Insert Town Name and Logo Here

Emergency Action Plan

EMERGENCY CONTACTS

EMERGENCY HOTLINE

911

FIRE DEPARTMENT
Telephone: _____

HOSPITAL EMERGENCY
Telephone: _____

POLICE DEPARTMENT
Telephone: _____

POISON CONTROL CENTER
Telephone: 1-800-222-1222

CHILD PROTECTIVE SERVICES
Telephone: 1-800-342-3720

ANIMAL CONTROL
Telephone: _____

SITE MANAGER
Telephone: _____

Emergency Response Team

Date: _____ Information Recorded by: _____

Team Name: _____

Title	Name	Phone Number
Head Coach		
Assistant Coach		
CPR/AED		
Concussion Assessor		

Emergency Task Assignment	Personnel Assigned to Task
Immediate care of injured or ill person	
Concussion Assement Coach	
Emergency equipment retrieval (AED, medical kit, etc.)	
Call EMS	
Unlock and open gates for EMS	
Contact injured persons emergency contact	
Scene Control	
Follow up with League Directors post emergency	

**** Assignments should be labeled daily for volunteer staff on location, kept in binder at location****

Chain of Command

Head Coach
Assistant Coach
Once EMS arrives, they will take over the scene

Scene Control:

Limit scene to first aid responder's and move bystanders away from area.

Identify Emergency:

Cardiac (State AED on premises)
Orthopedic
Head &/or Neck
Medical (Asthma; Diabetic; Allergic Reaction)

When You Call EMS:

Provide your name and position
Incident Location Address
Telephone Number
Number of individuals injured
Condition of injured
Any first aid treatment
Specific directions to field or current location
Any other information requested
** Do not hang up until EMS hangs up

When speaking with Emergency Contact:

Ensure that the athlete is being taken care of
Explain to them what happened
Explains the steps taken
Instruct the location the injured athlete is being taken
Identify the adult with the injured athlete and their contact number

Facility Address

Insert Address:

Facility Name: _____

Address: _____

Phone #: _____

Insert MAP

First Aid Essentials

MUST HAVES:

- AED
- Band-aids
- White sports tape
- Pre-wrap
- Gauze
- Zip-loc bags (for ice)
- Ice Pack (2)
- Non-latex gloves
- ACE wraps
- Scissors
- Hand sanitizer

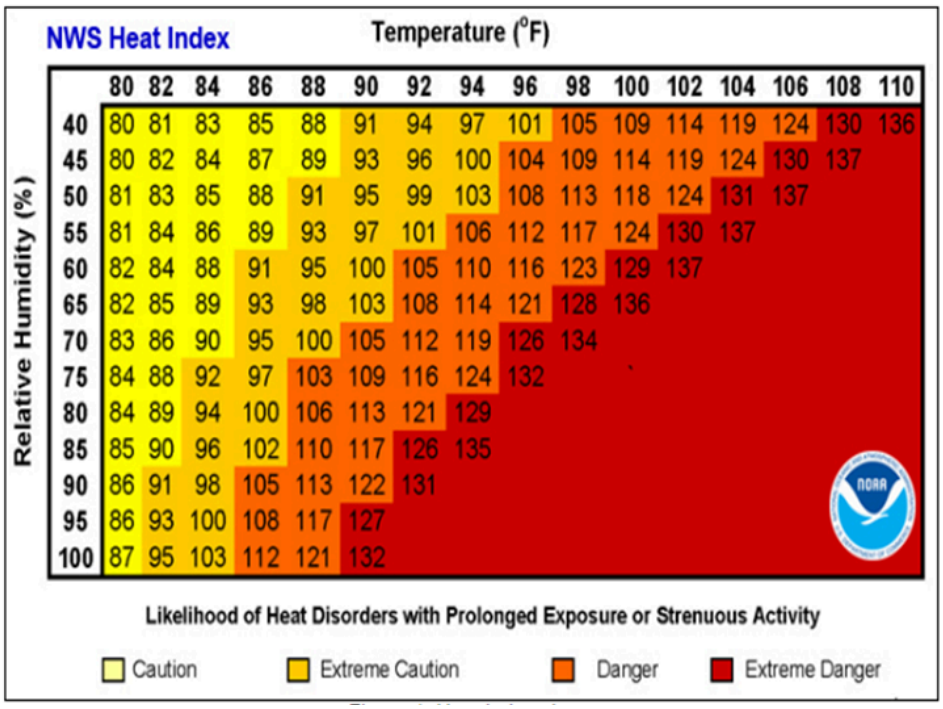
OTHER USEFUL ITEMS:

- Insect sting relief
- Triple antibiotic
- Eye Wash
- Tweezers
- Antiseptic Wash
- Multiple size Band-Aids (Strips, knuckle, patch, 4 corner, blister)

**** Must notify Vice President of supplies needing to be restocked**

Heat

** National Weather Service http://www.weather.gov/ama/heatindex



Caution Levels: Children should receive a 5–10 minutes rest and fluid break after every 30 minutes of activity.

Extreme Caution Levels: Child should receive a 5–10 minutes rest and fluid break after 30 minutes of activity. Equipment should be limited to helmet and shoulder pads only and children should be wearing shorts and t-shirts.

Danger Levels: Child should receive 5-10 minutes rest and fluid breaks after every 15 -20 minutes of activity. Children should only be in shorts and t-shirts and all equipment should be removed.

Extreme Danger Levels: Cancel or postpone all outdoor practices/games. Practice may be held in an air-conditioned space as an alternative.

Condition	Symptoms	What to do
Heat Cramps	Cramping (usually in legs), flushed, moist skin	Stop activity, rest, move to cool area, drink sports drinks (sugar and salt is important) and water, gently stretch cramps
Heat Exhaustion	Cramping, pale, moist skin, nausea, vomiting, headache, dizziness, fever	Stop activity, move to cool place, use cold towels, drink cool sports drink, if unable to drink or no improvements, take emergency room immediately
Heat Stroke Life Threatening Emergency	Warm, dry skin, headache, nausea, vomiting, confusion, rapid heart rate, seizure	Move to cool place, call 911, remove excess clothes, use ice packs in groin and arm pit, IF ALERT athlete may dink sports drink

Heat Illness Prevention:

- Acclimatize athletes in hot seasons
- Make sure athletes have plenty of water and fluids available during games and practices
- Provide enough breaks during games and practices in relation to heat
- Go to shaded area during breaks

HEAT INDEX PROCEDURES

Administration of Heat Index Procedures:

- Feels Like Temperature (Heat index) or THI using a Wet Bulb indicator on the field will be checked 1 hour before the contest/practice by a certified athletic trainer, athletic director, or school designee when the air temperature is 80 degrees (Fahrenheit) or higher.
- Download WeatherBug app to your phone or log into www.weatherbug.com. Schools may also use a Wet Bulb indicator on the field that will be used.
- Enter zip code or city and state in the location section of the app or on-line or determine the THI by using a Wet Bulb indicator.
- If the Feels Like temperature (heat index) or the Wet Bulb Indicator is 90 degrees or above, the athletic trainer, athletic director, or school designee must re-check the Feels Like temperature (heat index) or Wet Bulb indicator at halftime or midway point of the contest. If the Feels Like temperature (heat index) or Wet Bulb indicator is 96 degrees (Fahrenheit) or more, the contest will be suspended.

Please refer to the following chart to take the appropriate actions:

	Feels Like Temp(Heat Index) or Wet Bulb indicator under 79 degrees	Full activity. No restrictions
RECOMMENDED	**Heat Index Caution:** Feels Like Temp (Heat Index) or Wet Bulb indicator 80 degrees to 85 degrees	Provide ample water and multiple water breaks. Monitor athletes for heat illness. Consider reducing the amount of time for the practice session.
	Heat Index Watch: Feels Like Temp (Heat Index) or Wet Bulb indicator 86 degrees to 90 degrees	Provide ample water and multiple water breaks. Monitor athletes for heat illness. Consider postponing practice to a time when Feels Like temp is lower. Consider reducing the amount of time for the practice session. 1 hour of recovery time for every hour of practice (ex. 2hr practice = 2hr recovery time).
	Heat Index Warning: Feels Like Temp (Heat Index) or Wet Bulb Indicator 91 degrees to 95 degrees	Provide ample water and water breaks every 15 minutes. Monitor athletes for heat illness. Consider postponing practice to a time when Feels Like temp is much lower. Consider reducing the amount of time for the practice session. 1 hour of recovery time for every hour of practice (ex. 2hr practice = 2hr recovery time. Light weight and loose fitting clothes should be worn. For Practices only Football Helmets should be worn. No other protective equipment should be worn.
REQUIRED	**Heat Index Alert:** Feels Like Temp (Heat Index) or Wet Bulb indicator 96 degrees or greater	No outside activity, practice or contest, should be held. Inside activity should only be held if air conditioned.

Approved May 1, 2010
Updated July 27, 2016

***Section IX Athletics** https://assets-rst7.rschooltoday.com/rst7files/uploads/sites/622/2024/08/26104000/NYSPHSAAPolicies.pdf

WIND CHILL PROCEDURES

Administration of Wind Chill Procedures:

- Feels Like Temperature (Wind Chill) will be checked 1 hour before the contest/practice by a certified athletic trainer, athletic director, or school designee when the air temperature is 39 degrees (Fahrenheit) or lower.
- Download WeatherBug app to your phone or log into www.weatherbug.com.
- Enter zip code or city and state in the location section of the app or on-line.
- If the Feels Like temperature (wind chill) is 10 degrees or below, the athletic trainer, athletic director, or school designee must re-check the Feels Like (wind chill) at halftime or midway point of the contest. If the Feels Like (wind chill) temperature is -11 degrees (Fahrenheit) or lower, the contest will be suspended.

Please refer to the following chart to take the appropriate actions:

	Feels Like Temp (wind chill) above 40 degrees	Full activity. No restrictions
RECOMMENDED	**Wind Chill Caution:** Feels Like Temp (wind chill) 39 degrees to 20 degrees	Stay adequately hydrated. Notify coaches of the threat of cold related illnesses. Have students and coaches dress in layers of clothing.
	Wind Chill Watch: Feels Like Temp (wind chill) 19 degrees to 10 degrees	Stay adequately hydrated. Notify coaches of the threat of cold related illnesses. Have students and coaches dress in layers of clothing. Cover the head and neck to prevent heat loss.
	Wind Chill Warning: Feels Like Temp (wind chill) 9 degrees to -10 degrees	Stay adequately hydrated. Notify coaches of the threat of cold related illnesses. Have students and coaches dress in layers of clothing. Cover the head and neck to prevent heat loss. Consider postponing practice to a time when the Feels Like temp is much higher. Consider reducing the amount of time for an outdoor practice session.
REQUIRED	**Wind Chill Alert:** Feels Like Temp (wind chill) -11 degrees or lower	No outside activity, practice or contest, should be held.

Special Note: Alpine Skiing will be exempt from this policy and will follow the regulations of the host ski center where the practice or event is being held.

Approved May 1, 2010
Updated July 27, 2016

Air Quality Procedures

Because the overall health of the student athletes are the OCYFL's top priority we have adapted the Air Now's procedures for air quality effective immediately.

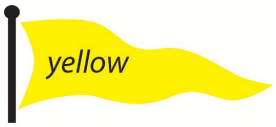
- **Green Days** Good to be outside and normal practice and games.
- **Yellow Days** Good to be outside and normal practice and games. However, unusually sensitive people should be considered for less intense and watch for symptoms.
- **Orange Days** are unhealthy for sensitive groups which includes children so OCYFL has determined that you may hold a shortened practice that is less intensive, with more breaks. Parents should determine if a child will participate in these conditions and let the coach know. If parent decides not to have child participate, they cannot be penalized for missing practice due to a sensitive issue. Extra breaks should be given during games.
    - Athletes will still be required to have three (3) non-contact and six (6) contact practices before first game. This is not a penalty, just a safety issue.
    - If a parent determines that their child can practice all staff should know who these children are and monitor closely. Watch for symptoms and take action as needed. Athletes with asthma should follow their asthma action plan and keep quick-relief medicine handy.
    - Remember that physical activity causes a larger proportion of air to be inhaled through the mouth, which by passes the body's built in nasal filtration system. Pollutants are inhaled more deeply and may diffuse into the bloodstream more quickly during physical activity.
- **Red Days** are unhealthy to all groups and practice should be cancelled or moved to indoor facility. Game Days will be postponed to another date due to Air Quality.

Download the Air Now app https://www.airnow.gov/airnow-mobile-app/ to determine the air quality in your location.

See below for Air Quality and Outdoor Activity Guidance from the United States Environmental Protection Agency.

Air Quality and Outdoor Activity Guidance for Schools

Regular physical activity —atleast 60 minutes each day —promotes health andfitness. Thetable below shows whenand how to modify outdoor physical activity based on the Air Quality Index. This guidance can help protect the health of all children, including teenagers, who are more sensitive than adults to air pollution. Check the air quality daily at www.airnow.gov.

Air Quality Index	Outdoor Activity Guidance
 GOOD	Great day to be active outside!
 MODERATE	Good day to be active outside! Students who are unusually sensitive to air pollution could have symptoms.*
 UNHEALTHY FOR SENSITIVE GROUPS	It's OK to be active outside, especially for **short activities** such as recess and physical education (PE). For **longer activities** such as athletic practice, take more breaks and do less intense activities. Watch for symptoms and take action as needed.* Students with asthma should follow their asthma action plans and keep their quick-relief medicine handy.
 UNHEALTHY	For **all outdoor activities**, take more breaks and do less intense activities. Consider moving **longer or more intense activities** indoors or rescheduling them to another day or time. Watch for symptoms and take action as needed.* Students with asthma should follow their asthma action plans and keep their quick-relief medicine handy.
 VERY UNHEALTHY	Move **all activities** indoors or reschedule them to another day.

* Watch for Symptoms

Air pollution can make asthma symptoms worse and trigger attacks. Symptoms of asthma include coughing, wheezing, difficulty breathing, and chest tightness. Even students who do not have asthma could experience these symptoms.
If symptoms occur:
The student might need to take a break, do a less intense activity, stop all activity, go indoors, or use quick-relief medicine as prescribed. If symptoms don't improve, get medical help.

Go for 60!

CDC recommends that children get 60 or more minutes of physical activity each day. www.cdc.gov/healthyyouth/physicalactivity/guidelines.htm

Plan Ahead for Ozone

There is less ozone in the morning. On days when ozone is expected to be at unhealthy levels, plan outdoor activities in the morning.

https://document.airnow.gov/air-quality-and-outdoor-guidance-for-schools.pdf

Tracking storm app:

Weatherbug

- download app

Thunder and Lightening Safety

- If you see lightening, Flee it
- If you hear thunder, Clear it

In general, a significant lightening threat extends outward from the base of a thunderstorm cloud 6 to 10 miles.

Clear Field

- Everyone in cars or concession stand
- Can resume activites after 30 minutes of no thunder

NYSPHSAA
THUNDER & LIGHTNING POLICY

(Effective 10/25/04)
(Revised October 20, 2008)

Applies to regular season through NYSPHSAA Finals:

1) Thunder and lightning necessitates that contests be suspended. The occurrence of thunder and/or lightning is not subject to interpretation or discussion - thunder is thunder, lightning is lightning.

a) With your site administrator, set up a plan for shelter prior to the start of any contest.

2) When thunder is heard and/or when lightning is seen, the following procedures should be adhered to:

a) Suspend play and direct participants to go to shelter, a building normally occupied by the public or if a building is unavailable, participants should go inside a vehicle with a solid metal top (e.g. bus, van, car).

b) Do not permit people to stand under or near a tree; and have all stay away from poles, antennas, towers and underground watering systems.

c) After thunder and/or lightning have left the area, wait 30 minutes after the last boom is heard or strike is seen before resuming play or competition.

Tornado Policy

- Tornado Watch-indicates tornados are possible. Event staff must continue to monitor the situation.
- Tornado Warning-Tornado siren sounds signaling tornado sighted or tornado indicated by radar

GUIDELINES/PROCEDURES

- If a tornado warning is initiated, immediate event delay shall be implemented, and all participants, spectators and athletic staff shall seek shelter immediately. Once inside a secure location, tune to local weather alert radio to be informed of the storm location, path and duration of tornado warning.
- Warning may be extended, or a new warning issued at any time, so continue to monitor.
- Safe shelter from tornado inside lowest building level, away from exterior walls/windows, with windows closed.

All Clear-tornado warning will expire after duration specified by the National Weather Service and the site director will notify all involved that the warning has ended, and the event may resume.

July 2022

WHEN IN DOUBT Take Them Out!

Coach's Clipboard

The following signs and symptoms may indicate a sports-related concussion:

SIGNS EXHIBITED BY ATHLETE AND OBSERVED BY COACH

- Dazed or stunned
- Confusion about game assignment, position, score, and/or opponent
- Forgets sports plays
- Clumsy movement
- Delayed response to questions
- Loss of consciousness (even briefly)
- Behavior or personality changes
- Inability to recall events before or after a hit or fall

SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Dizziness or balance problems
- Double or blurred vision
- Sensitivity to light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory loss
- Confusion
- Doesn't "feel right"

If an athlete has, or is suspected of having, a concussion, do the following:

1. **IMMEDIATELY** remove the athlete from play.
2. **NOTIFY** the athlete's parent/guardian about the known or possible concussion.
3. **DO NOT** try to judge the seriousness of the injury yourself. Ensure that the athlete is evaluated by a health care professional.
4. **ONLY** allow the athlete to return to play once he or she has been symptom-free for at least 24 hours and evaluated and cleared by a licensed physician.*

**This is a specific guideline stated in the Concussion Management and Awareness Act. Your local school district may have additional guidelines.*

ALL CONCUSSIONS ARE SERIOUS

WHEN IN DOUBT Take Them Out!

Follow us on: health.ny.gov | facebook.com/NYSDOH | twitter.com/HealthNYGov | youtube.com/NYSDOH
New York State Department of Health

A FACT SHEET FOR

Youth Sports Coaches

CDC HEADS UP
SAFE BRAIN. STRONGER FUTURE.

Below is information to help youth sports coaches protect athletes from concussion or other serious brain injury, and to help coaches know what to do if a concussion occurs.

What is a concussion?

A concussion is a type of traumatic brain injury caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging brain cells.

Multiple concussions

Athleteswhohave everhada concussion have a higher chance of getting another concussion. A repeat concussion can lead to more severe symptoms and longer recovery.1,2

What is a subconcussive head impact?

A subconcussive head impact is a bump, blow, or jolt to the head that does not cause symptoms. This differs from concussions, which do cause symptoms. A collision while playing sports is one way a person can get a subconcussive head impact. Studies are ongoing to learn about subconcussive head impacts and how these impacts may or may not affect the brain of young athletes.

How can I keep athletes safe?

As a youth sports coach, your actions can help lower an athlete's chances of getting a concussion or other serious injury. Aggressive or unsportsmanlike behavior among athletes can increase their chances of getting a concussion or other serious injury.3 Here are some ways you can help:

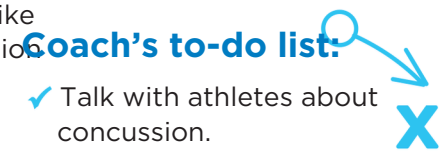
Talk with athletes about concussion:

- Set time aside throughout the season to talk about concussion.
- Ask athletes about any concerns they have about reporting concussion symptoms.
- Remind athletes that safety comes first and that you expect them to tell you and their parent(s) if they think they have experienced a bump, blow, or jolt to their head and "don't feel right."

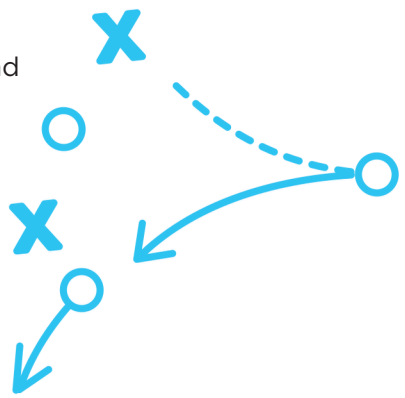
Focus on safety at games and practices:

- Teach athletes ways to lower the chances of getting a hit to the head.
- Enforce rules that limit or remove the risk of head impacts.
- Tell athletes that good sportsmanship is expected at all times, both on and off the field.
- Bring emergency contact information for parents and healthcare providers to each game and practice in case an athlete needs to be seen right away for a concussion or other serious injury.

Coach's to-do list:



- ✓ Talk with athletes about concussion.
- ✓ Teach athletes ways to lower their chances of getting a hit to the head.
- ✓ Encourage concussion reporting among your athletes.
- ✓ Know what to do if you think an athlete has a concussion.
- ✓ Learn how to help an athlete safely return to play after a concussion.



Make sure athletes do not perform these unsafe actions:

- Use their head or helmet to contact another athlete.
- Make illegal contact or check, tackle, or collide with an unprotected opponent.
- Try to injure another athlete.

Stay up to date on concussion information:

- Review your state, league, and organization's concussion plans and rules.
- Take a training course on concussion. The Centers for Disease Control and Prevention (CDC) offers free concussion training at cdc.gov/HEADSUP.
- Download CDC's HEADS UP app or another resource that provides a list of concussion signs and symptoms.

Check equipment and sports facilities:

- Make sure all athletes wear a helmet that is appropriate for the sport or activity; ensure that the helmet fits well and is in good condition.
- Work with the game or event manager to fix an concerns, such as tripping hazards or goal posts without proper padding.

One study found that nearly 70% of athletes continued to play with concussion symptoms.[4]

How can I spot a possible concussion?

Athleteswho showor report one or more of the signs and symptoms listed below—or who simply say they just "don't right"—after a bump, blow, or jolt to the head or body may have a concussion or other serious brain injury. Concussi and symptoms often show up soon after the injury, but it can be hard to tell how serious the concussion is at first. So symptoms may not show up for hours or days.

Signs coaches or parents may observe:

- Seems confused
- Forgets an instruction or is unsure of the game, position, score, or opponent
- Moves clumsily
- Answers questions slowly or repeats questions
- Can't remember events before or after the hit, bump, or fall
- Loses consciousness (even for a moment)
- Has behavior or personality changes

Symptoms athletes may report:

- Headache
- Nausea or vomiting
- Dizziness or balance problems
- Bothered by light or noise
- Feeling foggy or groggy
- Trouble concentrating or problems with short- or long-term memory
- Does not "feel right"

Signs of a more serious brain injury

In rare cases, a concussion can cause dangerous bleeding in the brain, which puts pressure on the skull. Call 9-1-1 if an athlete develops one or more of these danger signs after a bump, blow, or jolt to the head or body:

- A headache that gets worse and does not go away
- Significant nausea or repeated vomiting
- Unusual behavior, increased confusion, restlessness, or agitation
- Drowsiness or inability to wake up
- Slurred speech, weakness, numbness, or decreased coordination
- Convulsions or seizures (shaking or twitching)
- Loss of consciousness (passing out)

Some athletes may not report a concussion because they don't think a concussion is serious.

They may also worry about:

- Losing their position on the team or losing playing time during a game,
- Putting their future sports career at risk,
- Looking weak,
- Letting down their teammates or the team and/or
- What their coach or teammates think of them.[5-7]

What should I do if an athlete has a possible concussion?

As a coach, if you think an athlete may have a concussion, you should:

Remove the athlete from play.

When in doubt, sit them out! Record and provide details on the following information to help the healthcare provider or first responders assess the athlete after the injury:

- Cause of the injury and force of the hit or blow to the head or body
- Any loss of consciousness (passed out) and for how long
- Any memory loss right after the injury
- Any seizures right after the injury
- Number of previous concussions (if any)

Keep an athlete with a possible concussion out of play on the same day of the injury and until cleared by a healthcare provider.

Do not try to judge the severity of the injury yourself. Only a healthcare provider should assess an athlete for a possible concussion and decide when it is safe for the athlete to return to play.

Inform the athlete's parent(s) about the possible concussion.

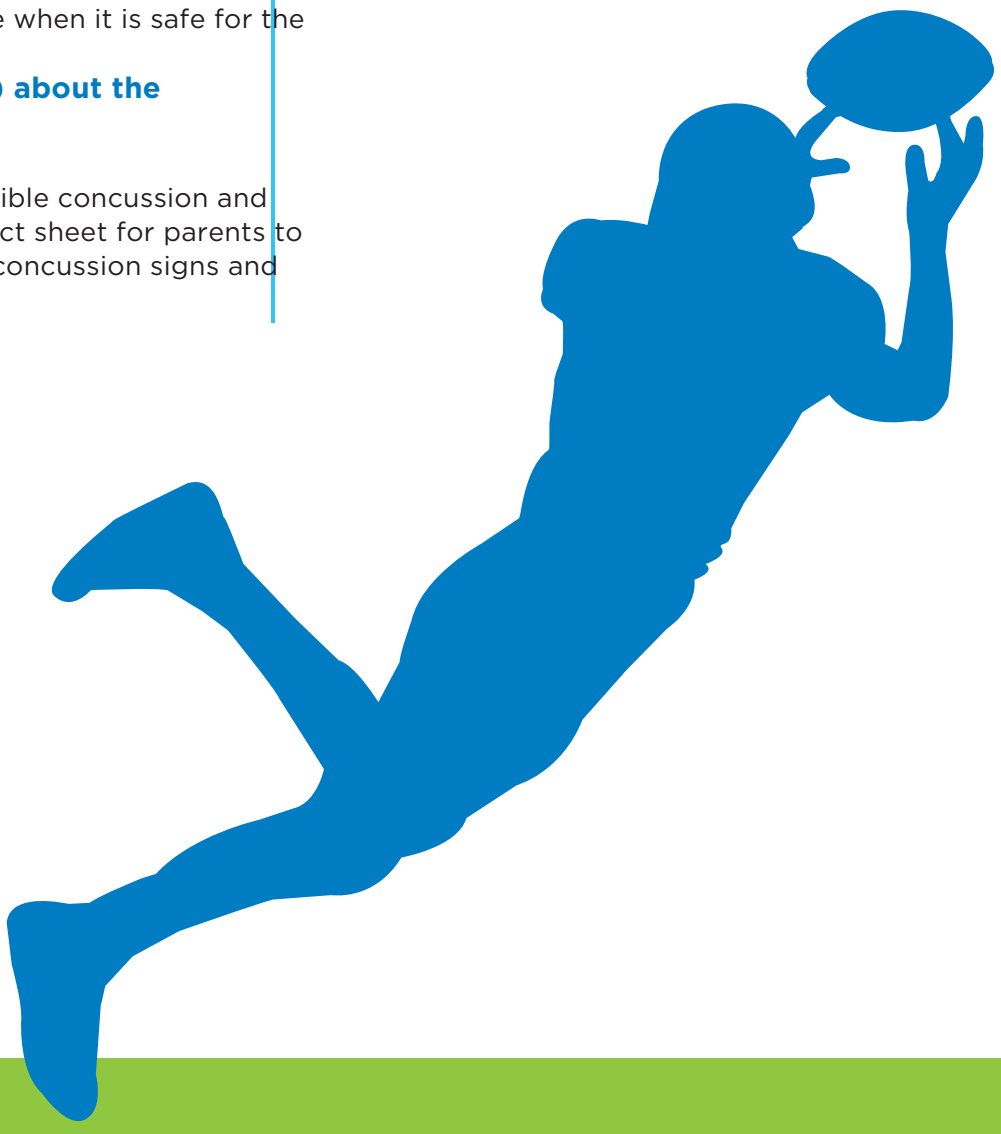
Let parents know about the possible concussion and give them the CDC HEADS UP fact sheet for parents to help them watch the athlete for concussion signs and symptoms at home.

Ask for written instructions from the athlete's healthcare provider on return to play.

This should include information about when the athlete can return to play and steps you should take to help the athlete safely return to play. Athletes who continue to play while having concussion symptoms have a greater chance of getting another concussion. A repeat concussion that occurs before the brain has fully healed can be very serious and can increase the chance for long-term problems. It can even be fatal.

Offer support during recovery.

An athlete may feel frustrated, sad, angry, or lonely while recovering from a concussion. Talk with them about it, and allow an athlete recovering from a concussion to stay in touch with their teammates, such as cheering on their team at practices and competitions.



What steps should I take to help an athlete return to play?

An athlete'sreturntoschooland sportsshouldbe a gradualprocess thatis approved andcarefullymanaged and monitore by a healthcare provider. When available, be sure to also work closely with your team's certified athletic trainer.

There are six gradual steps to help an athlete safely return to play. These steps should not be done in one day, but i over days, weeks, or months. **An athlete should move to the next step only if they do not have any new symptom currentstep.**

Step 1: Return to non-sports activities, such as school, with a greenlight from the healthcare provider to begin the return-to-play process

Step 2: Light aerobic exercise

- Goal: Increase the athlete's heart rate
- Activities: Slow to medium walking or light stationary

c ycling

Step 3: Sport-specific exercise

- Goal: Add movement
- Activities: Running or skating drills; no activities with risk for contact

Step 4: Non-contact training drills

- Goal: Increase exercise, coordination, and thinking
- Activities: Harder training drills and progressive resistance training

Step 5: Full-contact practice

- Goal: Restore confidence and have coaching staff assess functional skills
- Activities: Normal training activities

Step 6: Return to regular sports activity

Remember: It is important for you and the athlete's parent(s) to watch for concussion symptoms after each day's activities, particularly after each increase in activity. If an athlete's concussion symptoms come back, or if he or she gets new symptoms when becoming more active at any step, this is a sign that the athlete is working too hard. The athlete should stop these activities, and the athlete's parent should contact the healthcare provider. After the athlete's healthcare provider says it is okay, the athlete can begin at the step before the symptoms started.

1. Chrisman SPD, Lowry S, Herring SA, et al. Concussion incidence, duration, and return to school and sport in 5- to 14-year-old American football athletes. J Pediatr. 2019;207:176-184. doi:10.1016/j.jpeds.2018.11.003.

2. Guskiewicz KM, McCrea M, Marshall SW, et al. Cumulative effects associated with recurrent concussion in collegiate football players: the NCAA Concussion Study. JAMA. 2003;290(19):2549-2555.

3. Collins CL, Fields SK, Comstock RD. When the rules of the game are broken: what proportion of high school sports-related injuries are related to illegal activity? Inj Prev. 2008;14(1):34-38.

4. Rivara FP, Schiff MA, Chrisman SP, Chung SK, Ellenbogen RG, Herring SA. The effect of coach education on reporting of concussions among high school athletes after passage of a concussion law. Am J Sports Med. 2014;42(5):1197-1203.

5. Kerr ZY, Register-Mihalik JK, Marshall SW, Evenson KR, Mihalik JP, Guskiewicz KM. Disclosure and non-disclosure of concussion and concussion symptoms in athletes: review and application of the socio-ecological framework. Brain Inj. 2014;28(8):1009-1021.

6. Register-Mihalik JK, Guskiewicz KM, McLeod TC, Linnan LA, Mueller FO, Marshall SW. Knowledge, attitude, and concussion-reporting behaviors among high school athletes: a preliminary study. J Athl Train. 2013;48(5):645-653.

7. Chrisman SP, Quitiquit C, Rivara FP. Qualitative study of barriers to concussive symptom reporting in high school athletics. J Adolesc Health. 2013;52(3):330-335.

The information provided in this fact sheet or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to a physician or other healthcare provider.

Revised August 2019

Return to Play – Concussion

Once the athlete sustains a concussion, it is important for them to be cleared by a trained physician before returning to activity.

They cannot return to sport unless:

- You have a clearance note from physician stating they are able to return to full activity.
- They have completed steps 1-3 prior to first practice.
  - An example of this process is outlined below.
  - Each step of this process should be done 1 day after the last. If signs or symptoms returning, the athlete should rest until symptom free, then return to the previous stage. If the athlete is unable to move past a step, they should return to their physician.
- It's important to remember an athlete MUST have a FULL contact practice prior to playing in a game.

Step	Exercise
1	Light Aerobic Activity Goal: Initial movement and increase heart rate Restrictions: No jogging/running; no resistance training Activity: Stationary bike, walking, 15-20 minutes total
2	Sport Specific Exercise Goal: Add multidirectional movement, head movement Restrictions: No sprinting, resistance training, contact exercises Activity: body weight exercise; jogging
3	Non-contact Training Drills Goal: Complex training drills, coordination, cognition Restrictions: No CONTACT, no heading Activity: Running drills, footwork drills, cardio stations and agility drills; Begin Resistance Training
4	Full Contact Practice Goal: Restore confidence and assess functional skills by coaching staff Restrictions: First practice back – allow breaks as needed Activity: normal training activity
5	Game Day/ Continue Full Practice Goal: integrate athlete back into game play Restrictions: none Activity: Game play; If 6th day is not on game day, continue with unrestricted practice.

AED

Notification
Emergency services need to be notified of the placement of an AED on premises.

Location of AED

All volunteers must be made aware of the location of the AED at your location.

Storage
All AED's will be stored easily accessible during all hours that the location is in use by your program.

Associated Equipment
One set of pads will be connected to the AED at all times (if possible) and spare set of pads will be kept in the AED case. One rescue kit will also be stored with each AED. This kit will contain latex free gloves, a razor, one set of trauma shears, as wash cloth or small towel, and a pocket facemask or other barrier.

Authorization to use AED's

Orange County Youth Football League members will maintain a list of personnel authorized to use the AED. Authorized staff will be those who have current certification in CPR and the use of AEDs from a recognized training agency. Additionally, trained and certified members of the general public are authorized to use the AED in cardiac emergencies.

All trained and certified persons present in the building when a cardiac emergency occurs will constitute the emergency response team (ERT).

Procedure
In the event of an unresponsive individual on the grounds or in any of the buildings at your location the Emergency Response Team (ERT) is to be notified.

- Assess scene safety
- Is scene free of hazards?
- Electrical dangers (downed power lines, electrical cords, etc.)
- Chemical dangers (hazardous gases, liquids or solids, smoke)
- Fire, flammable gases such as medical oxygen, cooking gas
- Determine if the patient is unresponsive and not breathing
- Apply the AED if the patient is unresponsive and not breathing
- Follow instructions for use of your particular device

Post Incident Procedure

- The steps should be completed as soon after the incident as possible
- Replace the pads
- Check expiration date on the pad package
- Replace pocket mask and other supplies used
- Check the battery gauge to insure sufficient battery life
- Complete AED use report

AED USE REPORT

Date: _____

Patient information

Name: _____

Address: _____

_____

Age: _____ Gender: _____

Site of incident: _____

• Witnessed cardiac arrest	YES	NO
• Breathing upon arrival of designated responders	YES	NO
• Pulse upon arrival of designated responders	YES	NO
• Bystander CPR	YES	NO
• Cardiac Arrest after arrival	YES	NO

Number of defibrillation shocks: _____

Comments: _____

_____

_____

Rescuer's Name: _____

Rescuer's Signature: _____

Form completed by: _____

Date submitted to OCYFL via email to nyocyfl@gmail.com _____

Training

The following personnel have been trained to ensure a safe and orderly emergency action protocol:

Name	Title	Signature	Date

New York State Public High School Athletic Association
Drone Policy

The New York State Public High School Athletic Association prohibits the use or possession of unmanned aircraft or aerial systems (UAS), also known as drones, for any purpose by any person or entity at all scrimmages, regular season and post season events.

This prohibition applies to the area above and upon all spectator areas, fields of play, courts, arenas, stadiums, mats, gymnasiums, pools, practice facilities, parking areas and or other property being utilized for the purpose of the interscholastic activity.

If there is a report of UAS activity at an athletic event school, Section and/or State Association officials will, in consultation with the sports officials, suspend the play until such time as the UAS is removed from the area as defined above or the school, Section/ State and sports officials determine it is safe to proceed.

For purposes of this policy, a UAS is any unmanned airborne device or aircraft. The NYSPHSAA, Section and/or Member School reserves the right to refuse admission to anyone operating or attempting to operate a UAS or to request the immediate removal of any person using or attempting to use a UAS in violation of this policy.

The NYSPHSAA Executive Director has the authority to grant an exception to this policy to law enforcement, public safety agencies, NYSPHSAA media partners, or other entities or individuals. Any request for an exception to the policy must be submitted to the Executive Director at least a week prior to the event. The exception is limited to the specific event requested and requires the consent of the host venue.

Any use granted under this provision must comply with the applicable FAA regulations as well as any and all requirements set forth by NYSPHSAA. News media must have the necessary FAA authorization. Any individuals granted an exception would be required to sign a document acknowledging and agreeing to the terms of use and agreeing to hold the NYSPHSAA and its member schools harmless from damage to persons or property.

**Approved May 5, 2017 (Executive Committee)*