., take 1<sup>st</sup> LEFT into COMPLEX Parking lot. Nearest crossroad Baytree and Sustella**
  - c. Stay on the line with EMS. If another line is available, contact VSU police at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to stand at SW CORNER OF PE COMPLEX (corner closet to parking lot entrance) to lead EMS to SW GYM DOORS (NOT the LOADING DOCK)**

- b. If patient is injured in the Athletic Training Room or you need access to the elevator to access the patient, you may direct them to the NW CORNER of the PE COMPLEX**
- 5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, COACH
  - a. Take insurance/medical information
  - b. ATC will notify team physician
- 6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified

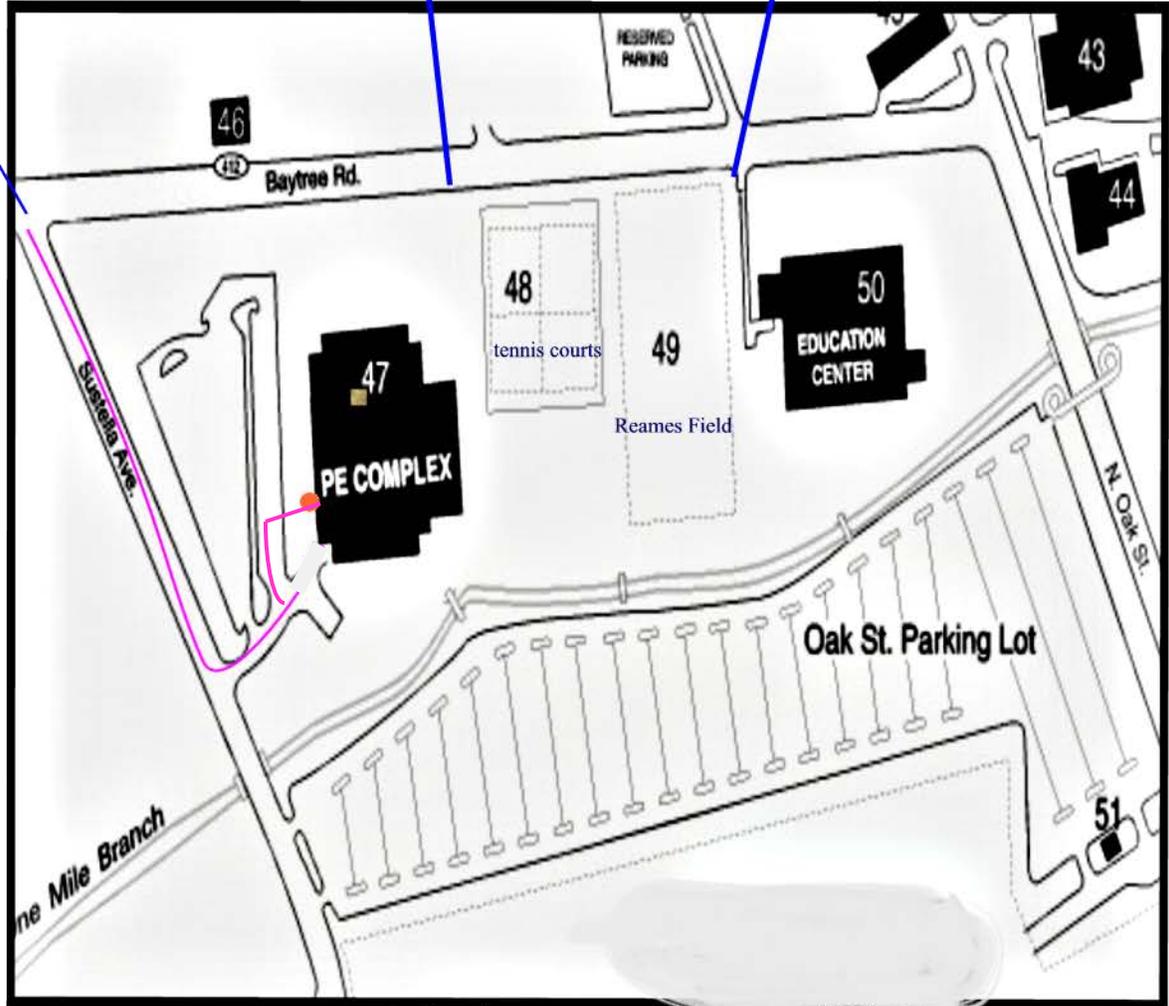
Entrance to Tennis Courts

Entrance to Reames Field

Entrance to Gym

■ Represents PE Training Room

● Represents SW gym doors



### **EMERGENCY ACTIVATION PLAN: TENNIS COURTS**

**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** landline telephone in PE Athletic Training room (333-5477) and VoIP telephones in athletics office. Call EMS or 911

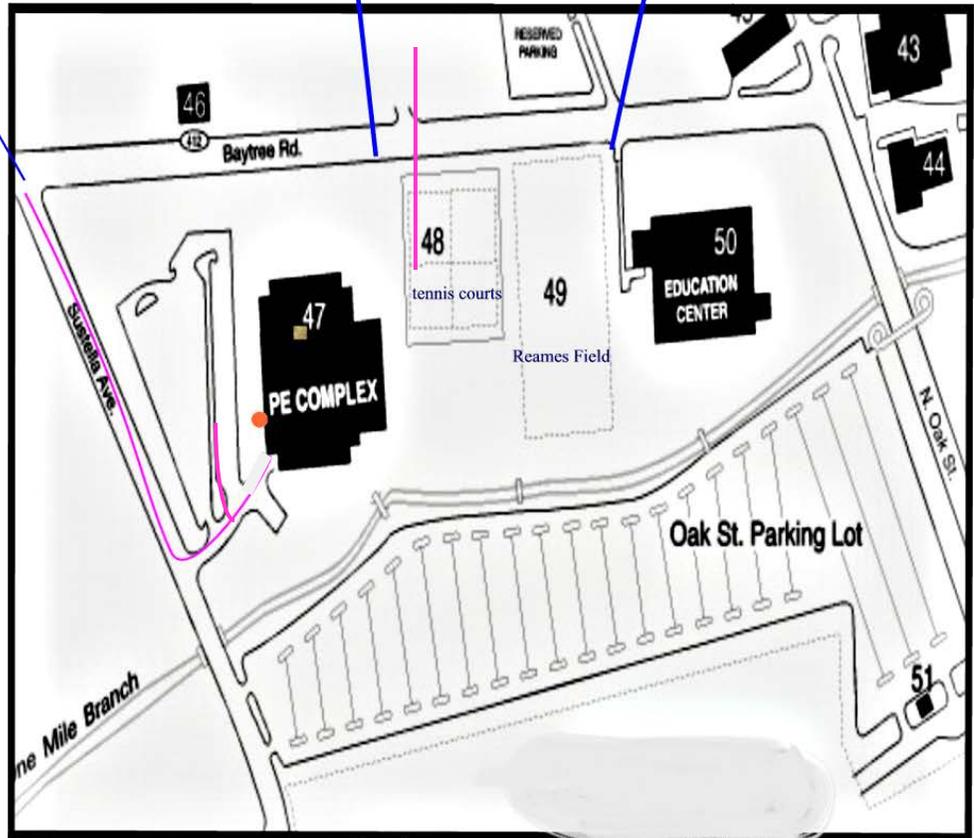
**Emergency Equipment:** spine board, vacuum splints, crutches, oxygen accessible in PE Athletic training room. AED is located in the Athletics Office in the fax/copy room on the top shelf.

#### **Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- TENNIS COURTS on AZALEA/BAYTREE
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **From AZALEA RD, Go STRAIGHT, up over the curb towards the PE COMPLEX. Nearest crossroad Baytree and Azelea**
  - c. Stay on the line with EMS. If another line is available, contact VSU police at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to stand on the sidewalk at the intersection of AZALEA/BAYTREE to lead EMS to the tennis court entrance**
  - b. **If patient is injured in the Athletic Training Room or you need access to the elevator to access the patient, you may direct them to the NW CORNER of the PE COMPLEX**
5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, and COACH. If someone is not permitted to travel with the athlete, the ATC will designate someone to meet them at the hospital
  - a. Take insurance/medical information
  - b. ATC will notify team physician
6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified

Entrance to Gym  
Entrance to Tennis Courts  
Entrance to Reames Field

- Represents PE Training Room
- Represents SW gym doors



### **EMERGENCY ACTIVATION PLAN: BASEBALL**

**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** landline telephone in Baseball office (333-5477) and VoIP telephones in Baseball office. Call EMS or 911

**Emergency Equipment:** spine board, vacuum splints, crutches, oxygen, AED

#### **Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- **VSU BASEBALL: 2601 N. PATTERSON ST. Valdosta, GA 31602. Nearest crossroad N. Patterson and Northside Dr.**
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **GOING NORTH on PATTERSON ST. ACROSS FROM THE VALDOSTA MIDDLE SCHOOL**
  - c. Stay on the line with EMS. If another line is available, contact VSU police at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to stand on the sidewalk at PATTERSON ST to lead EMS to the field**
    - i. **Baseball: Unlock the double gate behind concession stand; direct ambulance onto field @ 1<sup>st</sup> base**
5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, COACH
  - a. Take insurance/medical information
  - b. ATC will notify team physician
6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified

### **EMERGENCY ACTIVATION PLAN: SOFTBALL**

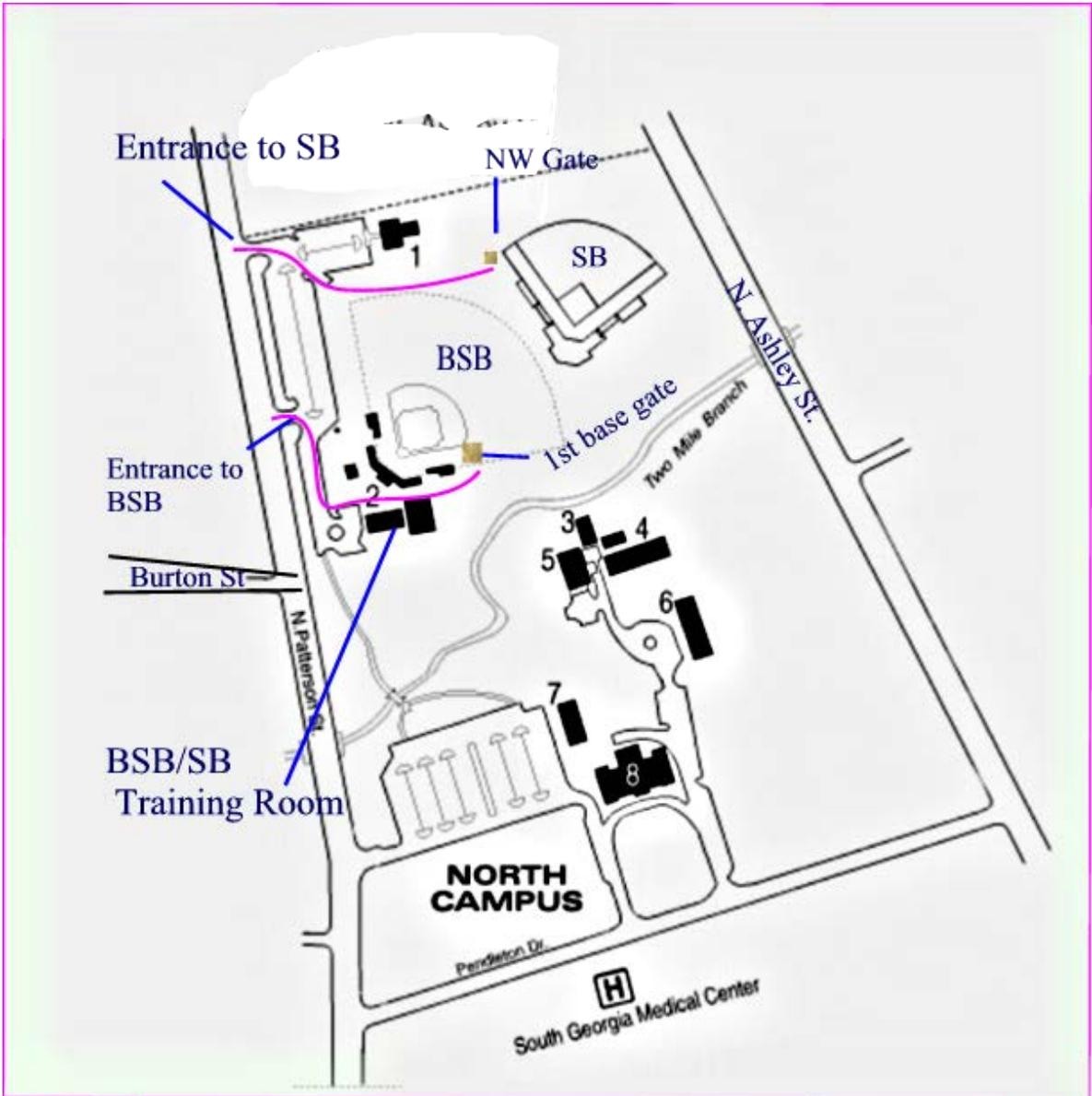
**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** landline telephone in Softball computer lab (333-5477) and VoIP telephones in softball offices office. Call EMS or 911

**Emergency Equipment:** spine board, vacuum splints, crutches, oxygen, AED

#### **Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- **VSU SOFTBALL: 2609 N. PATTERSON ST. Valdosta, GA 31602. Nearest crossroad: N. Patterson and Northside Drive**
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **GOING NORTH on PATTERSON ST. ACROSS FROM THE VALDOSTA MIDDLE SCHOOL**
  - c. Stay on the line with EMS. If another line is available, contact VSU police at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to stand on the sidewalk at PATTERSON ST to lead EMS to the field**
    - i. **Softball: Unlock gate on left field line**
5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, COACH
  - a. Take insurance/medical information
  - b. ATC will notify team physician
6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified



**EMERGENCY ACTIVATION PLAN: CLEVELAND FIELD (FB Stadium)**

**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** hand signal communication to on-site ambulance, the certified athletic trainer carries a cell phone, fixed telephone line in Lower Level press box (245-3779 or 245-3780). Call EMS or 911. *If you are using a campus telephone line, you must dial ~~89~~-911*

**Emergency Equipment:** spine board, vacuum splints, crutches, oxygen, AED

**Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- CLEVELAND FIELD, address WILLIAMS & BROOKWOOD ST.
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **TURN INTO DRIVEWAY OFF WILLIAMS ST. BEHIND ENDZONE STANDS AND ENTER STADIUM TO THE RIGHT OF THE STANDS**
  - c. Stay on the line with EMS. Use Emergency channel on radio to contact VSU police or use another available line at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to stand on the sidewalk at WILLIAMS and direct ambulance onto field**
5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, and COACH. If someone is not permitted to travel with the athlete, the ATC will designate someone to meet them at the hospital
  - a. Take insurance/medical information
  - b. ATC will notify team physician
6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified

**EMERGENCY ACTIVATION PLAN: NORTH CAMPUS FIELD (FB CAMP)**

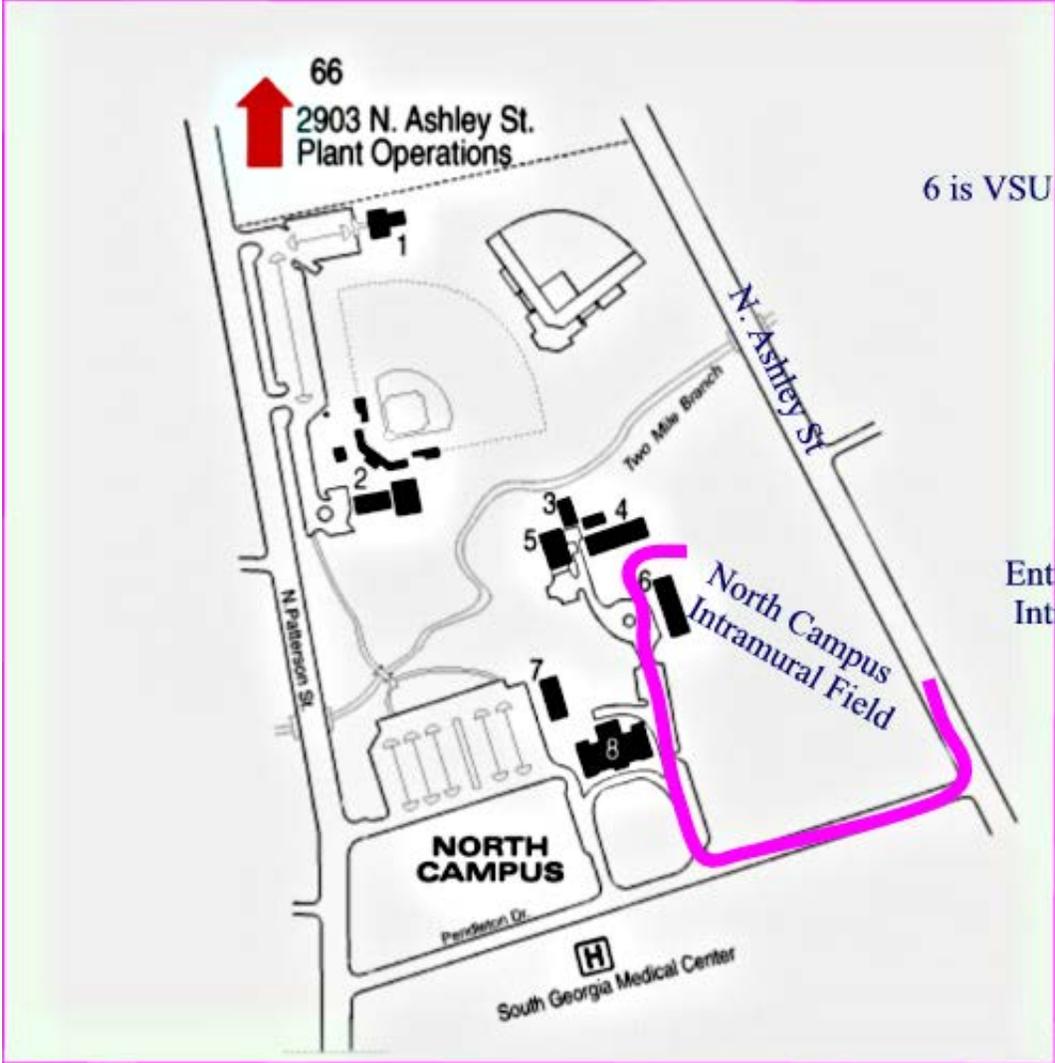
**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** the certified athletic trainer carries a cell phone, fixed telephone line in ROTC Building (Pound Hall as a backup). Call EMS or 911. *If you are using a campus telephone line, you must dial 89-911*

**Emergency Equipment:** spine board, vacuum splints, oxygen & AED

**Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- NORTH CAMPUS INTRAMURAL FIELD- N. ASHLEY and PENDLETON
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **TURN INTO ONE WAY ENTRANCE OFF PENDLETON DRIVE THEN DRIVE TO NORTH END OF ROTC BUILDING AND ENTER FIELD THERE**
  - c. Stay on the line with EMS. If another line is available, contact VSU police at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to stand at PENDLETON DR. to lead EMS to field**
5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, and COACH. If someone is not permitted to travel with the athlete, the ATC will designate someone to meet them at the hospital
  - a. Take insurance/medical information
  - b. ATC will notify team physician
6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified



6 is VSU ROTC building

Entrance to N. Campus  
Intramural Field

### **EMERGENCY ACTIVATION PLAN: ATHLETICS FIELDHOUSE**

**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** the certified athletic trainer carries a cell phone, fixed telephone line in ATR or front desk (333-5970) Call EMS or 911. *If you are using a campus telephone line, you must dial 89-911*

**Emergency Equipment:** spine board, vacuum splints, crutches, oxygen, AED's at front desk, weight room, and ATR

#### **Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- **VSU ATHLETICS FIELDHOUSE: 605 W. MARY ST. Valdosta, GA 31601; crossroad= Mary and West**
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **GOING SOUTH on PATTERSON, right onto MARY, cross OAK, building is on the left across from the cemetery**
  - c. Stay on the line with EMS. If another line is available, contact VSU police at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to stand on the sidewalk on Mary St. to lead EMS to the field/ATR**
    - i. **Access to the ATR is through the ATR double doors. They must be opened from the inside**
5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, COACH
  - a. Take insurance/medical information
  - b. ATC will notify team physician
6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified

### **EMERGENCY ACTIVATION PLAN: SOCCER & FIELDHOUSE PRACTICE FIELDS**

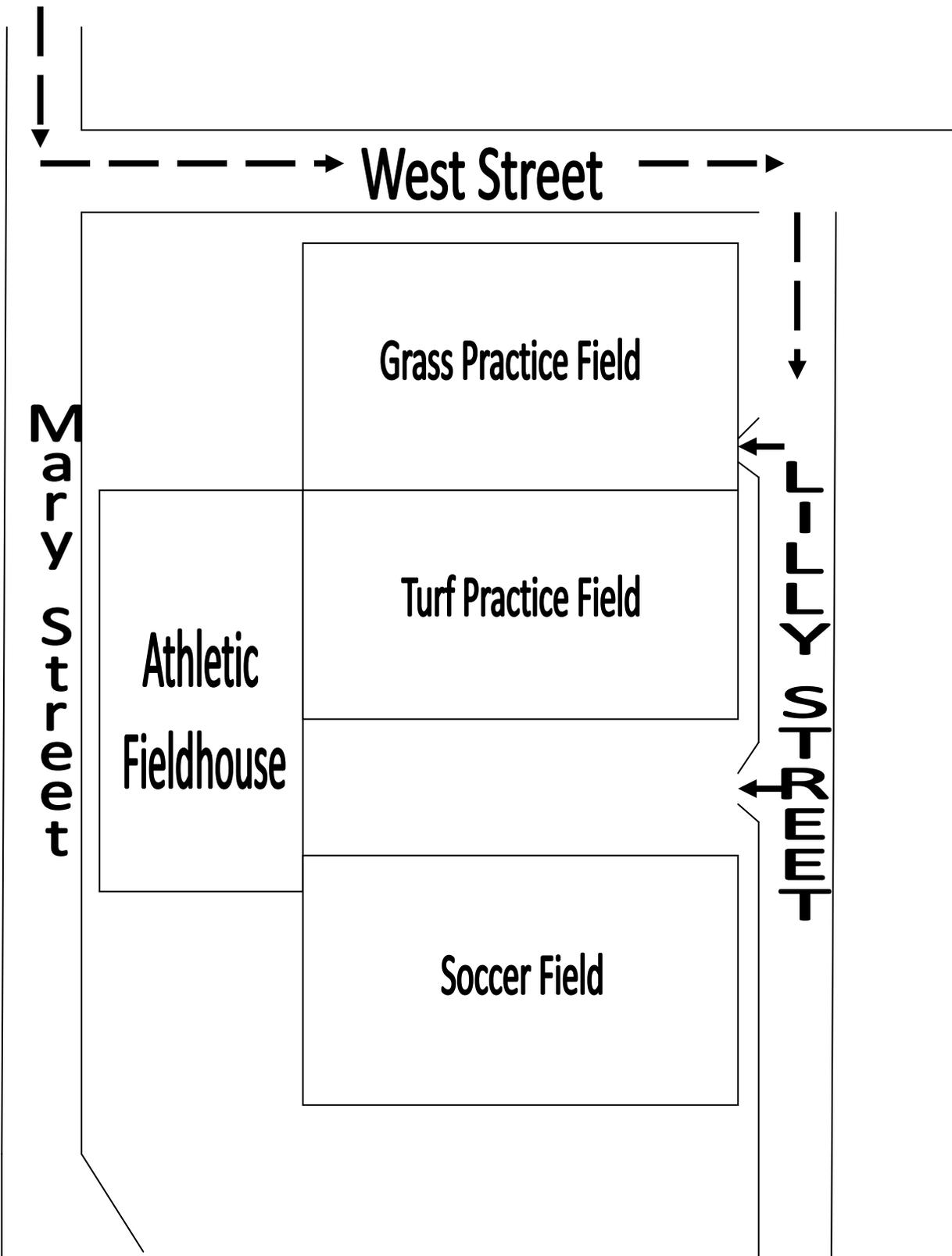
**Emergency Personnel:** certified athletic trainer, athletic training students, and coaches on site for practices and competitions. All coaches and athletics staff should be CPR/first aid certified

**Emergency Communication:** the certified athletic trainer carries a cell phone, fixed telephone line in ATR or front desk (333-5970) Call EMS or 911. *If you are using a campus telephone line, you must dial 89-911*

**Emergency Equipment:** spine board, vacuum splints, crutches, oxygen, AED. There is also an AED in the weight room

#### **Roles of First Responders:**

1. Primary assessment/care of injured athlete
2. Activation of EMS
  - a. Call 911 (or 245-5270)
  - b. Give the following information
    - i. Location & Address- **SOCCER FIELD/PRACTICE FIELDS at VSU ATHLETICS FIELDHOUSE: 605 W. MARY ST. Valdosta, GA 31601**
    - ii. Telephone # you are calling from
    - iii. # of individuals injured
    - iv. First aid treatment that has been rendered
    - v. Specific directions: **GOING SOUTH on PATTERSON, right onto MARY, cross OAK, turn LEFT before the FIELDHOUSE onto WEST STREET, turn RIGHT onto LILLY STREET, entrance to fields will be on the RIGHT (soccer entrance is the 2<sup>nd</sup> gate)**
  - c. Stay on the line with EMS. If another line is available, contact VSU police at 259-5555.
3. Emergency Equipment Retrieval- bystanders may be retrieving these items concurrently with activation of EMS
4. Direct EMS to the scene
  - a. **Designate an individual to make sure the gate is unlocked and stand at the appropriate entrance on LILLY St. to direct the ambulance in.**
5. Who will travel to hospital with athlete: AT STAFF (only if there is still one to stay & cover the practice/game), AT STUDENT, COACH
  - a. Take insurance/medical information
  - b. ATC will notify team physician
6. Once a DX has been made the AT staff/attending physician/coaches will decide whom and when the parents will be notified.



**Emergency Action Plan Map for Soccer  
and  
Athletic Fieldhouse Practice Fields**

## **Valdosta State University Athletic Department Lightning Safety Policy**

Lightning is a dangerous phenomenon. Athletic teams that practice and compete outdoors are at risk when the weather is inclement. The Athletic Training staff has developed a lightning safety policy to minimize the risk of injury from a lightning strike to Valdosta State University athletes, coaches, support staff and the fans. To monitor lightning the Athletic Training staff will utilize both the Flash-Bang method AND a Lightning Detection system. Our policy is in accordance to the NCAA recommendations regarding lightning safety.

GENERAL POLICY: A member of the Athletic Training Staff (certified or GA) will monitor the weather and make the decision to suspend activity in the event of imminent lightning. In the absence of the Athletic Training Staff, the monitoring of weather conditions is the responsibility of the coaching staff.

### THE DECISION TO SUSPEND ATHLETIC ACTIVITY IS BASED UPON:

For baseball and softball a strike within at the 12 mile mark allows time to tarp the fields and seek shelter safely. Any strike within a 8 mile radius will suspend activity and result in seeking safe shelter for all sports. For Golf, seek shelter when lightning occurs within the 12 mile mark allowing for evacuation to shelter by the 8 mile mark. For football games, evacuation of the stands will begin at the 8 mile mark to allow for fan to seek safe shelter.

and/or

Utilization of the Flash-Bang method revealing lightning within 6 miles (a 30 second or less count between the flash of lightning and the bang of thunder).

PRIOR TO COMPETITION: A member of the Athletic Training staff will greet the officials, explain that we have a means to monitor the lightning, and offer to notify the officials during the game if there is imminent danger from the lightning.

TARPING THE FIELDS: If a storm is approaching, the ATC will notify the coaches/umpire when lightning is within the 20 mile mark warning range. If it is decided to tarp the field, it needs to be started no later than when lightning is detected at the 12 mile mark. Tarping must be completed prior to lightning reaching the 8 mile mark.

ANNOUNCEMENT OF SUSPENSION OF ACTIVITY: Once it is determined that there is danger of a lightning strike, the Athletic Training staff member will notify the head coach and or official and subsequently (via horn/whistle, or verbally) summon athletes from the playing field or court.

EVACUATION OF THE PLAYING FIELD: Immediately following the announcement of suspension of activity all, athletes, coaches, officials and support personnel are to evacuate to an enclosed grounded structure.

If you are unable to reach shelter immediately, seek a flat area (do not choose an open area where you will be the highest object) or a ditch without water, crouch down wrapping your arms around your knees, lower your head and wait for the storm to pass.

REMEMBER: an automobile, golf cart, or open shelter may not protect you from a lightning strike so these are not adequate shelters.

At VSU

Complex Practice Fields: Evacuate to the PE Complex

Football Practice (North Campus): Evacuate to the ROTC building

Tennis Game or Practice: Evacuate to PE Complex

Softball Game or Practice: Evacuate to Softball Field House

Baseball Game or Practice: Evacuate to Baseball Field House

Cross Country Race or Practice: Suitable Structure, ditch without water, group of trees\*

Golf Match or Practice: Clubhouse, restroom, ditch without water, group of trees\* Golfers:

Drop your golf clubs. Metal conducts electricity.

Soccer Game or Practice: Evacuate to Fieldhouse

Fieldhouse Practice Fields: Evacuate to Fieldhouse

\*Athletes should not stand in groups or near a single tree. There should be 15 ft. between athletes. (NLSI, 2000)

Away Events: A member of the Athletic Training Staff will discuss emergency procedures and emergency shelter with the home team athletic trainer and report this information to the coaches and team.

EVACUATION OF THE STANDS: During a competition once the official signals to suspend activity, a member of the Sports Information staff will announce via the PA system: 1) Fans are advised to immediately seek shelter in an enclosed grounded shelter, 2) REMEMBER: an automobile, golf cart, or open-sided shelter may not protect you from a lightning strike so these are not adequate shelters.

RESUMPTION OF ACTIVITY: Activity may resume once a member of the Athletic Training staff gives permission. This decision will be based on:

30 minutes has passed after the last lightning strike within the 8 mile suspension radius.

OTHER LIGHTNING SAFETY TIPS:

1. There should be no contact with metal objects (bleachers, fences, golf clubs, bats)
2. Standing under trees and standing in a group should be avoided.
3. If there is no other shelter you may seek refuge in a hardtop vehicle. It is not the rubber tires that protect from lightning; it is the hard top metal roof that dissipates the lightning around the vehicle. (NCAA, 1999)
4. The existence of blue skies and/or absence of rain are not protection from lightning. Lightning can strike 10 miles from the rain shaft. (NCAA, 1999)
5. DO NOT LIE FLAT ON THE GROUND
6. Avoid using a land line telephone.

7. Persons who have been struck by lightning do not carry an electrical charge. Therefore, you can provide care. CPR is what is most often required. Be sure to move the victim to a safe location.
8. If in a forest, seek shelter in a low area under a thick grove of small trees.
9. ⅓ rule: ⅓ of strikes occur before the storm, ⅓ during the storm, ⅓ after the storm.
10. 80% of lightning victims are male.
11. ⅔ of strikes occur between 12 noon and 6 p.m., and the months of June through August.
12. An inadequate shelter (not grounded) is worse than being out in the open.

#### SCRIPT FOR CONVERSATION WITH OFFICIAL

Hello, my name is \_\_\_\_\_. I am a member of the Valdosta State University Athletic Training Staff. I would like to speak with you regarding our lightning safety procedures. On site we have a lightning detection system. VSU's policy is to seek safe shelter by the time lightning reaches an 8 mile radius and/or 12 miles for baseball/softball in order to tarp fields. For golf evacuation will begin at 12 miles to allow time to seek safe shelter.

#### DIRECTIONS FOR LIGHTNING SAFETY

1. Prior to practice or competition, monitor weather forecast to include calling local agencies for up to date information.
2. Monitor the weather for the following: sudden decrease in temperature, increase in air movement, sudden increase in humidity, visible dark clouds (though these do not have to be present for a lightning strike to occur)
3. Communicate with officials and/or head coach prior to activity about potential for bad weather and our monitoring system.
4. Once you have determined that there is imminent danger of a lightning strike, communicate to the head coach and/or head official.
5. Evacuate the field and stands to an enclosed-grounded building. REMEMBER, a golf cart, automobile, or open shelter does not provide protection from a lightning strike.
6. If there is no available shelter IE, cross-country or golf, each individual should see an area that is flat and in the open. Crouch down wrapping your arms around your knees and remain in that position until the danger of lightning has passed.
7. Activity may be resumed only IF the danger of a lightning strike is no longer present. This decision to resume activity is to be made by a member of the Athletic Training Staff.

#### FLASH – BANG Lightning Detection Method

This method of lightning detection should be used in conjunction with the Lightning detector.

1. Prior to practice or competition, monitor weather forecast to include calling local agencies for up to date information.
2. Watch for the flash of lightning.
3. Begin to count (one, one thousand, two one thousand . . . )
4. Stop counting when you hear the bang of thunder.

5. Take this number and divide by 5. This will give you an approximation of how far away the lightning is (5 seconds = 1 mile). EXAMPLE: You see a flash of lightning and you begin to count. You reach 45 before you hear the bang of thunder.  $45 \div 5 = 9$ . The lightning would be approximately 9 miles away. Using this method you would suspend activity with lightning at or within 6 miles.
6. Activity is resumed with the permission of a member of the Athletic Training Staff 30 minutes after the last lightning detected at or within 6 miles.

A condensed version of this method should be located where athletes using the facility without supervision of a coach, athletic trainer, etc. can monitor the lightning for themselves and evacuate to shelter. See next page.

#### Lightning Detection Procedures for Athletes during Non-Supervised Activities

Examples: athletes using facilities in the off season, or outside of regular practice hours

Lightning is a dangerous phenomenon. Athletic teams that practice and compete outdoors are at risk when the weather is inclement. The safest measure to take is to proceed indoors whenever you see thunderclouds forming and remain until the storm passes. Just because you cannot see lightning does not mean you are not at risk if you are outdoors. Other warning signs of impending bad weather include: sudden decrease in temperature, sudden change in humidity, increase in air movement, and visible dark storm clouds (though these are not always present during a lightning strike). The Athletic Training staff has a lightning detection policy in place for practices and games; however, we are aware that athletes often use VSU's athletic facilities when there is no supervision by the coaches. In the event athletes are using the facilities without supervision, the Athletic Training staff would like to educate you and encourage you to use FLASH-BANG method to monitor the proximity of the lightning. THE FLASH-BANG Method is an approximation of the distance of the lightning NO METHOD OF LIGHTNING DETECTION CAN DETECT EVERY STRIKE.

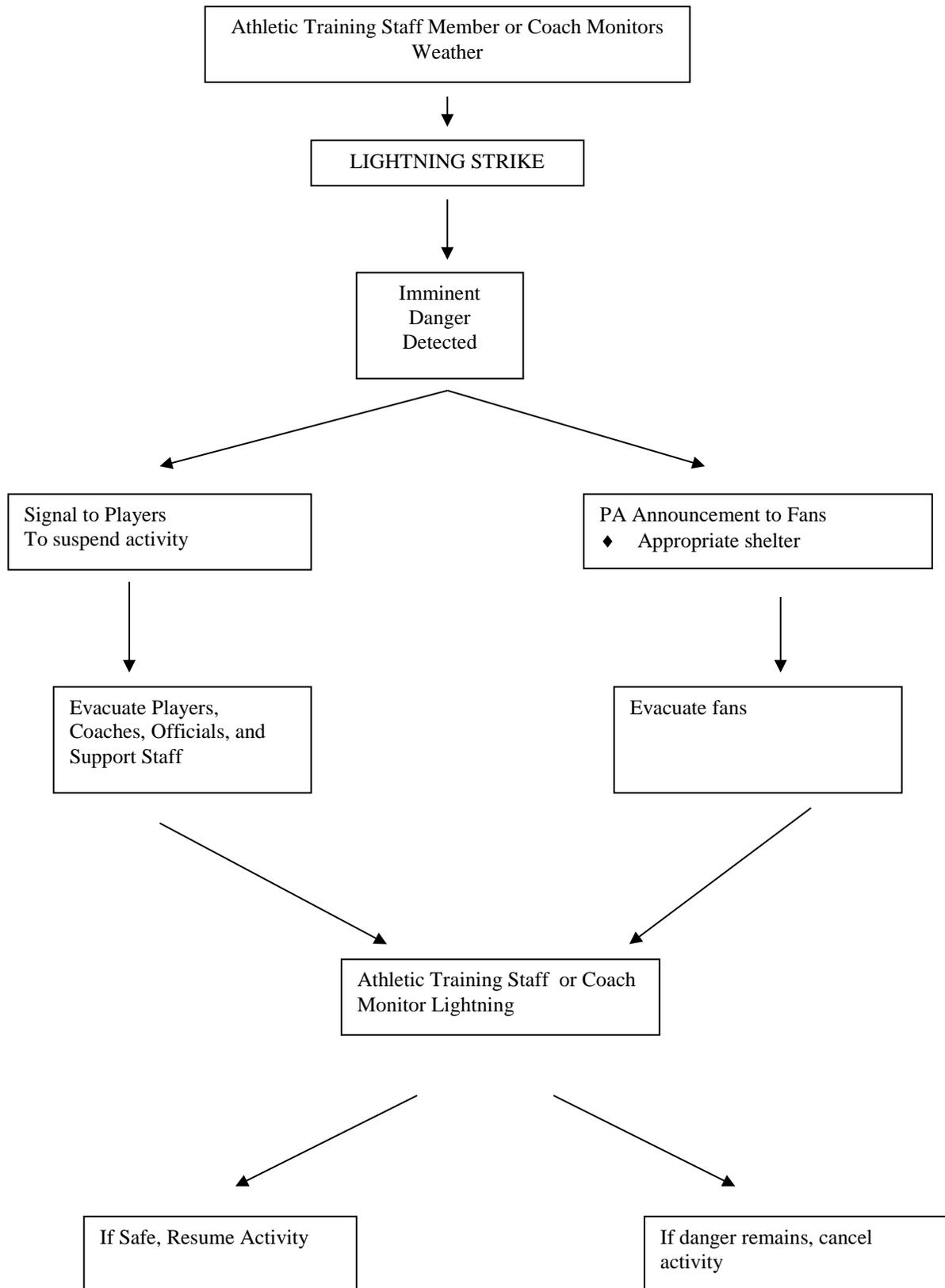
The Flash-bang method of lightning detection:

Auditory: Flash-to-Bang Theory

To use this method:

1. Count the seconds from the time the lightning "flash" is sighted to when the clap of thunder "bang" is heard.
2. Divide this number by five to obtain how far away (in miles) the lightning is occurring. For example, if fifteen seconds are counted between seeing the "flash" and hearing the "bang", fifteen divided by five equals three. Therefore, the lightning flash is approximately three miles away.
  - a. Each five seconds equal one mile
  - b. If the time between seeing the "flash" and hearing the "bang" is between 15-30 seconds (3-6 miles), teams should take precautions and seek shelter.

\*The National Severe Storms Laboratory recommends that by the time the spotter obtains a "flash-to-bang" count of fifteen seconds, all individuals should have left the athletic site and reached "safe shelter."



PA ANNOUNCEMENT DURING INCLEMENT WEATHER

May I have your attention! We have been notified of approaching inclement weather. Activity will cease until we have determined it is safe and the risk of lightning is diminished. We advise you to seek shelter in the following areas:

AT VSU:

Football Game: Evacuate to the University Center or your vehicle

Tennis Match : Evacuate to PE Complex

Softball Game: Evacuate to Softball Field House or to your vehicle

Baseball Game: Evacuate to Baseball Field House or to your vehicle

Cross Country Race: Suitable Structure, ditch without water, group of trees\*

Golf Match: Clubhouse, restroom, ditch without water, group of trees\*

Soccer Game: Evacuate to the Athletic Fieldhouse

Though protection from lightning is not guaranteed, you may seek shelter in an automobile.

Thank you for your cooperation.

COMPLIANCE STATEMENT

As a member of the Valdosta State University Athletic Department, I attest that I have read, understand, and will adhere to the aforementioned lightning safety policy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*To be placed in athletic training student's academic file once completed*

**VALDOSTA STATE UNIVERSITY**  
**CONCUSSION MANAGEMENT GUIDELINES**

1. The Valdosta State University Athletic Department will require student-athletes to sign a statement in which they accept responsibility for reporting injury/illnesses to the Athletic Training Staff/Team Physicians to include concussion injuries. During the review and signing process student-athletes will be provided education information on concussion and watch an NCAA video regarding concussion.
2. Valdosta State University will have an emergency action plan for each athletics venue to respond to emergency situations including: unconscious athlete, suspected C-spine injury, hemorrhage, heat stroke, shock, absence of pulse or breathing, diabetic shock or coma, exercise induced bronchospasm and/or Asthma, and sickle cell trait collapse. All athletic training staff will review and practice the plan annually. All coaches will be certified in FA/CPR and AED application annually. The Valdosta State University Athletic Department will maintain a list of completion of FA/CPR training of all coaches.
3. Valdosta State University Sports Medicine Staff (Athletic Trainers, Physicians, Physician Assistants, and Nurse Practitioners) will be empowered to determine management and return to play of any injured or ill student-athlete, as he or she deems appropriate.
4. Valdosta State University will have on file a physician directed concussion management plan that specifically outlines the role of the athletics healthcare staff (e.g., physician, athletic trainer, physician assistant, nurse practitioner). The following components have been identified for inclusion in the management plan:
  - a. Valdosta State University coaches will receive a copy of the concussion management plan, NCAA concussion fact sheet, and view the NCAA video on concussions annually.
  - b. Valdosta State University sports medicine staff members will practice within the standards as established by their professional practice (team physician, certified athletic trainers, nurse practitioner, physician assistant).
  - c. Valdosta State University will record a baseline assessment for student-athletes in the sports of baseball, basketball, soccer, football, softball, and volleyball at a minimum. In addition, student-athletes with a history of concussion will be baseline tested. The same baseline tests should be used post-injury at appropriate time intervals. The baseline assessment will consist of 1) a standard balance assessment using the Balance Error Scoring System (BESS) 2) neuropsychological baseline testing (computerized Impact Test), which also includes a symptom analysis. The management of concussion should include a multidimensional approach and individualized to the student-athlete.
  - d. Any student-athlete showing features of a concussion should be assessed on site making sure to evaluate for possible concussion, and rule out more serious brain injury which would activate the emergency action plan and/or referral to the hospital. Any positive findings from the assessment leading to a diagnosis of a concussion will not return to play the same day. If removed by a coach, the coach will refer the student-athlete to a member of the Athletic Training Staff. During competitions, on the field play injuries will be

under the purview of the official and playing rules of the sport. Valdosta State University staff will follow such rules and attend to medical situations as they arise. Visiting sport team members evaluated by Valdosta State University sports medicine staff will be managed in the same manner as Valdosta State University student-athletes. Students-athletes that sustain a concussion during non-athletic related activities will be managed in the same manner as those during sporting activities.

- e. The student-athlete will receive serial monitoring for deterioration. Athletes will be provided with home instructions upon discharge; preferably with a roommate, guardian, or someone that can follow the instructions.
- f. The student-athlete will be monitored for recurrence of symptoms from both physical and mental exertion. The Athletic Department will notify student affairs which will then notify the student-athletes professors once permission for release of information has been granted by the student-athlete.
- g. The student-athlete will be evaluated by a team physician as outlined in the concussion management plan. Once asymptomatic and post exertion assessments are within normal baseline limits, return to play shall follow medically supervised stepwise process. Each phase has a 24 hour wait period before progressing to the next step, and symptoms are monitored for recurrence. If symptoms return progressing will resume from the beginning once student athlete is asymptomatic. Specifically we will follow the SCAT3 for progressive return to play as a guideline.
  - Diagnosis day: OUT, rest 24 hours then: symptom checklist, BESS, Impact all okay within 1<sup>st</sup> 24 hours. The athlete will be held from practice, conditioning, and meetings while they are symptomatic. They are not to attend practice and stay at home and rest, no loud music, no video games, no excessive TV watching.
  - Day 1 (asymptomatic) light aerobic exercise (e.g. stationary cycle-walking-swimming for 10-15 minutes at <70% max predicted HR, increase heart rate)
  - Day 2 (asymptomatic) 15-20 minutes of elliptical, stairmaster, or running(no head impact activities)
  - Day 3 (asymptomatic) non-contact training drills (start light resistance training, push-ups, sit-ups, endurance weight training protocol, agility, sprinting)
  - Day 4 (asymptomatic) full contact practice after medical clearance
  - Day 5 (asymptomatic) return to competition (game play)
- h. Final determination for return to play shall rest with the team physician or the physician's designee.

- i. Valdosta State University Athletic Training will document the incident, evaluation, continued management, and clearance of a student-athlete with a concussion.
- j. Athletic staff will emphasize that purposeful and flagrant use of the head or neck in any sport should not be permitted.

Approved by: \_\_\_\_\_ Team Physician Date: \_\_\_\_\_  
Dr. Ben Hogan, M.D.

Approved by: \_\_\_\_\_ Team Physician Date: \_\_\_\_\_  
Dr. Kurt Jacobson, M.D.

Approved by: \_\_\_\_\_ Team Physician Date: \_\_\_\_\_  
Dr. Kevin Collins, M.D.

Approved by: \_\_\_\_\_ Team Physician Date: \_\_\_\_\_  
Dr. Matthew Heaton, M.D.

Approved by: \_\_\_\_\_ Dir. Sports Medicine Date: \_\_\_\_\_  
Russ Hoff, MS ATC

VALDOSTA STATE UNIVERSITY  
ATHLETIC TRAINING PROGRAM

STUDENT RESPONSIBILITY STATEMENT

I, \_\_\_\_\_ have read the Athletic Training Policy and Procedure Manual -  
Athletics. I know, understand, and will follow the following items:

- 1) The policies and procedures of the Athletic Department as related to Athletic Training.
- 2) HIPAA and patient confidentiality.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
AT's Signature

\_\_\_\_\_  
Date