

Site-specific emergency action plan

REVIEW DRAFT - DO NOT SIGN OR USE FOR CLIENT TESTING

Coach-only planning draft; complete, verify and rehearse for each venue

Not operational until the venue, people, equipment and communications are confirmed and the plan is reviewed and rehearsed. This form does not supply medical staff or authorize treatment. Do not conduct a session with unresolved emergency arrangements.

Plan owner, version, preparation date and next review date

Venue name, exact address/room or field location/GPS and session hours

EMS entrance, gate/access arrangements, cross street, access route and meeting point

Venue contact and access outside staffed hours

Primary phone/callback, tested signal, date and backup method

911 caller briefing: exact location, callback, observed emergency and access instructions

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Roles and resources

Named emergency caller, athlete responder, AED retriever, EMS guide and backups

If coaching alone: how help/equipment reaches the athlete without leaving them unattended

Do not assume one person can simultaneously attend the athlete, retrieve a distant AED and guide EMS. Resolve that gap before testing. In an emergency use the plan and dispatcher directions, with hands-free communication where practical.

AED location, access hours/route, readiness check, custodian and check date

Actually available CPR/AED/first-aid-trained responders, training and expiry dates

First-aid/PPE/bleeding/cooling supplies and what is not available

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Response, recovery and rehearsal

Stop exercise for the participant's request, concerning symptoms, unsafe equipment or conditions. For collapse, suspected cardiac arrest, severe breathing difficulty, confusion/seizure, serious heat illness, uncontrolled bleeding or another serious emergency, activate 911 and follow dispatcher instructions and current training. Do not wait for a lactate reading to decide whether to seek help.

Provide CPR/AED/first aid as appropriate to the emergency, current training and dispatcher guidance. Arrange prompt appropriate medical evaluation after blood exposure under the separate exposure-control plan. This form is not a treatment algorithm.

Reviewed response arrangements: collapse/cardiac event, heat illness, fainting, bleeding and blood exposure

EMS handoff and emergency-contact notification responsibilities

Supervised recovery, no unsafe return to testing, transport/handoff and cancellation arrangements

Walk-through/rehearsal date, participants, findings and changes

Reviewer, completed prerequisites, unresolved gaps and next review trigger