# Table of Contents:

- Important Contacts: ................................................................. 3
- Hospitals/Emergency Rooms in the Area: ................................................................. 3
- Emergency Personnel: ........................................................................ 4
- Emergency Communications: .............................................................. 4
- Emergency Equipment: ...................................................................... 4
- Role of Personnel: ........................................................................... 4
- Emergency Procedure: ....................................................................... 5
- Life Threatening Situation: ................................................................. 6
- AED Locations: .................................................................................. 7
- Venue Specific Directions: ................................................................. 7
- Heat Policy: ...................................................................................... 9
- Inclement Weather Policy: ................................................................. 10
- Concussion Management Policy: ......................................................... 11
  - Return to Learn Protocol: ................................................................. 12
  - 5-Step Gradual Exertional Return to Play Protocol: ................................. 15
- Sickle Cell Trait Policy: ................................................................. 16
- Athletic Trainer Coverage Policies: ....................................................... 16
- Campus Map: ..................................................................................... 17
**Important Contacts:**

<table>
<thead>
<tr>
<th>Important Contact</th>
<th>Name</th>
<th>Contact Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Management Services</td>
<td></td>
<td>911</td>
</tr>
<tr>
<td>Campus Switchboard (8:30am-10:30pm)</td>
<td></td>
<td>540-672-3900 or “0” from campus phone</td>
</tr>
<tr>
<td>Campus Gate House</td>
<td></td>
<td>540-672-9110</td>
</tr>
<tr>
<td>Head Athletic Trainer</td>
<td>Brad Jones, M.Ed, ATC</td>
<td>540-672-6726 (o)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>540-406-7322(cell)</td>
</tr>
<tr>
<td>Associate Athletic Trainer</td>
<td>Mike Reinhard, ATC</td>
<td>540-672-6726 (o)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>610-906-6768(cell)</td>
</tr>
<tr>
<td>Director of Health Services</td>
<td>Tammy Firman, RN</td>
<td>540-672-6017(o)</td>
</tr>
<tr>
<td>Memorial Infirmary</td>
<td></td>
<td>540-672-0081(h)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>540-661-2053(cell)</td>
</tr>
<tr>
<td>Athletic Director</td>
<td>Matt Blundin</td>
<td>540-672-6067(o)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>540-920-9454 (cell)</td>
</tr>
<tr>
<td>Associate Athletic Director</td>
<td>Scott Braswell</td>
<td>540-672-6064(o)</td>
</tr>
<tr>
<td>Director of Summer Programs</td>
<td>Janet Lewis</td>
<td>540-718-2811(cell)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>540-672-6044(o)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>540-948-7102(h)</td>
</tr>
<tr>
<td>Assistant Headmaster, Dean of Students</td>
<td>Joe Coleman</td>
<td>540-409-1692(cell)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>540-672-6051(o)</td>
</tr>
<tr>
<td>School Physician</td>
<td></td>
<td>540-672-3010(o)</td>
</tr>
<tr>
<td>Orange Family Physicians</td>
<td></td>
<td>After hours answering service: 877-523-5826</td>
</tr>
<tr>
<td>13198 James Madison Highway, Orange, VA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22960</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UVA Orthopedics Culpeper</td>
<td></td>
<td>540-321-3120</td>
</tr>
<tr>
<td>541 Sunset Lane, Suite 303, Culpeper, VA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22701</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Hospitals/Emergency Rooms in the Area:**

**Culpeper:** *Culpeper Regional Hospital*: 501 Sunset Ln Culpeper, Virginia CRH Emergency Department, (540) 829-4189

**Charlottesville:** *UVA Health*: 1215 Lee St Charlottesville, Virginia (434) 924-2231

**Martha Jefferson Hospital**: 500 Martha Jefferson Dr Charlottesville, Virginia (434) 982-7000
**Emergency Personnel:**
There will be a Certified Athletic Trainer (ATC) or Registered Nurse (RN) on site for all home contests and all full contact, partial contact and noncontact sport practices held on campus.

*Each coach is required to be up to date on CPR and AED Certifications*

**Emergency Communications:**
ATC’s and RN can be contacted via Woodberry Forest School Radio and/or a personal cellular phone. Fixed telephones can be found in all campus buildings. Press 0 to reach the switchboard, who can direct your call to the appropriate personnel. If dialing to an out of network number, dial 9 followed by phone number.

**Emergency Equipment:**
Games: Emergency equipment located on home sideline include vacuum splints, AED, and facemask removal tool, bloodborne pathogen supplies and first aid kit
Practice: Blood borne pathogen supplies, first aid kit and AED are available and will be kept with the ATC

**Role of Personnel:**
(Prior to athletic events a pre-event “Time out” should be conducted to ensure the Emergency Action Plan is reviewed and to assign roles with the personnel and equipment available for that event)

- Immediate care of the Athlete: ATC
- Call Emergency Medical System (EMS): ATC or personnel assigned by ATC
  If EMS is called for an emergency, the Infirmary and Gate House need to be notified
- Emergency Equipment Retrieval: Coach or team manager assigned by ATC
- Meet EMS personnel at Gate House and/or venue: AM or Duty Team Member
- Scene Control: Limit emergency scene to those providing first aid and move bystanders away from area: Coaches and/or Duty Team Member(s)

**While on the phone with 911:**
- Stay calm and state your emergency
- Speak loudly and clearly. Give the 9-1-1 operator your name, phone number and the address and location where help is needed. WFS Address: 898 Woodberry Forest Dr. Woodberry Forest, VA, 22989
- Be sure to give the name of the building/field/area where help is needed. This may require giving directions to the area, provided on Venue Specific EAPs.
- Answer the 911 operator’s questions. Stay on the telephone if it's safe to do so, and don't hang up until the 911 operator tells you to.
Emergency Procedure:

- Security at the Gate House will meet the ambulance and direct them to the proper location. A Woodberry Forest School Faculty/Staff member will be directed to flag down the ambulance at the desired location. Woodberry Forest Faculty/Staff members will be responsible for keeping spectators away, in the stands and/or off the fields, in addition to directing them as necessary.

- Upon arriving at the scene, the ATC will complete an initial survey of the athlete’s ability to circulate blood sustain a clear airway and breath (CAB), pulse, level of consciousness, etc. Do not move the victim without proper medical direction. Doing so may cause further injury. Stabilize the athlete’s c-spine or position found and care with AED, CPR, First Aid, etc. until EMS arrives.

- Because removal of athletic equipment such as helmet and shoulder pads may cause unwanted movement of the cervical spine, removal of helmet and shoulder pads should be deferred until the athlete has been transported to an emergency medical facility, except under specifically appropriate circumstances. The first exception is if the helmet is not properly fitted to prevent movement of the head independent of the helmet. This is imperative, because when the helmet is left in place, it is responsible for securing the head, and, as such, immobilization of the helmet necessarily results in immobilization of the head. The second exception is if the equipment prevents neutral alignment of the cervical spine or airway access.

- Begin CPR if necessary and if certified to do so. Only those trained in the use of an AED are qualified to use it.

- Once EMS arrives, they will bring the stretcher from the ambulance to the respective location. At this point, spine boarding/preparing for transportation will take place. Spine boarding prior to this time would only happen if five or more medical professionals are present or if the location of the athlete would put either them or the rescuers at danger.

- After the athlete is on the stretcher and strapped in, the athlete is now under the EMS rescuers’ care.

- It is Woodberry Forest School policy that a school faculty member will accompany the injured athlete to the hospital if the athlete is taken by ambulance. It is preferred that an athletic trainer or physician travels with the athlete in the event that equipment needs to be removed by emergency department personnel. This is such that the athletic trainer is most familiar with the equipment being removed. If a visiting athlete is injured and transported via ambulance, one of the visiting coaches/staff members will be asked to travel with the athlete.

- If the injured athlete is from a visiting team, the ATC on duty will contact the visiting team’s ATC to alert him/her of the situation and ask them to follow up with the athlete upon his/her return.
• An On-Field Evaluation Note will be written by the ATC.
• The ATC will follow up with the athlete once they return to school to go over future plans of treatment.

**Life Threatening Situation:**
In addition to the steps outlined above, the following steps need to followed if a situation is determined to be life threatening.

• Additional personnel to contact:
  ○ Dean of Students
  ○ Dean of Residential Life
  ○ Headmaster
  ○ Chaplain
  ○ Head of Maintenance

• Everyone other than those involved in the emergency situation need to stay off of the radio
• If Medevac by helicopter is determined necessary for transportation by EMS crew, appropriate personnel will be assigned to clear area for helicopter landing and transfer of athlete.

**AED Locations:**
*Manning Science Building (near the Craigie Road entrance just inside both sets of double doors to your left)
Dick Gym (bottom floor, on wall near the training room)
Barbee Center (near the entrance doors)
Outdoor Pool (on the wall near the entrance - can be accessed even when the pool is closed)
Infirmary (just inside the ramp door)
Walker Building (across from the Switchboard)
Dowd Finch (main foyer)
Walker Center (near pull station at stairwell)
Armfield (next to pull station on main level)
Maintenance Shop
Keenan Hall (2) (1.near lobby entrance of dining room, 2. Top floor at entrance of East staircase)

*A portable AED will be with ATC at all Woodberry Forest School contact events*
Venue Directions:

Barbee Center: To access the Barbee Center the ambulance may either park to the side of the building near the two large doors that access the maintenance room or park in front of the building at access the building through the two front doors. The best option will be determined by the ATC or RN on site. A Woodberry Forest School Faculty/Staff member will need to be in front of the Barbee Center on Woodberry Forest Rd to direct the ambulance.

Baseball Practice Field: To access the JV Baseball practice field, the ambulance must use the access road that leads to the parking lot located behind and North-West of the Barbee Center. A Woodberry Forest School Faculty/Staff member will need to be at the corner of the access road and Woodberry Forest Rd. to direct the ambulance.

Climbing Gym: To access the Climbing Gym, in the lower level of the Dick Gym, a Woodberry Forest School Faculty/Staff member will need to be in front of the Dick Gym in the parking lot on Woodberry Forest Rd. EMS crews will be directed to use the double doors underneath the main Dick Gym steps. Access down to the Climbing facility will be best determined by EMS and ATC on site.

Finch Track: To access Finch Track, a Woodberry Forest School Faculty/Staff member will need to be at the corner of the access road next to the track and Woodberry Forest Rd and direct the ambulance to where the emergency has occurred.

Gillespie Field (Lower Turf): To access Gillespie Field, the ambulance will need to pull into the desired path at the East End of the field. A Woodberry Forest School Faculty/Staff member will need to at this location to direct the ambulance.

Glover Fitness Center: To access the Glover Fitness Center, the ambulance will be directed to go to the parking lot located behind the Dick Gymnasium and EMS may access the Fitness Center through doors on the South-East section of the building in between the Fitness Center and Grainger Field. A Woodberry Forest School Faculty/Staff member will need to be at the corner of the parking lot and Woodberry Forest Rd. to direct the ambulance.

Grainger Field: To access Grainger Field, the ambulance must turn left on Woodberry Forest Rd at the top of the hill by the Walker Building. A Woodberry Forest School Faculty/Staff member will need to be at the turn at the top of the hill, in front of the Walker Building on Woodberry Forest Rd. to direct the ambulance. Parking of the ambulance will be determined by the driver on Woodberry Forest Rd. Grainger Field may also be accessed from the parking lot located behind the Dick Gymnasium. The best option will be determined by the ATC or RN on site.

Hazel Fields: To access the Hazel Fields, the ambulance must use the access road that leads to the parking lot located behind and North-West of the Barbee Center. The ambulance may be able to get closer, road conditions pending by using the access road to the practice fields and cow
pastures. A Woodberry Forest School Faculty/Staff member will need to be at the corner of the access road and Woodberry Forest Rd. to direct the ambulance.

**Johnson Stadium/Hanes Field:** To access Johnson Stadium, the ambulance must turn RIGHT off of Woodberry Forest Rd. and enter the field through gate located at the North East end of the field across from the Barbee Center. A Woodberry Forest School Faculty/Staff member will need to be at the North East corner of the field on Woodberry Forest Rd. to direct the ambulance.

**L.W. Dick Gymnasium:** To access the Dick Gymnasium, the ambulance will be directed to go to the parking lot located behind the Gymnasium and EMS may access the gym through the double doors that lead directly onto the court. A Woodberry Forest School Faculty/Staff member will need to be at the corner of the parking lot and Woodberry Forest Rd. to direct the ambulance.

**Lower Tennis Courts:** To access the Lower Tennis Courts, the ambulance must turn RIGHT onto Tiger Dr. off of Woodberry Forest Rd. They then must turn RIGHT onto the access road behind Johnson Stadium, pass by the Squash Pavilion and into the parking lot. A Woodberry Forest School Faculty/Staff member will need to be at the corner of Tiger Dr. and Woodberry Forest Rd. to direct the ambulance. A second Woodberry Forest School Faculty/Staff member will need to be at the corner of Tiger Dr. and the access road behind Johnson Stadium to direct the ambulance.

**Murrell Baseball Field:** To access Murrell Baseball Field, the ambulance must turn RIGHT onto Tiger Dr. off of Woodberry Forest Rd. and park next to the field on Tiger Dr. Access to the field may also be gained by parking the ambulance in the small access road in between Tiger Dr. and Woodberry Forest Rd. The best location will be determined by the ATC or RN on location. A Woodberry Forest School Faculty/Staff member will need to be at the corner of Tiger Dr. and Woodberry Forest Rd. to direct the ambulance.

**Reily Wrestling Room:** To access the Reily Wrestling Room, the ambulance must park in front of the Dick Gymnasium in the main parking lot or on Woodberry Forest Rd. EMS will be directed to the RIGHT of the main steps and through the double doors directly into Reily Wrestling Room. A Woodberry Forest School Faculty/Staff member will need to be in front of the Dick Gymnasium on Woodberry Forest Rd. to direct the ambulance. EMS may also access the Reily Wrestling Room through the double doors under the main steps of the Dick Gym and turning RIGHT in the hallway at the laundry cage.

**Robinson Tennis Courts (Upper Courts):** To access the Robinson Tennis Courts, the ambulance must turn left on Woodberry Forest Rd at the top of the hill by the Walker Building. A Woodberry Forest School Faculty/Staff member will need to be at the turn at the top of the hill, in front of the Walker Building on Woodberry Forest Rd. to direct the ambulance. Parking of the ambulance will be determined by the driver on Woodberry Forest Rd.

**Squash Pavilion:** To access the Squash Pavilion, the ambulance must turn RIGHT onto Tiger Dr. off of Woodberry Forest Rd. They then must turn RIGHT onto the access road behind Johnson Stadium. A Woodberry Forest School Faculty/Staff member will need to be at the corner of Tiger Dr. and Woodberry Forest Rd. to direct the ambulance. A second Woodberry Forest
Heat Policy:
The following policy has been developed using the National Athletic Training Association (NATA) guidelines and position statements for preventing and caring for Exertional Heat Illness (EHI) and Exertional Heat Stroke (EHS).

When temperatures and/or humidity reach levels of high risk of EHI, the athletic training staff will enforce one or more of the following: modified practices, more water breaks, shaded breaks and/or practicing with less equipment. These guidelines will be enforced when the Wet Bulb Globe Temperature is equal to or greater than 82°F.

Signs and symptoms of EHI include: lack of sweat, red and blotchy skin, clammy skin, dry mouth/cotton mouth, confusion, etc. If any of the mentioned signs and symptoms are observed, an ATC and/or nurse on duty, needs to be contacted immediately and the following procedure needs to be followed.

- Assessment of body temperature needs to be administered using a rectal thermometer. The assessment of rectal temperature is the clinical gold standard for obtaining core body temperature of patients with Exertional Heat Stroke and the medical standard of practice and accepted protocol. No other field-expedient methods of obtaining core body temperature (e.g., oral, axillary, tympanic, forehead sticker, temporal) are valid or reliable after intense exercise in the heat, and they may lead to inadequate or inappropriate treatment, thereby endangering a patient’s health. Parents, administrators, coaches, and student-athletes will be educated ahead of time that this procedure will be used for heat-illness emergencies, especially in patients suspected of having a EHI or EHS.
- Immerse patient into cold water tub or Polar Pod cooling system; approximately 35°-58°F (1.67°-14.5°C), on site if possible. Remove appropriate clothing/equipment. Immersion therapy will include constant monitoring of core temperature by rectal thermometer.
- If immersion is not possible, transport immediately to ER. Alternative cooling strategies should be implemented while waiting for and during transport. These strategies could include: spraying the body with cold water, fans, ice bags or ice over as much of the body as possible and/or cold towels replacing towels frequently.
- Monitor airway, breathing, circulation, core temperature, and CNS status (cognitive, convulsions, orientation, consciousness, etc.) at all times.
- Cease aggressive cooling when core temperature reaches approximately 101°-102°F (38.3°-38.9°C); continue to monitor.
- If rapid onsite cooling was administered and rectal temperature has reached approximately 101°-102°F (38.3°-38.9°C), transport athlete to medical facility for monitoring of possible organ system damage.
**Inclement Weather Policy:**
The following policy has been developed using the National Athletic Training Association (NATA) and National Athletic Association (NCAA) and National Oceanic and Atmospheric Association (NOAA).

1. The Certified Athletic Trainer (ATC) on duty will monitor threatening weather via local and national weather reports (Weather Channel, National Weather Service, WeatherSentry App, etc.). A SkyScan lightning detector will also be used to monitor threatening weather.

2. If lightning flashes and thunder is heard within 30 seconds of each other (flash to bang), the ATC will inform the coach and or officials and the game/practice will be delayed 30 minutes. This flash to bang method determines the distance of occurring lightning strikes (i.e. 6 miles or less is 30 seconds). Each lightning strike will restart the 30 minute window of time.

3. Woodberry Forest School is equipped with an inclement weather siren. This siren will be blasted when there is threatening weather. Whenever the siren is heard, please seek immediate shelter in the nearest building. Coaches are asked to not send boys up the hill during a storm.

4. Teams in Johnson Stadium or Murrell Field will be escorted to either the Squash Pavilion (located under Johnson Stadium on the left side) or in the Buxton Halftime Room (located to the left of Johnson Stadium) Spectators will be asked to gather in the Squash Pavilion or go to their personal vehicles. The Barbee Center will be used as an overflow gathering place. Teams on Finch Track will be escorted to the Barbee Center. Teams on the Lower Tennis Courts (Robinson Courts) will use the Squash Pavilion. Teams on the Robinson Courts (Upper Tennis Courts) will use the Dick Gymnasium.

5. Practice/game time will resume only after a full 30 minutes of no lightning in the determined area has been reported by the ATC on duty.

**Tornado/Severe Storm:**
The National Weather Service has published the following guidelines for taking shelter during a tornado. Woodberry Forest School follows these same guidelines.

*If you are in a building, go to a shelter area such as a safe room, basement, storm cellar, or the building’s lowest level. If you do not have a basement, take shelter in the center of an interior room on the lowest level, such as a bathroom, closet, or interior hallway that is away from corners, windows, doors or outside walls.*
**Concussion Management Policy:**
The following policy was developed using the NATA concussion position statement. The American Academy of Pediatrics (AAP) Return to Learn Following a Concussion Guidelines (October 2013), and the American Medical Society for Sports Medicine (AMSSM) Position Statement (2013) and will focus on the student-athlete’s recovery via symptoms and neurocognitive testing.

**Student-Athletes:**
All Woodberry Forest School students will:
- a. report all concussion-like signs and symptoms to a Certified Athletic Trainer and/or Infirmary to ensure proper care is taken
- b. follow the Return to Learn and Return to Play protocols
- c. not return to play until cleared by a Certified Athletic Trainer

**Faculty:**
All Woodberry Forest School Dorm Masters, AM’s, Duty Team Members, and Coaches:
- a. need to complete the Heads Up: Concussion in Youth Sports online training annually, prior to the start of the school year. A copy of the certificate of completion needs to be sent to Tammy Firman, RN to be kept on file.
- b. will encourage their student-athletes to report any suspected injuries and illnesses to the athletic training staff, including signs and symptoms of concussion: and they accept the responsibility for referring any student-athlete to the athletic training staff suspected of sustaining a concussion.
- c. read and understand the Woodberry Forest School Concussion Management Policy

**Baseline Testing:**
Student-Athlete baseline testing for all Woodberry Forest School Students will be conducted using the ImPACT online software prior to the first practice session. No student-athlete will be allowed to practice or compete if they have not taken this test. ImPACT is a Computerized Neurocognitive Assessment Tool that can be used by trained professionals to help determine if a brain injury has occurred.

A certified athletic trainer has the authority to pull a student-athlete from the classroom and/or physical activity regardless of ImPACT test results.

**Concussion Protocol**
If a student-athlete shows concussion-like signs and reports symptoms following contact to the head, they have, at the very least, sustained a mild traumatic brain injury and should be treated
for the injury. A student athlete who has signs or symptoms of a concussion shall be removed from practice or competition for the remainder of that day. A medical professional will then evaluate and determine the best plan of management for that student-athlete.

a. The student-athlete will be placed in the **Concussion Protocol** if any signs and/or symptoms (observed by a bystander or reported by student-athlete) are consistent of a concussion are present.

b. Once signs and/or symptoms have been reported or observed a Post-Injury ImPACT Test will be administered within 24 hours of the initial injury. The ImPACT test will not be the determining factor if a concussion has occurred.

c. Once a student athlete has been placed into the **Concussion Protocol**, communication with the appropriate personnel (Dean of Students, Academic Dean, teachers, advisor) will be made to ensure that all parties are aware of the status of the student-athlete.

**Return to Learn Protocol:**

1. A student recovering from a brain injury shall gradually increase cognitive activities progressing through some or all of the following phases. Some students may need total rest with a gradual return to school, while others will be able to continue doing academic work with minimal instructional modifications. The decision to progress from one phase to another should reflect the absence of any relevant signs or symptoms, and should be based on the recommendation of the student’s appropriate licensed health care provider in collaboration with school staff, including: teachers, school counselors, school administrators, psychologists, nurses, and certified athletic trainers.

*This protocol is simply a guideline and may not fit every case. All decisions and individualized accommodations will be made by Woodberry Forest Certified Athletic Trainers.*

**Recovery Phase 1 (Black):**

Symptoms: Student reports constant symptoms that interfere with activities of daily living

Teacher Expectations and Recommendations:

- No classroom attendance
- No homework or make-up completed
- No communication to teachers expected from student
- Communication with student can be done so by communicating with Dean of Academics

Dorm Master/Duty Team Recommendations:

- Student will rest/stay in Infirmary during the day and/or overnight*
- No bright screen usage (computers, TV, iPads, phones)
- No homework
• No physical activity

**Recovery Phase 2 (Red):**
Symptoms: Student reports symptoms that are not decreasing with activity modification
Teacher Expectations and Recommendations:
• No classroom attendance
• No homework or make-up work completed
• Minimal communication to teachers expected from student
• Communication with student can be done so by communicating with Dean of Academics

Dorm Master/Duty Team Recommendations:
• Rest in Infirmary unless cleared to return to dorm*
• Activities are based on symptom level
• No mentally-stimulating activities (reading, computer usage, texting)
• Can do short walks around dorm and campus at discretion of ATC
• If symptom-free, can begin trying academics for 10-20 mins intervals

**Recovery Phase 3 (Orange):**
Symptoms: Student reports that he/she is symptom free with no mental/physical activity and student can do academic work symptom-free for at least 30 minutes
Teacher Expectations and Recommendations:
• Student can begin partial academic days with accommodations*
• Student may need to complete classwork in short intervals while in class* (To be determined by Certified Athletic Trainer)
• Notes may need to be provided
• Homework and make-up work will be completed on an “as-tolerated” basis, but is not expected to be completed (Homework can be modified, oral completion, face to face, etc)
• Student is expected to leave the classroom for a 20 minute break if symptoms occur
• No quizzes or tests

Dorm Master/Duty Team Recommendations:
• Study on dorm
• No loud extra-curricular activities (pep rallies, dances, student sections at athletic events, etc)
• Do homework in short intervals of 20 min work/20 min break & slowly increase (per Certified Athletic Trainer’s recommendations)
• Computer usage and phone usage can be used if it doesn’t create symptoms
• No physical activity other than short walks when symptom-free

**Recovery Phase 4 (Yellow):**
Symptoms: Student can control symptoms with activity modification and student can sit through a full class symptom-free while being mentally engaged
Teacher Expectations and Recommendations:

- Student can complete full academic days with few accommodations
- Homework & classwork is expected to be attempted, but will be completed on an “as-tolerated” basis
- Student is allowed to leave the classroom for maximum 10 minutes if symptoms occur (student will need to report to the infirmary if symptoms last longer than 10 minutes)*
- Student is expected to be engaged when in the classroom
- Modified quizzes, No tests (Quizzes can be given orally/face to face)

Dorm Master/Duty Team Recommendations:

- Avoid activities that increase symptoms
- Homework is to be completed in intervals no longer than 45 min work/ 10 min break
- No physical activity other than walks when symptom-free
- Try to adopt a normal routine

Recovery Phase 5 (Green):

Symptoms: Student is symptom-free for a full day of school without accommodations and passes Impact Test or deemed clinically recovered by ATC

Teacher Expectations and Recommendations:

- Student can complete full academic days without accommodations
- Student is expected to be fully engaged
- Homework is expected to be completed
- Make-up work will be completed with reasonable due dates. The student and teacher will establish a plan of action for finishing missed assignments using the “Missed Assignments Form” which will need to be filled out and signed by both the student and the appropriate teacher(s).
- Quizzes and tests allowed

Dorm Master/Duty Team Recommendations:

- No restrictions on dorm
- No physical activity or team practices until cleared by Certified Athletic Trainer (must complete 5-Step Gradual Exertional Return to Play under ATC supervision)

5-Step Gradual Exertional Return to Play Protocol:

Once the student-athlete is asymptomatic at rest for 24 hours, they will begin the return to play protocol. They must remain asymptomatic with each step before moving on to the next step. Once they have completed Steps 3 and 4, they must successfully retake the ImPACT test before receiving clearance to progress to Steps 5. An ATC or MD will evaluate the results from the ImPACT test.
Step/Day 1: 15 minutes stationary bike or elliptical (90-110 rpm)
Step/Day 2: Non-Sport related activity:
   Interval stationary bike or elliptical (30” sprint/30” recovery x 10) Body weight circuit –
   2 cycles (20 squats, 10 push-ups, 10 jumping jacks)
Step/Day 3: Sport related activity:
   Sprint the width/jog the length x 4 with sport activity if possible (court, field, etc)
   Plyometrics: dynamic warm-up (bounding, skips, high knees, etc)
   Non-contact, sports specific drills
Step/Day 4: Limited, controlled, non-contact practice
Step/Day 5: Full participation in practice

No student-athlete can return to full activity or competitions until they are asymptomatic in limited, controlled, and full-contact activities and cleared by a physician or certified athletic trainer.

**Physician Referral:**
The athlete will be referred to a physician immediately if loss of consciousness occurs, or if the athlete has any uncharacteristic symptoms. A physician referral will be dealt with on a case by case basis as seen fit by an ATC and/or RN.

**Sickle Cell Trait Policy:**
The following guidelines have been established based on the National Athletic Training Association position statement and focuses on the signs and symptoms of the athlete’s condition. Intervention when warning signs and symptoms is critical. The warning signs and symptoms include joint pain, swelling and heat in a joint, irritability, fatigue, sudden onset of pallor or jaundice, loss of appetite and fever. In this event, the following steps will be followed:
   a. Rest
   b. Encourage fluids
   c. Allowance to the bathroom
If the severity of the SCT increases to a pain crisis, the following symptoms will present: severe generalized pain, severe headache, weakness on one side, blood in urine, abnormal behavior, difficult to arouse, breathlessness and a rapid pulse. If these symptoms occur, the following steps are to be taken:
   a. Check vital signs
   b. Administer high-flow oxygen, if available, with a one-way valve face shield
   c. Move the athlete to shade and cool athlete
   d. Encourage fluids if the athlete is conscious and able
   e. If the athlete appears to have slowed mental responses or vital signs decline, call 911, attach an AED and treat as a medical emergency.
ATC Coverage Policies:

Home Contests:
A Certified Athletic Trainer or Registered Nurse will be on site either directly or indirectly at every home event. If the sport does not require the Certified Athletic Trainer or Registered Nurse to be on site for the contest, (i.e. non-contact or individual sports) the coach should call the Athletic Trainer and/or Infirmary in the event of an emergency.

Practices:
A Certified Athletic Trainer will be available either in the Athletic Training Room or at the athletic facilities for each full contact, partial contact and noncontact sport practice that is held on campus.

Sport Contact Level Defined:
Full contact: Lacrosse, Football, Wrestling
- A Certified Athletic Trainer or Registered Nurse must be on site. The team physician will be available at the discretion of the host institution. An ambulance will be available, if necessary. Splints and crutches will be available and an AED is required on site.

Partial contact: Soccer, Basketball, Baseball
- A Certified Athletic Trainer or Registered Nurse must be one site or available

Non-contact: Track and Field
- A Certified Athletic Trainer will be available (no more than four minutes away from the site of competition). Splints and crutches will be available.

Individual: Cross Country, Swimming, Tennis - There will be first aid kits (including emergency contact phone numbers), splints and crutches available.