

# Emergency



# Action Plan



# CARY HIGH SCHOOL

Cary High School, 368 Walnut Street, Cary NC, 27511

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## Athletic Training Department

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Certified Athletic Trainer

6-25-2016

Please also review the “*Athletic Injuries-Illnesses Policies & Procedures*”  
regarding basic CPR & First Aid Treatment with Injury Information

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# *Important Medical / Emergency Phone Numbers*

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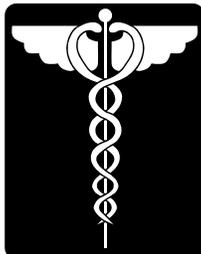
## Area Code (919)

School Contacts		Emergency Contacts	
<b>Cary High School</b>		<b>EMS</b>	<b>911</b>
Main Office	919-460-3549	Cary Police Department	<b>911</b>
Fax	919-460-3573	Cary Fire Department	<b>911</b>
Field House	919-460-3589	<b>Non-Emergency</b> (Police/Fire)	919-469-4012
<b>Principal</b>		<b>EMS/Ambulance</b>	<b>911</b>
Nolan Bryant	(office) 919-460-3555	<i>If in school dial 9, then 911</i>	
	(cell) 919-427-3230	<i>If on intercom phone dial 98*9, then 911</i>	
<b>Assistant Principals</b>			
Amanda Boshoff	(office) 919-460-3555	<b>TEAM PHYSICIAN's</b>	
	(cell) 919-239-9451	<b>Carolina Family Practice &amp; Sports Medicine</b>	
Steve Hayes	(office) 919-388-5203	Dr. Josh Bloom	919-238-2000
	(cell) 919-418-1414	<b>Cary Orthopedics</b>	
Keisha Rock	(office) 919-388-5266	Dr. Doug Martini	919-467-4992
	(cell) 919-672-8818		
Brett Smith	(office) 919- 460-3563	<b>HOSPITALS</b>	
	(cell) 919-622-4592	<b>Rex Hospital (Blue Ridge)</b>	919-784-3100 <b>Main</b>
	(cell2) 919-500-2533	<b>Emergency</b>	
Jamal Woods	(office) 919-460-3430		919-784-1615
	(cell) 919-924-8212	<b>Rex Healthcare (Lake Pine)</b>	919-387-3140
<b>Athletic Director</b>		<b>Western Wake</b>	919-350-2300
Mike Dunphy	(office) 919-460-3587	(Tryon / Kildare Farm)	
	(cell) 919-656-2523		
<b>Certified Athletic Trainer(s)</b>		<b>URGENT CARE</b>	
Athletic Training Room	919-460-3588	Doctors Urgent Care Cary	919-481-0277
Eric Hall	(office) 919-460-3588	Rex/Cary Urgent Care	919-387-3180
	(cell) 919-796-7829	Raleigh Urgent Care	919-231-3131
Abby Bennett	(cell) 919-274-0365	Garner Urgent Care	919-779-5010

**Coaches are strongly encouraged to always have access to a cell phone in the area of event.  
If no cell phone is available, the following phones are the closest options:**

Indoor Gym Facilities:  
Baseball / Softball Fields:  
Football Field / Track:

Athletic Offices / Athletic PE Building  
Athletic Offices / Athletic PE Building  
Athletic Offices / Field House



# ***EMERGENCY ACTION PLAN***

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ALWAYS BE OVER PREPARED and DECIDE TO ACT!

An **EMERGENCY** is defined as, “*an unforeseen combination of circumstances and the resulting state that calls for immediate action*”, and may arise at anytime during athletic on non-athletic events. Expedient action must be taken in order to provide the best possible care to the student-athlete in an emergency and/or life threatening conditions. The following is the Cary High School protocol which is to be used for emergency situations that may occur during an athletic practice and/or game. It is the staff’s responsibility, to review this protocol frequently so that they will understand and implement the proper procedure in order to ensure the appropriate care for all athletes in the event an emergency situation arises. Always err on the side of caution!

## ***General Protocol:***

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This protocol may vary according to who is in attendance at the practice / competition. In most instances, the Certified Athletic Trainer (ATC) will be on site. However, when the ATC is not present, the coach, who is ultimately responsible for the safety and care of the student-athlete, should take action and activate the Emergency Action Plan. Immediately following any emergency situation, the ATC, Athletic Director, and / or principal should be notified.

## ***Chain of Command for Medical Emergencies***

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Staff chain of command if present:

- Team Physician (If Present)
- Certified Athletic Trainer (ATC) - Head or Assistant ATC
- Athletic Director
- Head Coach
- Assistant Coach
- Student Assistant (can assist, but an adult above should make decisions)

1. The highest in the chain of command (on site) should always stay with the injured student-athlete.
2. If a cellular phone is not available, send the next person on the list to make the necessary phone calls.
3. If EMS has been called, designate someone (usually another adult or student-athlete) to go to the entrance of the school and direct the emergency vehicle to the proper location.
4. The highest in the chain of command should call the parent/custodian after EMS has arrived and the situation has been properly assessed and accurate information can be given.

## ***Activating the Emergency Medical Service (EMS)***

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The following information should be given when calling 911:

- Name, address (Cary High School - **638 Walnut Street**), and telephone number of caller.
- Description of the problem / injury / illness. Number of victim(s) involved & what happened.
- Condition of the victim(s). (ex. conscious/ unconscious, breathing, etc...)
- Report what emergency care or first aid treatment that has been administered.
- Name and description of the victim. (ex. age, gender, known medical conditions)
- Specific directions to locate the emergency scene (main gym, stadium, baseball field, etc...)
- Other information as requested by dispatcher
- Tell EMS operator that someone will direct them to the scene once they get to the property.
- **DO NOT HANG UP** until the dispatcher instructs the caller to do so.
- ***Anytime EMS has been called, notify the ATC / AD and or school administration.***

## **Emergency Communication**

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In the event of an emergency the Certified Athletic Trainer (ATC) and Athletic Director should be notified ASAP about the situation. A school administrator should be notified by the ATC, Athletic Director, or coach. Always err on the side of caution!

## **Calling Parents**

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*Call the student-athlete's parent/custodian whenever a serious injury occurs*, but after EMS has been contacted, the student-athlete has been treated, and the situation is under control. ***Always stay calm and give accurate information when informing the student-athlete's parent/custodian.*** Coaches should have and use the **Critical Contact Information Form** to obtain the contact information they need in the case of an emergency. This form will help EMS obtain the appropriate information as well. **Please keep these forms with available at all times.** This form contains the following:

- Parent / custodian names & number, allergies, asthma, & permission to treat
- Emergency contact other than parent / custodian

***\*Call and only release the student-athlete to their parents / custodians.\****

## ***Emergency Occurs ON / OFF Campus with / without ATC***

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The following below outlines the steps that should be taken in the event of an emergency occurring on / off campus when the ATC is or is not available. ***Always CALL EMS (911) first if necessary.***

### **EMERGENCY / INJURY occurs ON / OFF Campus:**

1. The most qualified staff member should use sound judgment for providing care of the injured student-athlete until other medical professionals arrive. *(The Coach is responsible until assistance arrives)*
2. ***\*Decide if EMS (911) should be called immediately and if the AED should be retrieved.\****
3. ***The coach or designee should contact the ATC / AD by phone or by sending messenger.***
4. The highest in the chain of command on site will provide care, direct the management of injury, and determine if EMS activation is necessary. If EMS is called, caller arranges for someone to meet and direct EMS to site of emergency.
5. Contact and inform the student-athlete's parents / custodians about the injury.
6. ***Transport in Ambulance:*** Decide if parent/custodian or coach accompanies student-athlete.
7. ***The ATC & Coach should always follow up with parents about the student-athlete's injury.***

### **EMERGENCY / INJURY occurs at ANOTHER SCHOOL (away competition):**

1. The most qualified staff member should use sound judgment for providing care of the injured student-athlete until other medical professionals arrive. *(The Coach is responsible until assistance arrives)*
2. ***\*Decide if EMS (911) should be called immediately and if the AED should be retrieved.\****
3. ***Contact that school's ATC / First Responder, Athletic Director, and/or staff for assistance.***
4. The highest in the chain of command on site will provide care, direct the management of injury, and determine if EMS activation is necessary. If EMS is called, caller arranges for someone to meet and direct EMS to site of emergency.
5. Contact and inform the student-athlete's parents / custodians about the injury.
6. ***Transport in Ambulance:*** Decide if parent/custodian or coach accompanies student-athlete.
7. ***Notify the Cary High School ATC / AD about the situation.***
8. ***The ATC & Coach should always follow up with parents about the student-athlete's injury.***

# ***Management of Suspected Head, Neck, and Back Injuries***

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Injuries to the head, neck or back can be devastating. Be cautious and take time to properly evaluate and manage these types of injuries.

## ***Trauma and Suspected Head Injuries (Concussions)***

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This section contains valuable information regarding how to treat head and/or neck injuries as well as signs and symptoms of a concussion. Please be aware that it is important to be cautious and thorough in evaluating, treating, and referral of these types of injuries. The NCHSAA requires all coaches to 1) read & sign the Gfeller-Waller Concussion Act form and 2) complete the concussions training through the NFHS “*Concussion in Sports*” course by all supervising coaches (AD checks certificate upon completion). ***Always contact the Certified Athletic Trainer (ATC), Athletic Director and the student-athletes parents/custodians when an injury occurs to the head and/or neck.***

## ***TRAUMA***

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Head, neck, and/or back injuries can be the most fatal and critical injuries that student-athletes sustain! If a head, neck, or back injury is suspected, tell the person **NOT TO MOVE** but respond verbally (avoiding head/neck movement) to verbal questions. The goal in caring for a person with a head, neck, or back injury is to minimize movement.

Signs and symptoms of a possible head, neck, and/or back injuries are listed below. If a student-athlete is experiencing any of these symptoms, the athlete should **NOT** be moved. Contact the Certified Athletic Trainer (ATC) immediately and let the ATC handle injury. If the ATC is not available, always err on the side of caution and call **Emergency Medical Service (EMS)**. If the student-athlete is unconscious or has an altered level of consciousness, check ABC’s and call the **Emergency Medical Service (EMS) 911 immediately!** Time is critical when dealing with head, neck, and/or back injuries! **Always check Airway, Breathing, and Circulation.**

### **Signals of Head, Neck, and Spine Trauma:**

- Change in consciousness
- Severe pain or pressure in the head, neck, or back
- Tingling or loss of sensation in the hands, fingers, feet, or toes
- Pain moving / shooting down arms and / or legs
- Partial or complete loss of movement of any body part
- Unusual bumps or depressions on the head or over the spine
- Blood or other fluids in the ears or nose
- Heavy external bleeding of the head, neck, or back
- Seizures
- Impaired breathing or vision as a result of injury
- Nausea or vomiting
- Persistent headache
- Loss of coordination & balance problems
- Bruising of the head, especially around the eyes or behind the ears

## ***Suspected Head Injuries (CONCUSSIONS)***

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Signs and symptoms of a possible concussion are listed below. If a student-athlete is experiencing any of these symptoms, the athlete **MUST be removed immediately from all participation**. If the ATC is available, contact him/her immediately so an evaluation can be performed. If the ATC is not accessible, contact the parent and recommend a prompt physician evaluation. *\*Any student-athlete with a suspected head injury (concussion) must see a licensed physician for evaluation and return to play clearance (on NCHSAA Return to Play Form).\* The student-athlete should NOT drive a motor vehicle at any time! Call and only release the student-athlete to their parents / custodian.\**

### **What is a concussion?**

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head
- Can change the way your brain normally works
- Can range from mild to severe
- Can occur during practices or games in any sport
- Can happen even if you haven't been knocked out
- Can be serious even if you've just been "dinged" or had your "bell rung"

### **What are the symptoms of a concussion?**

- Nausea (feeling that you might vomit)
- Balance problems or dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Headache and or Confusion
- Feeling sluggish, foggy or groggy
- Concentration or memory problems (forgetting game plays)

*If a head injury (concussion) occurs, inform ATC ASAP. School counselors, nurse, & teachers will be notified.*

## ***Management of Suspected Heat Related Illness***

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Signs and symptoms of a possible heat illness are listed below. If a student-athlete experiencing even one of these symptoms, the athlete **MUST immediately be removed from all participation**. If the ATC is available, contact him/her immediately so an evaluation can be performed. If the ATC is not accessible provide the following care. **Please note that if the athlete is unconscious or has an altered level of consciousness 911 should be called immediately.**

1. Place athlete in shade or in cooler area and remove excess clothing and equipment.
2. Provide cold fluid to drink, preferably water if conscious and alert.
3. **Cool the Athlete ASAP:**
  - a. **Mild:** Use cold shower, ice bags, or cold ice towels to cool athlete down.
  - b. **Severe: \*\* Ice Immersion\*\* (if available by ATC) or submerge the athlete's body in ice water for approximately 15 minutes. Never put the athletes' head under water. CALL 911.**
4. Monitor vital signs. If the athlete does not improve or their condition worsens, call 911.
5. Contact parents regardless of whether 911 have been called.
6. Contact ATC / AD to notify of incident.

### **Signs and Symptoms of Heat Illness:**

#### Early Stages (sometimes called heat exhaustion)

- Cool, moist, pale, ashen, or flushed skin
- Headache, nausea, dizziness
- Weakness, exhaustion

#### Late Stages (sometimes called heat stroke)

- Possible heavy sweating or vomiting
- Red, hot, dry skin
- Changes in level of consciousness / mental status

## ***Management of Cardiac Emergencies (Sudden Cardiac Arrest)***

**SUDDEN CARDIAC ARREST** is *“the sudden, unexpected loss of heart function, breathing and consciousness”* that *“usually results from an electrical disturbance in your heart that disrupts its pumping action, stopping blood flow to the rest of the body.”* A **HEART ATTACK** *“occurs when blood flow to a portion of the heart is blocked.”* A heart attack can lead to sudden cardiac arrest. The goal of initiating Cardio-Pulmonary Resuscitation is within 1 minute of collapse. The goal of “shock” from a defibrillator is within 3-5 minutes of collapse.

The following are signs and symptoms of a cardiac emergency. If a student-athlete is experiencing any of these symptoms, **call 911 immediately** because a cardiac problem may be occurring. If the ATC is available, contact him/her immediately so emergency care can be provided. If the staff is certified in CPR / AED / First Aid, provide appropriate care until EMS, ATC, or another professional rescuer arrives.

- Chest discomfort or persistent chest pain
- Jaw, neck, shoulder or arm pain
- Shortness of breath
- Nausea
- Lightheadedness
- Profuse sweating

## ***USE OF AUTOMATED EXTERNAL DEFIBRILLATOR (AED)***

An Automated External Defibrillator (AED) is *“a device about the size of a laptop computer that analyzes the heart's rhythm for any abnormalities and, if necessary, directs the rescuer to deliver an electrical shock to the victim. This shock, called defibrillation, may help the heart to reestablish an effective rhythm of its own”* (American Red Cross). The NCHSAA requires a Cardiac Safety Program consisting of three parts 1) an appropriate number of AED's are on campus (see below), 2) AED maintenance (monthly check sheet), & 3) required competition of the NFHS *“Sudden Cardiac Arrest”* course by all supervising adults. It is recommended that all coaches / volunteers become CPR / AED / First Aid certified through the American Red Cross or American Heart Association. ***All head coaches are required to be CPR/AED/First Aid certified by August 2017.***

### **AED Locations:**

1. **Attendance Office Room #1001** (in wall cabinet) in the 1000 Building.
2. **Outside Room #2216** (in wall cabinet) in 2000 building hallway near elevator.
3. **Outside Athletic Training Room** (in wall cabinet) between elevator & ATR.
4. In (Andrew Greene) **Field House** (in wall cabinet) in the Stadium Field House.
5. **Auditorium Lobby** (in wall cabinet) near male bathroom.
6. Possibly (2), In Athletic Training Room (on taping table) in gym area. (with LAX in Spring)

### **Steps to Take if Retrieving the AED**

1. Retrieve the AED ASAP from one of the locations listed above and contact EMS (911), ATC, AD, & school administrator ASAP. Individuals certified should use the AED on a victim.
2. Turn the AED **ON** while bringing it to the site of the emergency.
3. Apply AED pads and let device analyze victim to either deliver shock or administer CPR.
4. After use, return the AED to its proper location and contact the ATC about replacing pads.

***\* The AED will be on site for home competitions and possibly travel to Football & Lacrosse games.\****  
***\* If AED is “chirping” or has and damage contact the ATC immediately.***

## ***Management of Asthma (adapted from the Mayo Clinic)***

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**ASTHMA** “is a condition in which the airways narrow, swell and produce extra mucus. This can make breathing difficult and trigger coughing, wheezing and shortness of breath”. Asthma attacks may cause breathing difficulties and/or may lead to a life-threatening condition when not controlled. Signs and symptoms include shortness of breath, coughing, chest tightness or pain, whistling or wheezing sound when exhaling (wheezing is a common in children). Coughing or wheezing attacks that are worsened by a respiratory virus, such as a cold or the flu.

**For some people, asthma signs and symptoms flare up in certain situations:**

- **Exercise-induced asthma**, which may be worse when the air is cold and dry
- **Allergy-induced asthma**, triggered by particular allergens, such as pet dander, cockroaches or pollen

Documentation if a student-athlete’s has asthma should be on file with sports medicine coordinator (Certified Athletic Trainer) and known by the individual coach. The student-athlete who has asthma should have an inhaler readily accessible during games, practice, and or conditioning. ***The student-athlete (or coach) should carry the inhaler or inform the coach where it is located.*** If you observe a student-athlete experiencing an asthma attack, retrieve the inhaler and use as prescribed.

**When to call EMS (911) for further medical assistance.**

- Rapid worsening of shortness of breath or wheezing
- No improvement even after using a quick-relief inhaler, such as albuterol
- Shortness of breath when you are doing minimal physical activity

## ***Management of Anaphylaxis (adapted from the Mayo Clinic)***

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**ANAPHYLAXIS** is “*a severe, potentially life threatening allergic reaction*”. It can occur within seconds or minutes of exposure to something a person is allergic to, such as certain foods (peanuts), some medications, insect venom (bee) or latex. The body can go into shock, causing a drop in blood pressure and narrowing of the airway blocking normal breathing. Signs and symptoms include rapid, weak pulse, skin rash, nausea and / or vomiting. Anaphylaxis requires immediate medical attention by EMS and injection of epinephrine. If anaphylaxis is not treated right away, it can lead to unconsciousness or even death.

Documentation of a student-athlete’s known anaphylactic allergies should be on file with sports medicine coordinator (Certified Athletic Trainer) and known by the individual coach. The student-athlete with a known anaphylactic allergy should have rescue prescription medication (usually an epi-pen) readily accessible during games, practice, and or conditioning.

The Certified Athletic Trainer should have an extra supply of the rescue medication prescribed individually for each student as back-up. However this may not always be the case. Typically, student-athletes may carry their own medication (epi-pen). Periodically check the medication to see if it has expired before any emergency use..

If a student-athlete is experiencing an allergic reaction provide treatment and contact the ATC immediately. If the ATC is not accessible provide the following care. **Please note that if the athlete is unconscious or has an altered level of consciousness 911 should be called immediately.**

1. Determine if an exposure to an allergen has taken place.
2. Retrieve the student-athletes medication (epi-pen) if they have been prescribed one.
3. Let victim use or assist with the use of the Epi-pen.
4. Call EMS (911) ASAP.
5. Monitor ABC’s, vital signs, and student-athlete’s signs and symptoms.
6. Contact parents regardless of whether 911 have been called.
7. Contact ATC / AD to notify of incident.

# ***Management of Severe Weather – THUNDERSTORMS***

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*Recommendations from the National Federation of State High School Associations.*

1. Coaches, staff, and student-athletes participating in outdoor activity will attempt to be aware of the most recent local weather forecast.
2. Should conditions exist for a possible thunderstorm or other severe weather, the following chain of command will monitor the weather conditions during the event:
  - Certified Athletic Trainer (ATC) - Head or Assistant ATC
  - Athletic Director
  - Head Coach &/or Assistant Coach
3. In most cases the ATC (the designated monitor) will monitor and inform the coaches and staff about the weather forecast and possible impending severe weather. If the ATC is not present the staff should follow the chain of command regarding all weather making decisions. All staff should review this policy.
4. The staff, following the chain of command, will discuss with the game officials the impending severe weather plan prior to the start of the contest and any updates during competition.
5. If the National Weather Service issues a “Severe Weather Watch”, this will result in INTENSE MONITORING of conditions with high alert readiness, but will not result in an immediate cancellation of the event itself.

## **NFHS GUIDELINES ON HANDLING PRACTICES AND CONTESTS DURING LIGHTNING or THUNDER DISTURBANCES**

### **Proactive Planning**

1. Assign staff to monitor local weather conditions before and during practices and contests.
2. Develop an evacuation plan, including identification of appropriate nearby safe areas.
3. Develop criteria for suspension and resumption of play:

- a. **When thunder is heard or a cloud-to-ground lightning bolt is seen, the leading edge of the thunderstorm is close enough to strike your location with lightning. Suspend play for thirty minutes and take shelter immediately.**
- b. **Thirty-minute rule.** Once play has been suspended, wait at least 30 minutes after the last thunder is heard or flash of lightning is witnessed prior to resuming play.
- c. Any subsequent thunder or lightning after the beginning of the 30-minute count will reset the clock and another 30-minute count should begin.

**"Hear it,  
clear it -  
See it,  
flee it".**

4. Review annually with all administrators, coaches and game personnel.
5. Inform student athletes of the lightning policy at start of season.

For more detailed information, refer to the "Lightning Safety" section contained in the NFHS Sports Medicine Handbook. **Revised and Approved October 2014**

7. If evacuation must take place, a public announcement will be made alerting all players and spectators to immediately vacate the area and go to the nearest indoor facility, such as the school’s main gymnasium, auxiliary gymnasium, cafeteria or automobile.
8. Following the initial 30 minutes, re-assessments will be made by the ATC and/or coach and game officials to determine if conditions are appropriate for resumption of play.

# ***Management of Severe Weather – TORNADOS***

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1. Continue to follow the guidelines for Management of Severe Weather (Thunderstorms) above.
2. A severe weather “WATCH” for a tornado means that conditions are favorable for a tornado to occur.
3. A severe weather “WARNING” for a tornado means that a tornado has been spotted and is in the area.
  - a. If a “TORNADO WATCH” has been issued for Wake County, all athletic teams can continue to practice or compete, but the weather conditions should continued to be monitored. If a team is outside and the weather conditions are worsening, then they should move indoors.
  - b. If a “TORNADO WARNING” has been issued for Wake County, all athletic teams **MUST** clear the field / gym and take shelter in the lowest lying building area away from windows and doors.

## ***Transportation of the Student-Athlete to the Hospital:***

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1. Seriously injured student-athletes will be transportation to the hospital via ambulance. If the injury is not serious in nature (as determined by the Certified Athletic Trainer [ATC]), the student-athlete may travel with their parent/custodian to the hospital.
2. If an athlete is transported to the hospital, a coach, parent/custodian, or responsible adult must accompany them. The ATC will not accompany the athlete to the hospital due to responsibilities with the other teams still participating at Cary High School.
3. It is recommended that the student-athlete's insurance information accompany the athlete to the hospital. This can be retrieved from the **Critical Contact Information Form**.
4. The student-athlete's parents/custodians will **ALWAYS** be contacted when a serious injury occurs or EMS is called.

## ***Return to Play Criteria***

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1. Return to Play Criteria is a joint decision made by numerous individuals. If any of the following individuals determines that the injured student-athlete is not fit to return to play or that the student-athlete's activity level needs to be modified, their decision must be adhered to.
  - Licensed Physician, Physician Assistant, Nurse Practitioner, Certified Athletic Trainer, Physical Therapist, Athletic Director, Head Coach, Parent/Custodian, or the injured student-athlete
2. Any student-athlete that has sustained any injury is solely at the decision of the Team Physician (if present) and/or ATC when returning to play during practice or competition.
3. Any student-athlete who is evaluated by a medical professional **MUST** bring in documentation regarding clearance or limitations for participation to the ATC and Coaches will be notified.
4. Any student-athlete who is suspected of or has had a concussion **MUST** see a licensed physician for evaluation. The student-athlete **MUST** bring the ATC and coach written documentation regarding physical status and athletic clearance **BEFORE** resuming participation.
5. The ATC, coach, & student-athlete will abide by the medical professional's documentation regarding the student-athlete's return to activity & or limitations for participation.
6. If the student-athlete has not been seen by a medical professional or has no direct recommendations from a healthcare professional, the ATC will make the decision as to when the athlete can return to play. The ATC's decision is **FINAL** until the student-athlete is seen by a medical professional.

### *Consequences for not following the above policy:*

1. The names of the coach(s) found allowing student-athletes who are medically or physically ineligible, not adhering to the **Return to Play Criteria**, or not adhering to a return to a modified activity level, will immediately be submitted to the Cary Athletic Director, Principal, and Wake County Public Schools Athletic Director.
2. Failure to adhere to the above criteria may also result in a personal liability suit.

# ***Emergency Directions to Cary High School***

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***638 Walnut Street, Cary, NC 27511***

*In Most cases have EMS enter the Cary High School Campus through the Maynard Street entrance near the main football stadium.*

## **Athletic Training Room & (Charlie Adams Gymnasium) Main Gym**

Use the “white dome building” or main gym as a reference. Have EMS arrive at the side of the main gym closest to the PE lobby entrance. Have someone waiting outside the main gym to direct the EMS into the school using the ramp near the main gym. Direct EMS personnel to the Athletic Training Room or main gym.

## **Baseball & Softball Fields**

Use the “white dome building” or main gym as a reference. Have EMS go to the left of the main buildings and proceed to the baseball or softball fields respectively. Have someone waiting near the corner of the gym buildings near the baseball field (gate to access road) to meet EMS. Direct EMS personnel to the appropriate location.

## **Main Stadium (Football / Soccer / Lacrosse Field & Track)**

### ***Option 1) Meet at Concession Stand***

Have someone waiting outside the concession stand at the football stadium to meet EMS when they arrive. Direct EMS personnel to the appropriate location. Use entrance all spectators use to gain access to the field / track. If EMS vehicle needs to gain access to the field, then they should enter using gates near the Maynard Street / Jim Valvano Drive.

### ***Option 2) Meet at Gates near Men’s Locker Room in Field House***

Have someone waiting near the corner of the Maynard Street / Jim Valvano Drive to meet EMS when they arrive at stadium. Direct EMS personnel to the appropriate location. Use the gates near the Maynard Street entrance if necessary for EMS vehicle access to go directly to the field.

## **Auxiliary Gym & Wrestling Room (Mat Room)**

Use the “white dome building” or main gym as a reference. Have EMS arrive at the side of the auxiliary gym or mat room using the access road near baseball field. Have someone waiting outside the main gym to direct the EMS around to the side of the buildings near the baseball field using the access road. Direct EMS personnel to the appropriate location using outside doors to rooms as the entrance.

# MAP of CARY HIGH SCHOOL

638 Walnut Street

Cary, NC 27511

