

**Sulphur Springs Independent School District: SSMS Tennis Complex**  
**Emergency Action Plan**  
**Revised 05/20/2026**



**SSMS Tennis Complex; ADDRESS: 835 Wildcat Way**  
Sulphur Springs, TX 75482 (Use Wisenbaker Lane to access tennis courts)

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 not be present at all practices but will be available. To be available means that, at a minimum, medical personnel can be contacted at any time during the practice via telephone, messaging, email, beeper or other immediate communication means and that the case can be discussed through such communication, and immediate arrangements can be made for the athlete to be evaluated.

**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 SSMS Tennis Complex 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. 3390
Brandon Fairecloth	SSISD Athletic Director	Office: 903-885-2185 Ext. 2270
Trevor Toppings	Boys Athletic Coordinator	
Nickie Pannell	Girls Athletic Coordinator	
Christus Hospital		Office: 903-885-7671
Campus Administrator: Sam Harvey Jeremy Scroggins Travis Moore Jill Smith		

### **Roles and Responsibilities**

- A. The athletic trainer is the primary point of care and should assume responsibility for providing care in any medical emergency that takes place during the game.
- B. When an athletic trainer is not present the Athletic coordinators are responsible for activating the emergency procedures and following the content of this document in its entirety.
- C. The assistant coaches are responsible for maintaining composure within their team, all non-involved athletes of the emergency should abide by their guidance.
- D. SSMS 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.

### **Communication**

The primary means of communication will be through personal or school-issued cellphone devices. The athletic trainers, athletic coordinators, coaches, and campus administrators should all have their cell phone carried on their persons at all times.

The athletic trainer, if present, and athletic coordinators 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 a standardized form. 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.

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**

An AED and AED supplies; gloves, razor, scissors, CPR mask, anti-septic wipes, and gauze pads, are permanently located on the side of the tennis concession stand between the football field and tennis courts. There will be one emergency equipment kit located in the SSMS athletic training room. One emergency kit will be in the concession stand building; this kit will only include the contents marked by the \*. Emergency equipment kit will include an

- 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, CPR pocket mask, helmet removal tools, pulse oximeter, BP cuffs, and shears. 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 Wisenbaker Lane. Coming from the East end of Wildcat Way they will take a left on Wisenbaker Lane to access the parking lot. Coming from the west end of Wildcat Way they will take a right to access the parking lot. Drive down the back of the parking lot towards the tennis complex and stop by the main gate on the east end of the tennis complex. EMS will enter the tennis courts on foot from there.

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 Hwy 11, take a right onto TX-19. Next, turn right on Airport Rd; then a quick turn left onto N Davis St. Finally take another slight right turn on Memorial Dr. 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 TX-11 W; turn right onto TX-19. Next, take the exit towards Dallas; then turn right onto I30 frontage road, then take the I30 W ramp on the left to merge onto I30 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 ° 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

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Pathogens Standard. Retrieved from

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