

Dragons Rugby

Emergency Action Plans (2017-2018)

Location: Caerphilly Centre for Sporting Excellence

Event: Training Session

Nearest Hospital: Ysbyty Ystrad Fawr (Ystrad Mynach, Caerphilly, CF82 7EP, 01443 802200)

Type of Hospital: Local Emergency Centre (not 24 hours)

Distance to Hospital: <100m, opposite training location

Trained personnel:

1 Pitchside during session (Head Physiotherapist, Physiotherapist OR Sports Therapist)

Assistant First Aiders CPR & Defibrillation (All S&C coaches, all senior players)

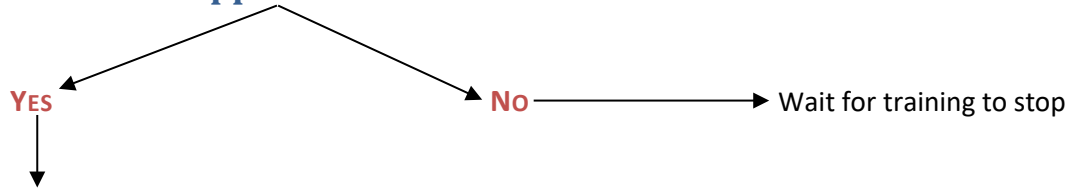
Medical Equipment:

(Green) Trauma Bag, Thermoplastic scoop, Rugged Stretcher, Long (spinal) board, Vacuum Splints, Sam Splints. **ALL LOCATED IN GENERAL MEDICAL ROOM**

External AED, Oxygen. **LOCATED BEHIND RECEPTION DESK**



1. Safe Approach



2. Airway with C Spine Control

Pitchside 1: arrive and immobilise spine.

- **INSTRUCT ASSISTANT 1 TO GET SECOND THERAPIST FROM MEDICAL ROOM.**
- **INSTRUCT ASSISTANT 2 TO IMMOBILISE SPINE AND TAKEOVER MANUAL IMMOBILISATION**

Pitchside 1 to then inspect airway:

Object?	Remove
Fluid	Suction under direct visualisation
Jaw Thrust	Use OP airway
NP Airway	Caution re: basal skull #
IGel	
Needle Cricothyroidotomy	Use IV Cannula



3. Breathing with adequate ventilation

Pitchside 1: assess breathing

- **LOOK – chest movement**
- **LISTEN – breath sounds**
- **FEEL – expired air**
- **ASSESS – 10secs**

- **Rate**
- **Expansion**
- **Soreness**
- **Percussion (symmetry in 3 lobes –**
 - **Hyperesonance THINK pneumothorax,**
 - **Dull THINK haemothorax**
- **Breath Sounds – symmetry in 3 lobes**

Is the player breathing?

NO

START CPR

Assistant 3 to call 999 and get

YES

Pitchside 1: Establish is the player breathing with adequate ventilation?

YES

NO

VENTILATE – BVM

OXYGENATE – 15 L min⁻¹

CALL 999

4. Circulation with Haemorrhage Control

Pitchside 1: Assess Circulation:

Radial Pulse

- **Rate, Rhythm, Volume**

On the Floor + 5 More

Does the player have adequate circulation?

YES

Move to Disability assessment

NO

- **Pitchside 2: Check for External Bleed: Compress and Elevate**
- **Check for Internal Bleed: Chest, Abdomen, Pelvis, Long Bones**

5. Disability with Neurological Assessment

Pitchside 1:

Is the Player:

A: ALERT (GCS 15)

V: Responsive to VERBAL STIMULUS (GCS 13)

P: Responsive to PAINFUL STIMULUS (GCS 8)

U: UNRESPONSIVE (GCS <8)

- Other Significant Injury?:

- Fracture?

- Check Vascular and Neurological Status

- Relocate if neurovascular compromise

- Recheck neurovascular status post reduction

6. Extrication Protocol

Has NEXUS been successfully used to 'clear' C Spine injury?

YES

NO

Stretcher Extrication Protocol:

- Is there sufficient trained staff to extricate safely?
- Minimum 2 people preferably 4 person lift for 100kg + players.
- Training on the pitch: extricate to medical next opposite changing room
- If insufficient staff: AMBULANCE required
- Handover SAMPLE sheet to paramedics

Suspected Spinal Extrication Protocol:

- Insufficient trained staff to complete log roll and spinal board protocol
- CALL AMBULANCE
- Keep player safe and warm
- Handover SAMPLE sheet to paramedics