Hello!

The following document is a fill in document for the creation of an emergency action plan for your school and has been developed based off of the [2002 “National Athletic Trainers’ Position Statement: Emergency Planning in Athletics](https://www.nata.org/sites/default/files/EmergencyPlanningInAthletics.pdf)”. Please fill out this document, the “EAP Template Fill-in”, with the appropriate information. The information provided in that short document will allow you to ‘fill in the blanks’ in this document to create a personalized and comprehensive emergency action plan (EAP) for your school.

Please note:

1. These documents combined are simply a template to help you get started to create an EAP. Please revise, remove, add items as you wish.
2. The “EAP Template Fill-in” will provide you with the name of the section the information should be placed and the page numbers prior to entry of information. Please note that the page numbers can and will change as you start to put in your information into this template.
3. *Within the EAP Template document, any words that are italicized and highlighted yellow are directions only and should be deleted prior to implementation of your EAP.*
4. Within the EAP Template document, words within brackets such as [School Name] are highlighted yellow and should be revised to match your school prior to implementation of your EAP.
5. The table of contents in the EAP Template is set using functions in Microsoft Word to match your document.
	1. When you have completed entering in the information, click on the table in the Table of Contents page, and click “Update Table”. Then click “Update Entire Table”; your table of contents should automatically be corrected.
	2. Should you choose to add sections to this document to match your school’s needs, title the section as you wish, and then from the “Home” button on Microsoft Word, click “Heading 1”. This will then allow the table to recognize a new section when you update the table with the instructions from “a” above.

We hope you find this Emergency Action Plan template to be helpful. Please contact the Korey Stringer Institute with any questions you may have.

KSI Staff

*DISCLAIMER: This emergency action plan is not considered medical or legal advice. All content is for informational purposes, and the Korey Stringer Institute makes no claim as to accuracy, legality or suitability. They Korey Stringer Institute shall not be held liable for any errors, omissions or for damages of any kind.*

Template Fill-In for Creation of EAP

PLEASE REMEMBER: This template is meant to be a starting point for secondary school athletics’ programs to utilize to create an emergency action plan. The template has been created based off the [2002 “National Athletic Trainers’ Position Statement: Emergency Planning in Athletics](https://www.nata.org/sites/default/files/EmergencyPlanningInAthletics.pdf)” and the suggested components of an EAP. Please revise this template as you see fit for your school.

Instructions: Fill in the necessary information in the below fields, as it pertains to your respective school. Each field corresponds to a field in the “EAP Template” document.

**School name (place in middle of page 1, header on page 2, and all other places where it says [SCHOOL NAME]):**

**Who is responsible for creating the plan? (place information on page 4):**

1.
2.
3.
4.
5.

**Chain of command with AT present (place information on page 10):**

*Example: AT, Team physician, head coach, assistant coach, nurse, athletic director, etc.*

1.
2.
3.
4.

**Chain of command without AT present (place information on page 10):**

*Example: Team physician, head coach, assistant coach, nurse, athletic director, etc.*

1.
2.
3.
4.

**Emergency Telephone Numbers (place information on page 10):**

1. Police department:
2. Fire and ambulance:
3. Nearest hospital:
	1. Where
	2. Name
	3. Phone number
4. Second nearest hospital:
	1. Where
	2. Name
	3. Phone number
5. Hazardous Materials:
6. Poison Control Center:
7. ATR number:
8. Nurse number:
9. AD number:
10. Main office number:
11. Admin office:
12. School counselor office:
13. AT:
14. AD:
15. Principal:
16. Asst. Principal:
17. Asst. Principal:
18. Nurse:

**Contact tree (revise information on page 11 to correspond to answers below)**

1. Life-Threatening (left side of tree)
	1. Who calls 911?
	2. Who gets the AED?
	3. After you call 911- do you call parent, AT or AD first? (circle the order below; then manipulate contact tree in EAP Template document to match your answer.
		1. Athletic trainer 1 2 3
		2. Athletic director 1 2 3
		3. Parent 1 2 3
2. Does the AD call the principal?
	1. Yes/No – manipulate contract tree (add or delete) “Call Principal” box based off answer
3. After situation is controlled:
	1. Who do you call? Nurse? Administration?
		1.
		2.
		3.
		4. [based on above response, place information at bottom of contact tree on page 12]

**Emergency equipment (placement page 12):**

1. Circle:
	1. AT Kit d. Emergency Bag g. Biohazard bags j. First Aid kit/materials
	2. AED e. Phone h. Inhaler k. Epi-pen
	3. Splints f. Spineboard/collar i. Biohazard bin l. Crutches
2. Where are they? (a=AT Kit, b = AED, etc.)
	1.
	2.
	3.
	4.
	5.
	6.
	7.
	8.
	9.
	10.
	11.

**Take a picture of your school floor plan from the fire drill sheet in each room (or if you have a PDF version from someone in the school, use that). Place the picture below. Use this symbol (copy and paste): and place where the AEDs are located in your school. (place this/these picture(s) on page 13 – add more pages of pictures if you need to)**

**Continue this process with different levels of the school, fields/tracks (screen shot pictures from google maps of your venues)**

**When is AT on site (copy information into first “Emergency Personnel” part of page 15)?**

Site specific EAPs – Every venue (practice field, game field, gym, track, weight room), that you host athletic events at should have their own venue specific EAP.

 *Place the information under “Emergency Procedures”. Specifically, site specific information, including address, directions and GPS coordinates should be included in part “C” under bullet “2)”: Instruct coach or bystander to call 911.*

 *Place athletic trainer information in “#7”if you have one, if you do not, delete.*

1. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
2. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
3. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
4. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
5. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
6. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
7. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
8. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
9. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
10. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
11. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
12. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
13. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
14. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
15. Location name:
	1. Address (including how EMS will access the field itself):
	2. Directions from nearest hospital:
	3. GPS Coordinates:
16. Add or remove sections depending on the number of fields/venues at your school.

**Rehearsal information (add information in on page 17; page numbers may be different at this point depending on how many venues you have, please find the “Rehearsal Strategy” header on the page and place information there):**

*Who is responsible for rehearsing the EAP? (i.e. athletic trainer, athletic director, coaches, etc.)*

*How often will your school rehearse the EAP? (i.e. annually)*

*Who will be responsible for leading the rehearsal of the EAP? (i.e. athletic trainer/athletic director)*

*Who will be responsible for documenting the rehearsal took place?*

*How will the rehearsal take place (i.e. PowerPoint presentation on EAP, followed by mock scenarios; random, unannounced drills)*

Additional Notes:

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