

**Sulphur Springs Independent School District: Gerald Prim Football Stadium**  
**Emergency Action Plan**  
**Revised 05/20/26**



**Gerald “Prim” Stadium; ADDRESS: 1000 Houston St**  
**Sulphur Springs, TX 75482**

In July or August of each school year the SSISD sports medicine staff will meet with all coaches employed in the district during the upcoming school year to educate, practice, and rehearse the content of this emergency action plan. All student athletic trainers who are enrolled in the student athletic training program will be trained and familiarized with the information presented in the plan during the annual student athletic training bootcamp before practice starts in July. Game officials and referees should review the plan at the beginning of each game event.

**Personnel**

Proper medical coverage will be in attendance at UIL sanctioned athletics events hosted at the Prim at all times. The medical coverage will include at minimum, one certified athletic trainer, two student athletic trainers. For UIL varsity football games 2 emergency medical technicians will be present and at least one should be certified at the Advanced-EMT level.

**Chain of Command**

The Head Athletic Trainer of the respective team in which the injury has occurred is the highest and primary form of contact in the event of injury. The EMT and physician present will work in close connection with the Athletic Trainer and may take control as the head of the chain of command at any point at the discretion of the athletic trainer. The chain of command will follow with Coaches and student athletic trainers. The referee official will work in conjunction with both the head athletic trainer and the campus administrator of Gerald Prim Stadium. All other parties at the event including fans, spectators, employees, and third parties will follow under the command of the campus administrator.

Important Emergency Contacts & Phone Numbers		
Razzariya Wilson	Athletic Trainer	
Bailee Chapman	Athletic Trainer	
Riley Eisenberg	Athletic Trainer	
Athletic Trainer's Office		Office: 903-885-2158 Ext. 2290 or 2291
Brandon Faircloth	Athletic Director	Office: 903-885-2185 Ext. 2270
Bailey Dorner	Athletic Coordinator	
Christus Hospital		Office: 903-885-7671
Campus Administrator: Darius Ingram Michael Rhoades Kathy Wright Demetra Robinson Jodi Andoe Steve Carter Awbree Summers		

### **Roles and Responsibilities**

- A. The certified athletic trainer is the primary point of care and should assume responsibility of providing care in any medical emergency that takes place during the game.
- B. The athletic training student will follow under the direction of their certified athletic trainer and aid them in providing care in the capacity allowed within their qualifications and certifications. Including retrieving medical supplies and the AED.
- C. The emergency medical technician (EMT) provides emergency medical care that supersedes the scope of coverage of the athletic trainer. As well as provide safe transportation to all emergency care facilities.
- D. A Christus Healthcare physician/provider may be present at athletic events but are not required to be present at all events. When a physician is present they will work alongside the athletic trainer and assume responsibility of providing care in any medical emergency that takes place during the game.
- E. The Coaches are responsible for maintaining composure within their team, all non-involved athletes of the emergency should abide by their guidance.
- F. SSISD Campus Administration is responsible for monitoring spectators, fans, and all other non-involved parties should abide by their guidance. They are responsible for guiding all non-team members in the event of emergency as well as aiding in the gathering of emergency equipment.
- G. The referee officials are responsible for monitoring the game and allowing adequate time for medical personnel to assess and resolve emergency situations.

### **Communication**

The primary means of communication will be through a rechargeable battery-powered walkie talkie. The head athletic trainers of each team, campus administrator, and the EMT will all have one walkie talkie that should be carried on their persons at all times. Two fully charged spare batteries will be kept in emergency kits at all times in the event that one battery loses charge.

Additionally all athletic trainers, coaches, physicians, referees, campus administrators, and student athletic trainers should carry a mobile cell phone on them at all times as a backup form of communication.

The walkie talkie will be used as immediate means for communication during an emergency. The walkie talkies will be on channel 3 for all emergency communication; it will also be used to contact EMS services and to summon them onto the field during an emergency.

Athletic trainers will be responsible for communicating all injury information. Once the emergency has resolved the athletic trainer will communicate the details of the medical information to the patient's parents and/or guardians.

All occurrences of emergency should be recorded and documented on the SSISD Emergency injury report form. Multiple copies have been included with this EAP. The documentation should list the details of the emergency in its entirety from the start of occurrence until they are transported to the emergency or the emergency has been resolved under medical care at the field. The documentation should only use standardized medical abbreviations and shorthand. Athletic trainers should retain all medical records and individualized information for their respective athletes.

### **Equipment**

At the time of the event each athletic trainer should have an athletic training kit on or nearby their person. The athletic training kits should obtain medical supplies and the emergency medication of any patients that have pre-existing conditions.

An AED and AED supplies; gloves, razor, scissors, CPR mask, anti-septic wipes, and gauze pads, are permanently located in the home locker room. There will be an emergency equipment kit on the home sideline for all competition events. Emergency equipment kit will include an

- AED
- Airway management supplies
- Head immobilization
- Splints for extremities
- Oxygen tank and appropriate administrations supplies
- Pulse oximeter
- Cervical collar
- First aid Kit
- Blood Pressure cuff and stethoscope
- Shears
- Spine board
- CPR pocket mask
- Bag-valve mask
- Football helmet removal tools

The emergency kit equipment should only be used by the EMT or Certified Athletic trainer with the exception of the AED, First aid Kit, and CPR pocket mask. All three pieces of equipment

may be used by student trainers, coaches, or officials as long as they have completed the proper training and certification to use equipment.

### **Transportation**

EMS will access the stadium from Houston St. Coming from the East end of Houston Street they will take a left to access the home side stadium parking lot. Coming from the west end of Houston street they will take a right to access the home side stadium parking lot. EMS will use the gates at the north end of the parking lot. Once EMS has reached the gates leading to the field, EMS will reverse into the concourse and park there for the duration of the game. The gate separating the field and the parked location of EMS should be unlocked and open to allow easy access for the ambulance to drive onto the field in case of emergency.

In case a Level 1 trauma occurs the patient will be taken to Medical City Plano Hospital. For all other hospital needs they will be taken to the Level 4 trauma center at CHRISTUS Mother Frances Hospital.

CHRISTUS Mother Frances Hospital 115 Airport Rd, Sulphur Springs, TX 75482.

To access the Level 4 trauma center from the facility exit the parking lot and turn left onto Houston Street, take a slight right turn on Hillcrest Drive. Finally take another slight right turn onto Airport Road. EMS will approach the hospital from the left side and they should follow the hospital signs to access the emergency room.

Medical City Plano Hospital 3901 W 15th St, Plano, TX 75075

To access the Level 1 trauma center from the facility exit the parking lot and turn left onto Houston Street, take a left turn on Hillcrest Drive followed by another slight right turn on Main street. Then take a slight left turn onto I30 frontage road where they will then merge onto I30 west towards Plano.

### **Components**

#### **Bloodborne Pathogen Addendum**

- Follow the bloodborne pathogen addendum as recommended by OSHA standards
- Before approaching any bleeding use protective measure (e.g gloves)
- Properly dispose of all contaminated objects and products
- Wash all exposed areas with soap and warm water

#### **Emergency Management of:**

##### A. Heat Illness

###### a. Heat Exhaustion

- Move athlete to a cool and shaded area
- Remove excess clothing/equipment
- Use cooling techniques to cool athlete (e.g. cold towel, ice packs, and fan)
- Check Vitals (pulse, blood pressure, respiration rate, and temperature)
- Rehydrate athletes by replenishing electrolytes and fluids
- Lay athlete in a supine position with feet elevated

###### b. Heat cramps

- Move athlete to a cool and shaded area
- Apply stretching and massaging to body part that is cramping

- Provide additional sodium ( $Na^+$ ) or other electrolytes as needed
  - Monitor frequency and occurrence. If cramps do not subside or begin to occur in multiple areas immediately call EMS.
- c. Heat stroke
- Call EMS immediately
  - Take rectal temperature within four minutes of collapse (the higher the temperature the more urgency should be used in care)
  - Immediately place the athlete in a cold water and ice immersion
  - Recheck/monitor rectal temperature at 5-10 minute intervals
  - Remove excess clothing and equipment while athlete is in cold water immersion
    - Water needs to be circulated every few minutes to dissipate heat while patient is in the tub
  - Do not transport athlete to hospital until temperature is below  $103^\circ F$
- B. Cardiac Arrest
- Call EMS
  - Retrieve AED and follow verbal instructions
  - Begin CPR
- C. Respiratory Arrest
- a. Asthma Attack
- Move the athletes into a well-ventilated environment
  - Measure peak expiratory flow
  - If flow is below 15% of baseline, have the athlete use prescribed inhaler 2-3 times
  - Monitor airway and breathing for 15 minutes
  - Remeasure peak expiratory flow and administer additional inhaler medication if needed
  - If the patient's conditions do not improve, call EMS immediately
- b. Anaphylaxis
- Call EMS immediately
  - Assess airway, breathing, and circulation and continuously monitor them
  - Administer EPI-pen
  - Place patient in a comfortable position until EMS arrives, which can be sitting or laying down with feet elevated, if their blood pressure drops
  - Remove the allergen if possible
  - Notify someone to retrieve the AED in case athlete goes into shock or cardiac arrest occurs
  - Keep the athlete still and in a stable position
- D. Diabetes
- a. Mild Hypoglycemia
- Remove athlete from exercise
  - Give 15-20 grams of fast-acting carbohydrates
  - Repeat if no response after 15 minutes
  - If the patient does not respond at all to treatment, call EMS
- b. Severe Hypoglycemia
- Call EMS immediately

- Use injectable glucagon kit
- E. Sickle cell trait collapse
  - Immediately call EMS
  - Retrieve AED and be prepared to use it if required
  - Check Vitals (pulse, blood pressure, respiration rate, and temperature)
  - Provide supplemental oxygen
- F. Inclement weather
  - Immediately seek shelter in the home or visiting team locker room
  - a. Lighting
    - Move patient to safe location
    - Indirect strike
      - Assess for injuries
      - Evaluate patient for possible concussion like symptoms
    - Direct strike
      - Check Vitals (pulse, blood pressure, respiration rate, and temperature)
      - Do not follow the idea of triage and instead care for patients that appear to be dead
      - Retrieve AED and be prepared to use it if required
      - Begin CPR if needed
      - Time is of the essence in cases of a direct strike
  - b. Tornados
    - If tornado warning sign is initiated immediately seek shelter
    - The “home” team should take shelter in the home locker room. The “visiting” team should take shelter in the visiting team locker room. The officials and additional parties on the field should take shelter in whichever shelter room is closest to them.

### **Work Cited**

Casa, D. & Stearns R. (2015). Emergency Management for Sport and Physical Activity. Jones & Bartlett Learning, Burlington, Massachusetts.

National Athletic Trainers' Association. (2002). National Athletic Trainers' Association Position Statement: Emergency Planning in Athletics. *Journal of Athletic Training*, 37(1):99-104.

National Athletic Trainers' Association. (2015). National Athletic Trainers' Association Position Statement: Exertional Heat Illnesses. *Journal of Athletic Training*, 50(9):986-1000. 16

Occupational Safety and Health Administration. OSHA Fact Sheet: OSHA's Bloodborne

Pathogens Standard. Retrieved from

<https://www.osha.gov/sites/default/files/publications/bbfact01.pdf>