# EMERGENCY PROCEDURES

## UWA Key Medical Personnel & Emergency Contacts

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Work Phone</th>
<th>Home Phone</th>
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</thead>
<tbody>
<tr>
<td>E. J. Brophy, EdD, ATC</td>
<td>Director of Athletics</td>
<td>(205) 652-3785</td>
<td>(205) 499-9998</td>
</tr>
<tr>
<td>R. T. Floyd, EdD, ATC</td>
<td>Director of Athletic Training &amp; Sports Medicine</td>
<td>(205) 652-3714</td>
<td>(205) 652-6185</td>
</tr>
<tr>
<td>Brad Montgomery, MAT, ATC</td>
<td>Head Athletic Trainer</td>
<td>(205) 652-3696</td>
<td>(205) 499-1756</td>
</tr>
<tr>
<td>Andy Grubbs, MEd, ATC</td>
<td>Assistant Athletic Trainer</td>
<td>(205) 652-3452</td>
<td>(205) 499-6631</td>
</tr>
<tr>
<td>Shanna Grubbs, MAT, ATC</td>
<td>Assistant Athletic Trainer</td>
<td>(205) 652-3455</td>
<td>(205) 499-6576</td>
</tr>
<tr>
<td>Laurie Fincher, MA, ATC</td>
<td>Assistant Athletic Trainer</td>
<td>(205) 652-3455</td>
<td>(205) 807-9111</td>
</tr>
<tr>
<td>Athletic Training Graduate</td>
<td>Graduate Assistants Athletic Training</td>
<td>(205) 652-3451</td>
<td>Wes Gragg 918-297-7171</td>
</tr>
<tr>
<td>Assistants' Office</td>
<td></td>
<td></td>
<td>Corey Neal 308-587-2364</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Kyle Sampsell 652-2561/ 205-873-0461</td>
</tr>
<tr>
<td>William R. Simpkins, M.D.</td>
<td>Team Family Practice Physician</td>
<td>(205) 652-2686</td>
<td>(205) 652-2208</td>
</tr>
<tr>
<td>James R. Andrews, M.D.</td>
<td>Team Orthopaedist</td>
<td>(205) 939-3000</td>
<td>(205) 871-2628</td>
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<td></td>
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<td></td>
<td>car phone (205) 936-8203</td>
</tr>
<tr>
<td>Lyle Cain, M.D.</td>
<td>Medical Director, Team Orthopaedist</td>
<td>(205) 939-3000</td>
<td>(205) 568-4133</td>
</tr>
<tr>
<td>Don Aaron, M.D.</td>
<td>Orthopaedic Fellow</td>
<td>(205) 930-0061</td>
<td>(205) 939-3000</td>
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<td></td>
<td>or 939-3000</td>
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<tr>
<td>Jason Robertson, M.D.</td>
<td>Family Practice/Sports Medicine Fellow</td>
<td>(205) 930-0061</td>
<td>(205) 939-3000</td>
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<td>or 939-3000</td>
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<tr>
<td>Other numbers to contact team physicians in Birmingham</td>
<td>Alabama Sports Medicine &amp; Orthopaedic Center</td>
<td>(205) 939-3000</td>
<td>Surgery viewing room (205) 939-2165</td>
</tr>
<tr>
<td>Darrell Hoggle, DMD</td>
<td>Team Dentist</td>
<td>(205) 652-7114</td>
<td>(205) 652-2269</td>
</tr>
<tr>
<td>Ambulance Service</td>
<td>City of Livingston Ambulance Service</td>
<td>911</td>
<td>(205) 652-9777</td>
</tr>
<tr>
<td>Police Department</td>
<td>City of Livingston Police Department</td>
<td>911</td>
<td>(205) 652-9525</td>
</tr>
<tr>
<td>Campus Police</td>
<td>UWA Campus Police</td>
<td>(205) 652-3682</td>
<td></td>
</tr>
<tr>
<td>Local Hospital</td>
<td>Hill Hospital, York, AL</td>
<td>(205) 392-5263</td>
<td></td>
</tr>
<tr>
<td>Steven Phelps</td>
<td>Sports Information Director</td>
<td>(205) 652-3596</td>
<td></td>
</tr>
<tr>
<td>Brian Howard</td>
<td>Assistant SID</td>
<td>(205) 652-3596</td>
<td>(404) 695-0556</td>
</tr>
<tr>
<td>Seale Broughton</td>
<td>Football/Athletic Training Secretary &amp; Insurance Claims</td>
<td>(205) 652-3483</td>
<td>(205) 233-0437</td>
</tr>
<tr>
<td>Penny Dew</td>
<td>Special Assistant to the Athletic Director</td>
<td>(205) 652-3784</td>
<td>(205) 609-2952</td>
</tr>
<tr>
<td></td>
<td>Homer Field House Athletic Training Room</td>
<td>(205) 652-3450</td>
<td>1-800-621-7742 in state</td>
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<td></td>
<td></td>
<td>(205) 652-3263</td>
<td>1-800-621-8044 out of state</td>
</tr>
<tr>
<td></td>
<td>Pruitt Hall Athletic Training Room</td>
<td>(205) 652-3455</td>
<td>1-800-621-7742 in state</td>
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<tr>
<td></td>
<td></td>
<td>(205) 652-3403</td>
<td>1-800-621-8044 out of state</td>
</tr>
<tr>
<td>Football Practice Field</td>
<td>Call UWA Physical Plant</td>
<td>(205) 652-3601</td>
<td></td>
</tr>
<tr>
<td>Baseball Complex</td>
<td>Tartt Baseball Field</td>
<td>(205) 652-2579</td>
<td></td>
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<tr>
<td>Softball Complex</td>
<td>UWA Softball Complex</td>
<td>(205) 652-3600</td>
<td></td>
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<tr>
<td>Rodeo Complex</td>
<td>Don C. Hines Rodeo Complex</td>
<td>(205) 652-4100</td>
<td></td>
</tr>
<tr>
<td>Fax Numbers</td>
<td>Athletics, Sports Information, &amp; Athletic Director</td>
<td>(205) 652-3600</td>
<td></td>
</tr>
<tr>
<td>Fax Number</td>
<td>Athletic Training &amp; Football</td>
<td>(205) 652-3799</td>
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Athletes to the Hospital

Athletes that need immediate attention by the hospital or the team physician should be transported to Hill Hospital in York, Alabama. Upon arrival the attending athletic trainer should notify the nurse on duty of the problem. The nurse will then contact the team physician and/or the x-ray technician. The attending athletic trainer should make himself/herself available to talk with the physician if necessary unless he is needed to help care for the athlete. The attending athletic trainer should keep in mind that he is not finished with his/her job because he/she has delivered the athlete to the hospital.

DO NOT leave the athlete until the hospital staff and physicians are in control of the situation and you have been relieved. The attending athletic trainer is responsible for the athlete’s equipment and clothing. He or she should bring the equipment and clothing, back to the university and place it in the athlete’s locker and then deliver the personal clothes to the athlete. The attending athletic trainer is to report to their supervising athletic trainer, as soon as he or she is no longer needed at the hospital.

Road Trip Emergency Medical Procedure

Whenever traveling with a university athletic team and an athlete requires hospitalization or a physician’s attention, you should always adhere to the following procedure.

1. If at all possible, wait until you reach Livingston before seeking medical attention. However, the athlete’s health and well being is most important. If you are in doubt, quickly seek the closest medical attention. Always err on the side of good judgment.
2. If you are near the opponent’s hometown, always seek help from the opponent's athletic trainer and team physician, if possible.
3. Always introduce yourself to the opponent’s athletic trainer and/or team physician before the athletic contest begins. If an emergency arises, they will already be familiar with you.
4. Always offer your services to an injured opponent, even if you are at his home facility. In certain situations you may be the most knowledgeable in the area of sports medicine if the opponent does not have an athletic trainer or physician present. Never force yourself or your services on an injured opponent; leave the decision to them and their coach.
5. Always carry insurance and medical history information on your athletes in your kit.
6. Whenever our athletes need medical attention out of town, first file all bills to his/her insurance, then any subsequent bills should be charged to the athlete at his/her home address. Copies should be sent to the head athletic trainer at the university’s address (UWA, Station #14, Livingston, AL 35470).
7. Contact the head athletic trainer as soon as possible if the injury is serious. The head athletic trainer may then contact the athlete's parents and/or spouse.
8. Attending athletic trainers may stay with the injured athlete at the hospital if necessary. This should not be done unless there are other university athletic trainers to cover potential injuries of the remaining team members. There is always the possibility of a more serious injury to another team member.
9. If the head or other staff athletic trainers cannot be reached by telephone, then the student athletic trainer should leave his/her number with the University Campus Police and have them locate a staff athletic trainer as soon as possible.
10. Only medical treatment that is absolutely necessary should be administered by non-university medical personnel; if possible, all secondary medical treatment should be handled by the university medical staff.

Emergency Procedure at Home Competitions or Practices

The highest ranking athletic trainer stays with the injured athlete until transportation is complete or the situation is turned over to EMT’s and/or team physician(s). This procedure applies to potential serious head injuries, potential spinal cord injury, vertebral fractures and dislocations, heat stroke victims, cardiac patients, any unconscious athlete, any athlete with convulsions, or any serious unstable condition. It is the responsibility of the other athletic trainers to quickly find out as much as possible about the involved athlete and his condition before departing with the athlete to the medical facility. This is important, as he/she will need to relate this information to other medical personnel. Each and every UWA athletic trainer should make themselves aware of the surroundings in relation to emergencies upon arrival at every practice to look for potential injury situations that can be prevented. Each UWA athletic trainer has a responsibility if an emergency arises. Once it is determined that the EMS system must be activated, attempt to help by doing one of the following things:

1. The athletic trainer should always try to remain calm in any crisis; also as the athletic trainer approaches the injured athlete he/she should quickly examine the scene and secure it before trying to help the athlete.
2. With the scene secure the athletic trainer should try to talk to the athlete. If the athlete is unresponsive then the athletic trainer should assume that the athlete has at least a head or spinal injuries and secure the c-spine. If other athletic trainers are present the athletic trainer with the most seniority will aid in the evaluation, also another athletic trainer will go and activate the local EMS unit only at the request of the senior athletic trainer (on the scene).
3. The athletic trainer holding the c-spine should be able to check or conduct a primary survey checking the airway, breathing, and circulation. The other athletic trainer(s) should start gathering information about the injury from other players or witnesses.

4. If the athlete is conscious and coherent the assisting athletic trainer should question the athlete about his/her injury, i.e., what happened or what were you doing when, etc. The assisting athletic trainer should do a secondary survey while the athlete is talking.

5. If possible find if the athlete has any predisposing factors, i.e., diabetes, previous heat problems, etc. Also, if the injury is not head or spinal cord related the athletic trainer holding the c-spine may release it only after permission from the most senior athletic trainer on site.

6. The athletic trainer should always be aware of the possibility of the athlete going into shock at any time after an injury no matter how minor the injury may appear, and the athletic trainer must be prepared to manage it. The athlete should not be moved under most circumstances with the exception of heat illness.

7. The athletic trainers evaluating and attending to the athlete should stay with the athlete and wait for the ambulance to arrive and transport the athlete. Another athletic trainer should go to the entrance of the practice area and wait for the ambulance to arrive and direct them to the scene. When the ambulance arrives, one of the athletic trainers will relay all information including vital signs, evaluation results, and any special problems to the EMT’s. Another athletic trainer should get the insurance and medical history information of the athlete. The athlete’s insurance information is to be taken to the hospital by the athletic trainer riding with the athlete on the ambulance.

8. One athletic trainer is to ride in the ambulance with the athlete to the health care facility. Another will get the state vehicle and follow the ambulance to the hospital.

9. Always have someone contact the head athletic trainer or one of the senior athletic trainers immediately if they are not on site.

10. Never leave the scene unless another athletic trainer is on site to monitor the remaining athletes as the practice or game continues.

11. If it is a visiting team, assist the attending visiting athletic trainer however they deem appropriate without breaking the above actions.

**Baseball Emergency Procedures (Tartt Field)**

1. When an injury occurs, the athletic trainers should go on to the field to evaluate the injured athlete. If the injury is life threatening, one of the athletic trainers should go to the press box, coach’s office in the first base field house or use an on-site cellular phone and activate the local EMS service and inform them of the emergency. Also, call the head athletic trainer or one of the senior staff athletic trainers and tell them of the injury. He/she should then report back to the attending athletic trainer.

2. While one athletic trainer is enacting the EMS system the attending athletic trainer should do a primary survey and check the level of consciousness, if possible, or if the case of a head or spinal injury hold c-spine and wait. After the non-attending athletic trainer enacts the EMS system and has reported to the attending athletic trainer, he/she should help the attending athletic trainer do a primary survey and/or a secondary survey on the athlete. When that is complete the non-attending student athletic trainer should go and make sure that the ambulance has easy access to the field and that all necessary gates are open via the established EMS route.

3. The attending athletic trainer must be aware that the athlete could go into shock at any time after an injury, so it is very important that the athletic trainer be able to recognize the early signs of shock and be able to manage it. The athlete should not be moved unless absolutely necessary.

4. When the ambulance arrives at the field and the EMT’s approach the athlete, the attending athletic trainer should give them all of the information gathered such as, the mechanism of injury, vital signs, time of injury, and progressing level of consciousness. When the ambulance is preparing to leave one of the athletic trainers should have a copy of the athlete’s insurance and brief medical outline and leave with the athlete to go to the hospital.

**EMERGENCY PLAN RELATED INFORMATION**

**Weather events:** In the case of inclement weather, the attending athletic trainer will recommend to the head coach that practice or competition be terminated (the ultimate decision will be with the attending athletic trainer). Decisions will be based on NCAA recommendations concerning threatening weather. All personnel will immediately seek shelter at designated areas, (football practice-Moon Hall loading dock, football game-Homer Field House locker room, baseball-dugout or locker room, softball-dugout or locker room, rodeo-barn, cross country-nearest safe shelter to the area they are running at, tennis-UWA Student Union Building). Of note, once a game or competition has begun, the umpire or official holds the responsibility of game termination. The athletic director has the authority to override the official’s decision in the case of inclement weather. Also, all issued weather warnings will be heeded by all of UWA’s athletic teams. The
University’s Campus Police are to go to each venue and warn them of any impending thunderstorm or tornado warnings. Refer to the Lightning Safety Policy.

Location of all phones
Phones for emergency actions are available for the following sports at the following locations in the event that an onsite cellular phone is not accessible:

1. **Tartt Baseball Field:** Phone access is located in the Baseball Press Box, behind home plate or in the coaches’ offices, 2nd floor above the 1st base dugout.

**UNIVERSITY OF WEST ALABAMA 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 University of West Alabama athletes, coaches, support staff and fans. To monitor lightning the Athletic Training staff will utilize both the Flash-to-Bang Method and a SkyScan Lightning/Storm Detector. Our policy is in accordance with the *2006-2007 NCAA Sports Medicine Handbook* regarding lightning safety.

**GENERAL POLICY:** A member of the Athletic Training Staff (certified or student staff) will monitor the weather and make the decision to notify the head coach or officials of dangerous situations and recommend the suspension of activity in the event of lightning. Exceptions will be made for any activity where an Athletic Training staff member is not in attendance, whereby the supervising coach will have the ability to suspend activity. The decision to suspend activity will be based on:

- Two subsequent readings on the SkyScan Lightning/Storm Detector in the 8-20 mile range regardless of the presence of visible lightning. (This device is portable and will be in the possession of the athletic training staff member or supervising coach.) and/or
- Utilization of the **Flash-to-Bang Method** (Count the seconds from the time the lightning is sighted to when the clap of thunder is heard. Divide this number by five to obtain how far away, in miles, the lightning is occurring.) *2006-2007 NCAA Sports Medicine Handbook*. If it reveals lightning to be within 6 miles (a 30 second count between the flash of lightning and the bang of thunder) activity is to be suspended and everyone should seek shelter immediately.

**PRIOR TO COMPETITION:** A member of the Athletic Training Staff and/or Athletic Director 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. The Athletic Director and game officials will then decide whether to discontinue play.

**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 immediately remove all athletes, coaches, and support staff from the playing field or practice area/facility.

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

**OUTDOOR INSTRUCTIONS:** If no safe structure or location is within a reasonable distance, find a thick grove of small trees surrounded by taller trees, a dry ditch without water, or seek a flat area (do not chose an open area where you will be the highest object). When there, crouch down wrapping your arms around your knees and lower your head to minimize contact with the ground and wait for the storm to pass. (*2006-2007 NCAA Sports Medicine Handbook*)

**REMEMBER:** an automobile, golf cart, or open shelter are not ideal shelters, but will offer you some protection from a lightning strike. Do not touch any metal structures directly after a lightning strike.

**At UWA**
- Baseball Game or Practice: Evacuate to the dugouts (both teams)
**Away Events:** All UWA athletic teams participating outdoors will travel with the SkyScan Lightning/Storm Detector. A member of the Athletic Training staff will notify the host Athletic Training staff member and game officials before competition and explain that we have a means to monitor the lightning. We will offer to notify the officials during the game if there is imminent danger from the lightning. The UWA Athletic Training staff reserves the right to discontinue playing, in the event the game officials have not suspended play with the knowledge of inclement weather.

**EVACUATION OF THE STANDS:** During a competition, once the decision to suspend activity has been made, a representative of the athletic department will announce via the PA system:

1. Fans are advised to immediately seek shelter in the nearest enclosed, grounded shelter. (Football-Pruitt Hall, Armory, or vehicles, Softball-Student Union Building or vehicles, Baseball-vehicles, Rodeo-Barn or vehicles)
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:** During practice, activity may resume under the following conditions. This decision will be based on:

- Thirty minutes AFTER the last lightning strike within an 8-20 mile range on the SkyScan Lightning Detector.
- Thirty minutes AFTER the last lightning strike within a 6-mile range using the Flash-To-Bang method. During a game situation the activity will resume once the Athletic Director, Athletic Training staff member and officials have conferred and the above criteria have been met.

**OTHER LIGHTNING SAFETY TIPS:** *(2006-2007 NCAA Sports Medicine Handbook)*

1. There should be no contact with metal objects (bleachers, fences, golf clubs, bats)
2. Avoid single or tall trees, tall objects and standing in a group.
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. Roll up the windows. Do not touch the sides of the vehicle.
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.
5. **DO NOT LIE FLAT ON THE GROUND**
6. Avoid using a land line telephone. Cell phones are a safe alternative if in a safe structure.
7. Avoid standing water and open fields.
8. If in a forest, seek shelter in a low area under a thick grove of small trees.
9. **If you feel your skin tingling immediately crouch and grab your legs and tuck your head as described above to minimize your body's surface area.**
10. Persons who have been struck by lightning do not carry an electrical charge. Therefore, enact the EMS system and provide emergency care. CPR with an AED is what is most often required. If possible, move the victim to a safe location.
11. For additional information refer to the National Lightning Safety Institute at www.lightningsafety.com

**DIRECTIONS FOR USING THE SKYSCAN LIGHTNING DETECTOR.**

1. Prior to practice or competition, monitor weather forecast via the Internet or by calling local agencies for up to date information.
2. Check for any National Weather Service-issued thunderstorm “watches” and “warnings”.
3. 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)
4. Communicate with officials and/or head coach prior to activity about potential for bad weather and our monitoring system.
5. Locate the SkyScan Lightning/Storm Detector in an area removed from other electronic devices or machinery, which could cause a false triggering.
6. The SkyScan Lightning/Storm Detector is designed to work in a vertical position.
7. Turn the unit on, by depressing the on/off switch.
8. Allow the unit to perform a self-check and make sure all lights are working correctly.
9. If you are using the AC Adapter, depress the “Battery Save” button twice to extend the life of the back up batteries.
10. Press the tone button to activate the warning tone. (This must be done every time the lightning detector is turned on.)
11. Set the range of detection by depressing the “Range Select” button until the 8-20 mile light is illuminated.
12. Each time the SkyScan detects a lightning stroke it emits an audible warning tone for 1 second (it is not very loud so if there is ANY chance of bad weather you must have the SkyScan out where you can see and hear it).
13. Following the beep the lightning Range Indicator column will light up for approximately 3 seconds. The single indicator corresponding to the range of the detected stroke will blink for approximately 25 seconds.

14. Activity will be suspended when:
   A. The SkyScan registers 2 consecutive lightning strokes within the 8-20 mile range
   B. The Flash/Bang Method reveals lightning within a 6 mile range (30 second or less count between the flash of lightning and the bang of thunder)

15. Once you have determined that there is imminent danger of a lightning strike, communicate to the head coach and/or head official.

16. 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. If there is no available shelter IE, cross-country, 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.

17. 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, Athletic Director of Head Official.

18. The SkyScan can also detect severe weather conditions (high winds, tornadoes, etc) that may pose a threat to human life. The severe weather audible warning lasts for 15 seconds and the corresponding indicator on the unit lights up.

FLASH-to-BANG Lightning Detection Method

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

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.

SCRIPT FOR CONVERSATION WITH OFFICIAL

Hello, my name is ________________________. I am a member of the University of West Alabama Athletic Training Staff. I would like to speak with you regarding our lightning safety procedures. On site we have a lightning detector which I will use to monitor lightning. In accordance to NCAA recommendations, lightning detected within 8-20 miles is considered to pose an imminent threat. Per UWA's lightning safety policy, when the lightning detector reveals 2 consecutive strikes within the 8-20 mile range OR the flash/bang method reveals lightning less than 6 miles we strongly recommend suspending activity until the danger of a lightning strike has passed. We have a communication system to inform all participants and any fans.
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 can not 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 UWA’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-to-BANG method to monitor the proximity of the lightning. THE FLASH-to-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:

1. Auditory: Flash-to-Bang Theory

To use this method, count the seconds from the time the lightning “flash” is sighted to when the clap of thunder “bang” is heard. 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.

♦ Each five seconds equal one mile
♦ 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 UWA:
1. Baseball Game: Evacuate to your vehicle

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

Thank you for your cooperation.

COMPLIANCE STATEMENT FOR ALL ATHLETIC DEPARTMENT PERSONNEL

As a member of the University of West Alabama Athletic Department, I attest that I have read, understand, and will adhere to the University of West Alabama Athletic Department Lightning Safety policy.

__________________________________________  ____________________________
Signature of staff member                        Date

__________________________________________  ____________________________
Witness signature                                 Date
AED Policy

Due to recent events where athletes have died as a result of sudden cardiac death, the University of West Alabama now has an two automated external defibrillators (AED’s). The brand of AED’s we have are the Zoll AED Plus and the Phillips Heartstart. The technical support for the Zoll unit is through SEMA, Inc. Medical Equipment and Supplies from whom we purchased the device The AED’s are very user friendly and can be used by any staff athletic trainer, first responder, athletic training student, coach, or athletic department administration certified in AED usage by either the American Red Cross or American Heart. EMT or higher certification also meets the criteria for usage. Following is the guidelines for usage by an AED certified staff member. Of note, remember the highest risk group we will deal with is probably the fan in the bleachers. Be prepared for a spectator to go into cardiac arrest and do not hesitate to use our AED on a spectator.

- When the AED is not in use at an athletic event or practice the AED will be stored in the Head/Assistant Athletic Trainer’s Office (JPH 220).
- Have the AED on site at each athletic facility or practice venue (currently, due to the fact that we only have two, this is not possible). The Director of Athletic Training & Sports Medicine, Head Athletic Trainer, or the Assistant Athletic Trainers will determine the designation of the AED. The Director of Athletics will also be informed of the venue location of the AED. When selecting the site of the AED, the following must be taken into consideration:
  o Whether the sport is High Risk or Low Risk as denoted by the NCAA (high risk sports should have precedent over low risk sports). At UWA, football, rodeo, and men & women’s basketball are the highest risk sports, followed by volleyball, baseball & softball. The lowest risk sports are men & women’s cross-country and men & women’s tennis.
  o The total number of participants and/or fans at the specific venues
  o All home contests will supersede practices, unless EMS is on site. If EMS is on site and activity is going on at another site (football and volleyball concurrently for example), our AED should be at the non-EMS covered site.
  o When there are multiple sites the most centralized site should be chosen, all athletic trainers or first responders at the other sites are informed of this and have the ability to contact the site person (by land line or cellular phone) with the AED where it can be easily moved to another site quickly if an emergency arises.
  o Remember Title IX; women have an equal right to all athletic medical equipment. When deciding on location, do not locate the AED at the male site always. Use the above criteria for decision-making, not gender.
- When an emergency arises and the AED is on site, it should be easily attainable from the emergency equipment location at each site.
- When it is determined by following the primary survey of standard first aid (responsiveness, breathing, circulation) that a cardiac emergency is taking place, the AED should be used only after enacting the EMS system. Another athletic training staff member, coach, athlete, or bystander can perform this action.
- After EMS is enacted, position supine, open airway, begins rescue breathing, and applies chest compressions in the correct sequence until the AED is in place.
- Apply the pads to the bare chest of the athlete in the fashion described on the pads or on the cover of the AED.
- Turn the AED on by pressing the on button
- Clear everyone from touching the victim to allow the AED to monitor the heart rhythm, Make sure the victim is not lying in water.
- After rhythm analysis is completed follow instructions of AED to deliver shock, begin CPR, or monitor vitals until EMS arrives (again make sure nobody is touching the victim when shock is to be delivered).

Remember the AED is a fragile device. Care should be used when handling the AED. It should not be dropped, shaken, or stored where it could get wet or exposed to extreme heat. There is also a battery check on the exterior that should be checked periodically. As long as there is not an X in the window the batteries are charged. Replacement batteries are eight (8) Type 123 Lithium batteries.

Priority for AED usage will be based on the following conditions:
- Competition/Scrimmage has priority over practice.
- Home games have priority over away games.
- Team priority:
  1. Football
  2. Men’s Basketball
Parameters used to determine priority include:
- Sudden cardiac death (SCD) occurs in male athletes more than female athletes.
- SCD occurs in black athletes more than any other race of athletes.
- Men’s basketball has the highest reports of SCD followed closely by football.
- Blunt injuries to the chest can cause ventricular fibrillation.

**Hours of normal operation of key personnel**

The UWA Athletic Training & Sports Medicine Center is open in the Fall Semester from 6:30am until 6:30pm, Monday through Friday. During the Spring Semester, the athletic training room will be open from 7:00am until 5:30pm. Additionally, the athletic training room will be open from 8:00am until 10:00am every Saturday during the Fall Semester. Regular treatment times for UWA athletes will be from 6:30am until 8:00am in the fall, 1:00pm until 3:00pm, and 5:00pm until 6:30pm. In the spring, the times will be from 7:00am until 8:00am, 1:00pm until 5:30pm. Any other treatment time for UWA athletes will be scheduled at the discretion of the attending athletic trainers.

Dr. William R. Simpkins, Local Team Physician, will be open Monday through Friday from 9:00am until 12:00 and 3:00 pm until 5:00pm, except on Wednesday and Friday when his office closes at noon. Any need of an athlete to see the physician will be handled through the athletic trainers and referred to Dr. Simpkins. Usually, clinic for all university students is from 12:00pm until 12:30pm at his office.

Alabama Sports Medicine and Orthopaedic Center is open Monday through Friday from 9:00am until 5:00pm. Arrangements for visits with any of the physicians will also be made through the athletic trainers.

The physician’s clinic provided by the Alabama Sports Medicine and Orthopaedic Center will be performed by Dr. Lyle Cain and the fellows of Dr. James R. Andrews and Dr. Cain. The clinic will be on every Wednesday during the Fall Semester from 9:00am until 11:00am. During the Spring Semester, clinic will be on every other Wednesday from 9:00am until 11:00pm. All athletes with injuries or injury follow-up will be scheduled during these times for evaluation.

**Emergency equipment available for use**

List of first aid and emergency equipment in each athletic training facility

<table>
<thead>
<tr>
<th>Baseball Complex</th>
<th>Softball Complex</th>
<th>Homer Field House Athletic Training Room</th>
<th>Pruitt Athletic Training Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spine Board</td>
<td>First Aid and Emergency Kit</td>
<td>Biohazard Containers</td>
<td>Biohazard Containers</td>
</tr>
<tr>
<td>Splints &amp; Crutches</td>
<td>Biohazard Containers</td>
<td>Individual Medical Information</td>
<td>Insurance Sheets</td>
</tr>
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<td>Insurance Sheets</td>
<td>Individual Medical Information</td>
<td>Individual Medical Information</td>
</tr>
<tr>
<td>Scissors</td>
<td>Ice</td>
<td>Suture Kit</td>
<td>Biohazard Containers</td>
</tr>
<tr>
<td>Cervical Collars</td>
<td>Immobilizers</td>
<td>Thermometer</td>
<td>Splints (All)</td>
</tr>
<tr>
<td>CPR Masks</td>
<td>Insurance Sheets</td>
<td>Tooth Kit</td>
<td>Individual Medical Information</td>
</tr>
<tr>
<td>Crutches</td>
<td>IV Kits</td>
<td>Walkie Talkie</td>
<td>Biohazard Containers</td>
</tr>
<tr>
<td>Elastic Bandages</td>
<td>Neurological Hammer</td>
<td>Stethoscope</td>
<td>CPR Masks</td>
</tr>
<tr>
<td>Emergency Information</td>
<td>Pen Lights</td>
<td></td>
<td>Crutches</td>
</tr>
<tr>
<td>Eye Kit</td>
<td>Phones</td>
<td></td>
<td>Elastic Bandages</td>
</tr>
<tr>
<td>Gloves</td>
<td>Wound Care Supplies (band aids, gauze, topical antibiotics)</td>
<td></td>
<td>Emergency Information</td>
</tr>
<tr>
<td>Glucose</td>
<td>Sphygmomanometer</td>
<td></td>
<td>Eye Kit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Gloves</td>
</tr>
</tbody>
</table>
- Wound Care Supplies (band aids, gauze, topical antibiotics)
- Glucose
- Ice
- Immobilizers
- Insurance Cards
- IV Kits
- Neurological Hammer
- Pen Lights
- Phones
- Insurance Sheets
- Sphygmonanometer
- Spine Board
- Splints (All)
- Stethoscope
- Suture Kit
- Thermometer
- Tooth Kit
- Walkie Talkie
- Individual Medical Information

**Rodeo Complex**
- Spine Board
- Splints & Crutches
- First Aid and Emergency Kit
- Biohazard Containers
- Insurance Sheets
- Individual Medical Information

**Howard R. Vaughan Tennis Complex**
- Spine Board
- Splints & Crutches
- First Aid and Emergency Kit
- Biohazard Containers
- Insurance Sheets
- Individual Medical Information

**When EMS is on site**

The City of Livingston Ambulance Service will be on site during all UWA home football games. Additionally, they will be present during all sanctioned UWA rodeo events (athletic and fund-raising).

**Coaches First Aid/CPR training**

All head coaches, assistants, and graduate assistant will be required to become certified in American Red Cross First Aid & CPR. They must be certified during the Summer Semester prior to the start of the Fall Semester. Courses will be offered in July and August by the ARC certified instructors at the University. Recertification for currently certified coaches will also be given at these times.

Currently, we have four certified instructors on staff. It is encouraged for any coach interested in becoming an instructor to contact The Tuscaloosa County Chapter of the American Red Cross for the scheduling of an instructor course.

**Insurance info and medical history will in all athletic training kits both home and away**

Each athletic training student assigned to work a varsity athletic sport is required to carry a copy of each individual athlete’s insurance and medical information with them to practices and events both home and away. Also, each student will take a listing of all pertinent numbers to contact in case of emergency.

Football will always have a copy of the medical information and insurance of each student athlete permanently stored in the white travel trunk with easy access for all to acquire if necessary.

The cheerleaders sponsor, coach, or supervisor will also carry a copy of their insurance and medical information with them when they are traveling or attending events without the accompaniment of a UWA student or staff athletic trainer.

**Who is notified when a catastrophic event occurs: administrator, parents, coach**

Whenever a catastrophic accident, emergency situation, severe or fatal injury occurs, the attending staff athletic trainer will contact the following parties, in the following order: Other athletic training staff members, the athletic director, head coach of that sport, and the parent or guardian noted as the emergency contact on the student-athlete’s medical information.

If the attending athletic trainer is a graduate assistant or student, they should first contact the head athletic trainer or the director of sports medicine. If they are unable to reach either one of these people, they should contact one of the assistant athletic trainers. Following contact with one of the athletic training staff members, they should be ready to follow any instruction deemed important by the attending staff member.

**Keys to all athletic gates and who needs one**

In case of emergency at a location with the potential for locked gates, a single person, denoted by the athletic director, will be responsible for having access to a key to unlock any gate or door that may hinder the prompt emergency care of a student athlete. This representative must be someone who is available at all times at each of these venues (usually the head or assistant coach).

**Location of all phones**

Phones for emergency actions are available for the following sports at the following locations in the absence of an on-site cellular phone:

1. **Tartt Baseball Field:** From February until the end of the Spring Semester phone access is located in the Baseball Press Box, behind home plate. The phone must be plugged in each day prior to the start of workouts. During the
fall semester and in January, access is not available on site. The nearest phone access in case of an emergency is at the Lake LU managers’ trailer. If he is not present, the next most accessible phone would be at either Moon Hall (physical plant) or the Student Union Building.

Certified Athletic Trainer availability

A certified member of the athletic training staff (usually two) will always be present at all home and away UWA football practices, games, travel, and required out of season activities except weight lifting. During weight lifting a certified staff member will be on duty in the athletic training room directly upstairs from the weight room.

A certified athletic trainer will be on duty in the athletic training room from 7:00am until ~5:00pm each day throughout the fall and spring semesters. Additionally, a certified athletic trainer will be at all practices of the following sports throughout each week: fall volleyball, baseball, softball, men and women’s basketball, and rodeo. For other sports, practices will be supervised by a certified athletic trainer on most occasions. Whenever the event is unsupervised by a certified athletic trainer, there will be a staff certified athletic trainer on call if an emergency arises.

Also, there will always be a certified member of the athletic training staff at all home contests, whatever the sport.

Physician availability

Dr. William R. Simpkins, family practice team physician, will be available on Monday, Tuesday, and Thursday from 9:00am-12:00pm and 3:00-5:00pm, and on Wednesday and Friday from 9:00am until 12:00pm for referral of our athletes. He is also available to reach by phone at home at any time not specified by the above times.

Our Medical Director, Dr. Lyle Cain, and our other team orthopaedists, as well as fellows of Dr. James R. Andrews and Dr. Cain, will be available for patient evaluation and follow-up on each Wednesday of the fall semester and every other Wednesday of the spring semester from 9:00-11:00am. Additionally, they will be in attendance at all home and away football contests. One of the fellows will also be in attendance at our home rodeo contests.

Dr. James R. Andrews and Dr. Lyle Cain will be available for referral and evaluation at Alabama Sports Medicine & Orthopaedic Center at St. Vincents Hospital in Birmingham, AL on Monday through Friday from 9:00am until 5:00pm.

In an emergency situation, an athlete can be transported to either Hill Hospital in York, AL, Rush Foundation Hospital, Riley Memorial Hospital, or Jeff Anderson Regional Medical Center, all of Meridian, MS.

On occasion, an athlete may be transported to DCH Regional Medical Center in Tuscaloosa, AL or St. Vincents Hospital in Birmingham, AL.

All dental emergencies will be referred to, Dr. Darrell Hoggle, of Livingston, AL for evaluation. His office will be open from 9:00am until 4:30pm Monday-Thursday. He can also be reached at home for any referral outside of his regular office hours.
EMS Access to Tartt Baseball Field

Access Gate

Dugout Gates, Not Ambulance Accessible, but are accessible to stretcher when ambulance drives to area adjacent to the first base dugout.

Press Box

UWA Baseball Fieldhouse

Tart Field Parking Lot

Line Drive

Loop Road

EMS Route