Rider University

# Sports Medicine
# Policies and Procedures

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I. Standing Order of Protocol

A. The appointed team physician(s) will supervise the New Jersey Licensed Athletic Trainers in all matters concerning the management of athletic related injuries and advise on matters regarding the prevention of athletic injuries at Rider University.

B. The Licensed Athletic Trainer will act in accordance with the New Jersey Athletic Trainers Act.

C. Emergency care is the responsibility of the athletic trainer. They must have a written policy regarding the coordination of emergency transport and care. He/she will serve as a triage officer to determine which injuries require additional medical evaluation. If there is any question about the nature or seriousness of an injury, the athletic trainer must refer to appropriate medical services immediately. This act is in accordance with the American Red Cross and Emergency Medical Care (American Academy of Orthopedic Surgery)

D. The use of moist heat, ultrasound, electricity, manual therapy, rehabilitative techniques, traction or joint mobilization may be instituted as soon as signs and symptoms indicate that their use is proper, in accordance with sound principles of athletic training.

E. The athletic trainer shall apply at his/her discretion protective and/or preventive taping and/or taping procedures in accordance with the prevailing standard of care. The trainer shall also apply a protective sleeve or support when signs and symptoms indicate. The athletic trainer should instruct the athlete in the use of crutches or canes when ordered by a physician or when symptoms indicate the necessity of their use. In consultation with team physicians, the trainer shall apply protective and/or preventative braces or orthotics (Brace and orthotic is defined by Steadman's Medical Dictionary).

F. The athletic trainer under a physicians order may institute treatment procedures that include iontophoresis and phonophoresis. The form of treatment may be changed whenever signs and symptoms indicate a need for change at the discretion of the athletic trainer. These changes will be made under the direction of the physician.

G. Graduate assistant athletic trainers are the responsibility of the Head Athletic Trainer. The Assistant Athletic Trainers will supervise the graduate assistant athletic trainers in the absence of the Head Athletic Trainer.

H. The Licensed/Certified Athletic Trainers shall help design and supervise reconditioning programs and testing for all athletic teams. No athlete will be permitted to practice for a sport, or participate in a sport, until the Rider University Sports Medicine Staff and its physicians, in accordance with New Jersey State laws, complete a pre-participation physical examination.

I. The athletic trainer may at his/her discretion return an athlete to competition after a full physical assessment and history is completed and documented and is considered normal. Any athlete under care of a physician, other than a Rider University team

physician, will under no circumstances be permitted to return to activity until cleared by the treating physician as well as the Rider University Team Physician. In the event there is a disagreement on the ability of an athlete to participate, the Rider University Team Physician will make the ultimate decision.

J. Treatment records will be maintained for each athlete receiving and assessment, physical modality, corrective exercise, and support for activity. Progress notes and physicians orders will be part of the record. It is the responsibility of the athletic trainer to maintain such records.

K. Athletes may elect to avail themselves of the services of a private physician besides the Rider University team physician(s). In such cases, the athletic trainer will notify the team physician(s) of this decision by the athlete, and note this decision in the athlete's chart. No treatment will be rendered or changed by the trainer unless written by the private physician and has cleared this course of action with the team physician.

L. Prescription medication is to be given to an athlete by the team physician(s) and/or attending physician only. See Medication Distribution Policy.

M. Records of evaluations and actions taken by the team physician will be recorded and signed. This record shall be considered privileged information.

N. The release of injury information to the public media is the responsibility of the coach of the sport or the sports information office, not the athletic trainer.

O. The athletic trainer will at all times act in accordance with the standard recognized publication, such as publication by the American Red Cross, Emergency Care ad Safety Institute, and OSHA.

P. Either party can terminate this agreement upon 60 days notice.

Q. The administrative chain of command for the Sports Medicine Department is as follows in descending order:

   President/Dr. Mordechai Rozanski, Director of Athletics/Curt Blake, Head Athletic Trainer/Tim Lengle and Head Team Physician/Ronald Grossman, MD.

R. The medical chain of command of the Sports Medicine Department is a follows in descending order:

   Head Team Physician/Ronald Grossman, M.D., Team Orthopedist, Charles Gatt, Jr. M.D., Head Athletic Trainer/Tim Lengle, 1st Assistant Athletic Trainer/Henry Minarick, 2nd Assistant Athletic Trainer/Karen Cote, 3rd Assistant Athletic Trainer/Jennifer Chu, Graduate Assistant Athletic Trainers.

## II. Medication Distribution Policy

### Prescription Medications

1. Prescription medications are to be stored in one location under lock and key. A location will be selected in which temperature is regulated year round.

2. Dispensing of medications will be done in accordance within the established state and federal law.

3. Medication should be administered by the physician only. Full disclosure about the medication (i.e. side effects/ contraindications) will be given the athlete at the time it is administered.

4. All medications that are dispensed will be logged on the Prescription Medication Log Sheet.

5. Prescription medication will be inventoried once a month and all expired medications will be properly discarded.

### Non-Prescription Medication

1. All medications will be ordered and dispensed in prepackaged units.

2. All non-prescription medications that are dispensed will be logged on the Non-Prescription Medication Log Sheet.

## III. Medical Decision Making

All medical decisions will be made in accordance with the established Medical Chain of Command. All decisions regarding a student-athletes medical status or ability to return to play are to be made only by a Rider University Team Physician or a member of the Sports Medicine Staff. Recommendations by outside physicians will be considered in all situations, however, final decisions regarding participation are the purview of the Rider University Head Team Physician. Team coaches are expected to follow all decisions made by the Rider University Sport Medicine Staff and are at no time permitted to alter any orders or decisions made in regard to an athlete's medical status.

## IV. Return to Play Policy

The Certified Athletic Trainer may at his/her discretion return an athlete to competition after a full physical assessment and history is completed and documented and is considered normal unless otherwise ordered by a team physician. Any athlete under care of a physician, other that a Rider University Team Physician, will in not be permitted to return to activity unless cleared in writing by that outside physician and the appropriate team physician.

V. Athletic Injury Reporting System

1. All athletes are required to sign in on the treatment log as they enter the athletic training room. This treatment log will be the primary means for coaches to determine who has and has not completed their designated treatments or rehabilitation. If an athlete's name does not appear on the treatment log, as far as the sports medicine staff and therefore the coach is concerned they have not receive treatment.

2. All athletic injuries are to be recorded on the appropriate forms by the evaluating athletic trainer. Daily Treatments are to be designated by recording the specific treatment code in the space for the corresponding day. This is the responsibility of the athletic trainer. Since the injury form is a medical record it should be kept in a secure location where it is only available to the staff and or the athlete upon request. It is also the responsibility of the treating athletic trainer to make progress notes on the back of the injury form as necessary, but preferably on at least a weekly basis. The athletic trainer should sign his/her name or initial before each progress note in order to keep track of treatments done by other staff members. All physician referrals and further testing should also be noted on the injury form and any hard copies of that information placed in the athlete's permanent medical file. If the injury has been resolved or the athlete has not come in for treatment, the athletic trainer should record this and file the form in the athlete's permanent medical file.

3. A designated staff member will be assigned to take notes during each of the team physician's clinic visits. These notes will then be typed and saved on the computer, as well as a hard copy filed. It is the responsibility of the recording athletic trainer to ensure that the physicians designate any orders on the inside left page of the athlete's permanent medical record and to secure any prescriptions for medications or further testing.

VI. Athletic Insurance Claim Procedure

Every student-athlete participating in intercollegiate sports at Rider University is covered by the Department of Athletics insurance policy. This coverage is provided free of cost the student-athlete. This policy is a SECONDARY INSURANCE POLICY, consisting of both basic medical coverage and catastrophic injury coverage, which takes effect only when the primary insurance coverage for an injured student-athlete is denied or exhausted. This policy will pay only for athletic related injuries that occurred while participating in Intercollegiate Athletics at Rider University. All Rider University student-athletes are required to have primary medical coverage not supplied by the Department of Athletics upon entering school. The Head Athletic Trainer is responsible for processing all athletic injury and illness related claims. In order to make the claims process as smooth as possible, please follow these simple steps.

1. The Sports Medicine staff must be notified of all injuries sustained during practice or competition that require further testing and/or surgery prior to that designated treatment. Bills will not be covered without proper pre-visit notification. The student-athlete may use the "Rider University Network" of physicians or is free to see their own physician as long as the Sports Medicine staff receives prior notification.

2. Follow all PRIMARY INSURANCE PROCEDURES, including securing referrals and pre-certifications for x-rays and MRIs.

3. Upon receiving a bill for services rendered, copy the bill and send the copy to the student-athletes PRIMARY INSURANCE COMPANY. Send the original to the Head Athletic Trainer.

4. The student-athletes primary insurance company will generate an E.O.B (Explanation of Benefits). This E.O.B will explain what the primary insurance company will and will not pay for and the reasoning. Copy the E.O.B and send the original to the Head Athletic Trainer for processing. Bills cannot be sent for processing without the E.O.B.

5. The original bill and original E.O.B. will be sent by the Head Athletic Trainer to the Rider University athletic insurance carrier for processing. Payment will be made directly by this carrier.

All bills must be processed in a timely fashion. **The Athletic Department will not process any claim(s) after one year past the date of services.**

All other claims for grant monies, i.e., Pell and NCAA Special Assistance Fund, will only be processed during that specific academic year and will not exceed the specific allotment. Contact the Rider University Associate Athletic Director for more information.

VII. Transportation

1. Rider University Athletic Trainers are not required to use their personal vehicle for any official purposes except for their own transportation to and from fields. The sports medicine vehicle will be used to transport all water, ice, and equipment to the fields for all contests and in-season practices. It is the coach's responsibility to arrange for transport of water and ice to non-traditional season practices.

2. Rider University Athletic Trainers are not permitted to transport acutely injured athletes in their personal vehicles at any time. If the injury is non-emergent the athlete can be transported in the sports medicine vehicle. If an injury is of a severe enough nature to necessitate care beyond the realm of athletic training the athlete should be transported by ambulance only.

3. Transportation to and from doctors appointments, surgeries, etc. are the responsibility of the athlete and or coach, not the responsibility of the sports medicine staff. The sports medicine staff will ensure that the athlete has transportation before making an appointment. In the event that a member of the sports medicine does transport a Rider University athlete to an appointment, it shall be considered official university business and therefore the staff member will be covered by the university and will be reimbursed for mileage.

VIII. Threatening Weather Policy

1. The Rider University sports medicine staff will be responsible for the monitoring of threatening weather conditions. Based on information gathered during this monitoring the sports medicine staff will make all decisions on whether a team or individual athletes need to be removed from an athletic site or event. **Note: in the event that a member of the sports medicine staff is unavailable at a specific site it will become the coach's responsibility to make any decisions based on the threatening weather policy.**

Monitoring Methods: Local Forecasts
National Weather Service Advisories (NWS)
SkyScan (Model P5) Lightning Detector

Prior to each practice or competition a weather report will be obtained by the sports medicine staff in order to alert the staff of any potential threatening weather conditions or NWS advisories. On field monitoring will be accomplished by using the SkyScan Lightning Detector. The SkyScan detects the characteristic electromagnetic emissions from individual lightning strokes as well as measuring the distance to the detected stroke. This detector alerts the user of the distance of any lightning or thunderstorm activity in one of four ranges, 0-3 miles, 3-8 miles, 8-20 miles, and 20-40 miles. Lightning can strike as far away as 10 miles from the rain shaft, therefore the Rider University sports medicine staff will clear the outdoor athletic venues and the Coppola Natatorium upon receiving an alert from the SkyScan that a stroke or storm is within the 3-8 mile range. During competition the sports medicine staff will update and advise the officials on appropriate actions, if the head official refuses to follow the recommendations of the sports medicine staff it then becomes his/her responsibility. **Note: in the event that the SkyScan is not located on a specific field, the athletic trainer of coach who is present should clear the fields upon the first sign of <u>THUNDER OR LIGHTNING.</u>**

2. In the event that the sports medicine staff or a coach decides that the fields need to be cleared, all athletes and spectators should be instructed to proceed to the nearest "safe structure or location." The following "safe structures or locations" are recommended for their respective areas.

| Area | Safe Structure |
|---|---|
| Soccer game and men's practice field | Maurer Center |
| Women's Soccer practice field | Maurer Center |
| Track area and Field Hockey practice field | Maurer Center |
| Softball Field | Maurer Center |
| Baseball Field | Maurer Center |

In the event that a safe structure cannot be reached, any vehicle with a hard metal roof will provide adequate protection. Avoid touching the sides of the vehicle and the steering wheel during a lightning storm.

In the event that a lighting storm hits before a safe structure can be reached, avoid the following.

Tall individual trees in the area
Light or flagpoles
Any metal objects such as fences or bleachers
Standing pools of water
Open fields

It is recommended that in cases where a safe structure cannot be reached before a lightning strike hits or an individual feels his or her hair stand on end or skin begin to tingle the following position should be assumed. Crouch down low to the ground with only the balls of your feet touching the ground, wrap your arms around you knees and lower your head. Minimize your contact with the ground because lightning current often enters the victim through the ground. Never lie flat on the ground. Avoid using landline telephones during a lightning storm; a cellular phone is a safe alternative as long as the user is in a safe structure.

3. The athletic event may not proceed until **at least 20 minutes** have passed since the last alert from the SkyScan in the 3-8 mile range and/or the last sign of **THUNDER OR LIGHTNING.**

IX. Environmental Monitoring Recommendations-Treatment of Heat Illness

Prior to each practice session, a reading of the Wet Bulb Globe Temperature (WBGT) will be taken. Based on this reading the sports medicine staff and the head team physician have recommended the following game and practice modifications. It is expected that all Rider University Athletic Teams follow these modifications during practices. During competition, the sports medicine staff will make recommendations to the officials on the number and timing of water breaks based on the WBGT reading. The final number and timing of those breaks as well as the responsibility lies with the head official's decision whether or not to heed those recommendations.

| WBGT | Risk | Water Breaks | Practice Intensity | Equipment |
|---|---|---|---|---|
| < 77 | Low | Coaches Discretion | ---------- | |
| 78-81 | Med | Minimum every 20 min | Moderate | Warm weather gear |
| 82-89 | High | Minimum every 10 min | Low | No equipment (goalies) |
| 90 > | **All Practices and Competitions Cancelled** | | | |

## X. Treatment of Heat Illness

In response to the Inter-Association Task Force on Exertional Heat Illnesses Consensus Statement published in 2002; Rider University Sports Medicine has decided to adopt the following recommendations concerning heat illnesses.

**Recognition** – Axillary, oral, and tympanic temperatures have been shown to be invalid in individuals participating in hot environments. Therefore, the Rider University Sports Medicine Staff will be trained and equipped to assess core temperature via rectal thermometer in any situation involving heat illness.

**Treatment** – Immediate whole body cooling via cold water immersion has been shown to be the best treatment for exertional heat stroke (core body temperature above 104 degrees F), and should be initiated within minutes of recognition. Cold water immersion should be continued until core body temperature reaches 101-102 degrees F, at this time the athlete will be transported to a medical facility.

## XI. Rider University Asthma Policy

The Rider University Sports Medicine Asthma Policy provides those athletes who have a history of asthma and have been medically cleared to participate in sports conditional clearance based on the following criteria.

1. The athlete must undergo an evaluation by a member of the sports medicine staff. Including a thorough asthma history and a base line peak flow reading.

2. The asthmatic athlete's inhaler(s) must always be present on the field during competition or practice. The athlete must also provide the sports medicine staff an additional inhaler(s) to be carried in the medical kit in case their inhaler is unavailable or has run out.

3. The athlete must be stable with the proper medication.

    a. An athlete is considered to be unstable if they must resort to using their rescue inhaler two or more times in any one exercise period, more than three times in any given week beyond normal preventive use, or has been awakened by their asthma more than twice a month.

    b. Once an athlete has been deemed unstable, they will be referred to the Head Team Physician for evaluation and possible adjustment to their medication protocol.

4. The athlete must be forthcoming to the sports medicine staff about their asthma stability. For instance, if the player was up the previous night with an asthma attack, he/she must tell the sports medicines staff so proper decisions can be made about participation on the following day.

5. The athlete must also notify the sports medicine staff of any change in their medication protocol that was initiated by a physician other than the Rider University Head Team Physician.

If at any time, during competition or practice, an athlete suffers an asthma attack strong enough to warrant use of their rescue inhaler, that athlete will not be permitted to return to competition or practice on that day until they provide a peak flow reading that is at least 80% of their baseline peak flow reading.

XII. Head Injury Policy

1. In the event an athlete sustains a head injury and was rendered unconscious for any period of time, EMS should be contacted and the athlete transported to the hospital.

2. Any athlete who has sustained a head injury and demonstrates symptoms consistent with a concussion for longer than fifteen minutes as assessed by a Certified Athletic Trainer or physician will be deemed as having a concussion.

    a. Concussion symptoms may include one or more of the following:

        Dizziness, headache, nausea, vomiting, balance problems, drowsiness, sensitivity to light/noise, irritability, numbness or tingling, memory difficulties, and/or difficulty concentrating.

3. Any athlete deemed to have a concussion will not be permitted to return to activity until assessed by the Head Team Physician. An athlete with a concussion cannot be returned to activity without direct orders from the Head Team Physician.

XIII. Parent/Guardian Communication Policy

**Athletes under the age of 18**

1. Parents/Guardians will be contacted when an injury has occurred and be made aware of the care that their child is receiving and any need for further testing.

**Athletes over the age of 18**

1. Parents/Guardians will only be contacted in case of an emergency unless specifically requested by the athlete. It is the responsibility of the athlete to communicate injury information to their parents.

    a. An emergency being constituted as the need for care outside the scope of athletic training and/or the need for a specialized physician as determined by the sports medicine staff under the supervision of the Head Team Physician (i.e. emergency room care, neurologist, surgeon, etc.).

2. The sports medicine staff is unable to discuss any athlete's medical situation with a parent without first gaining consent from that athlete.

3. By direction of the National Athletic Trainer's Association Bylaws and the New Jersey Athletic Training Act the sports medicine staff may be bound by confidentiality. If an athlete requests specific information to be held in confidence and doing so does not compromise future care, the sports medicine staff cannot disclose information to coaches, administrators, and/or parents/guardians without consent from that athlete.

4. Once consent from the athlete is received and documented, the sports medicine staff will be happy to discuss the care that their child is receiving and any need for further testing.

XIV. Coaching Staff Communication Policy

1. The method of communication most efficient will be established on a sport-to-sport basis by the primary athletic trainer and the coaching staff. If a method cannot be agreed upon by the two parties, the Head Athletic Trainer will decide how injury information will be communicated to the coaching staff.

2. The coaching staff will be notified by already established means of communication of any athletes who have specific limitations or who are completely restricted from participation.

3. The coaching staff **will not** be notified of each individual treatment provided to their athletes. If the coaching staff wishes to monitor whether or not an athlete has shown up for treatment/rehabilitation they are welcome to view the athletic training room treatment log. Athletes are required to sign-in before every treatment in this log for exactly this purpose.

4. The treatment log is the only written documentation that the sports medicine staff is allowed to share with the coaches. Individual athlete's files are privileged medical records and cannot be shared without written authorization from the athlete.

5. During evaluation and re-evaluation the athletic trainer will often give recommendations to the athlete for modifying their practice regimen in order to speed up the healing process or avoid re-injury. Due to the sheer number of athletes and the number of evaluations performed in the athletic training room it is impossible for the sports medicine staff to report all of this information to the coaches. It is the responsibility of the athlete to communicate these recommendations to the coaching staff.

6. By direction of the National Athletic Trainer's Association Bylaws and the New Jersey Athletic Training Act the sports medicine staff may be bound by confidentiality. If an athlete requests specific information to be held in confidence and doing so does not compromise future care, the sports medicine staff cannot disclose information to coaches, administrators, and/or parents/guardians without consent from that athlete.

## XV. Camp and Clinic Policy

1. Working summer camps or clinics run by Rider University coaches is strictly voluntary and decided on a case-by-case basis by each individual athletic trainer. An athletic trainer's primary sport assignment during the school year in no way obligates them to work any camps run by that team.

2. Clinics that are run during the year (spring break) are not the responsibility of the sports medicine staff. By New Jersey state law, staff athletic trainers cannot treat the clinic participants unless specifically contracted to do so by the clinic.

3. It is not the responsibility of any individual on the sports medicine staff to locate outside athletic trainers for camps/clinics at Rider University. It is advised that coaches wishing to secure an athletic trainer for a camp/clinic utilize the Athletic Trainer's Society of New Jersey website at www.atsnj.org in order secure athletic trainers not affiliated with the university.

4. Negotiations pertaining to pay and hours should be negotiated between the athletic trainer and the coach.

## XVI. Coverage Policy

### Practice

1. An attempt will be made to provide all traditional season teams with on-site coverage by a Certified Athletic Trainer. If circumstances do not allow for a Certified Athletic Trainer to be present on-site during practice, communication by walkie-talkie or cellular phone will be in place. During all practice times there will be a Certified Athletic Trainer available to respond within four minutes of all on campus practice facilities.

2. Non-traditional season practices will not be afforded on-site coverage by a Certified Athletic Trainer. Indirect non-traditional season practice coverage will only be extended during the regular athletic training room hours, 10am – 6pm Monday- Saturday. No indirect coverage of non-traditional seasons will be provided on Sundays. Coaches who choose to practice during off times or Sundays will assume full responsibility for the health and safety of their student-athletes and are expected to follow the established sports medicine policies and procedures.

3. In the event of an emergency a Certified Athletic Trainer is not present on-site during a traditional or non-traditional season practice, the supervising coach should act in accordance with the Rider University Sport Medicine Emergency Response Plan.

4. It is the head coach's responsibility to provide the Head Athletic Trainer with a tentative practice schedule at the beginning of each season, traditional or non-traditional. It is expected that the Head Athletic Trainer or Primary Athletic Trainer will be notified of any change in the practice schedule 48 hours prior to

that change. The sports medicine staff will not cover practices that are scheduled or re-scheduled without adequate notification. In this case, the coach will become responsible for the safety of their athletes. Exceptions to this rule include inclement weather and unforeseeable circumstances.

Competition

1. On-site coverage by a Certified Athletic Trainer will be provided for all traditional season competitions hosted by Rider University.

2. An attempt will be made to provide on-site coverage for all non-traditional season events hosted by Rider University based on the demands of the home traditional season athletic schedule. During all competition times there will be a Certified Athletic Trainer available to respond within four minutes of all on campus competition sites.

3. A Certified Athletic Trainer will provide on-site coverage for all away traditional season competitions unless a home athletic event takes priority, with the exception of the following sports:

   Women's Volleyball
   Men's and Women's Tennis
   Golf
   Men's and Women's Swimming and Diving
   Men's and Women's Indoor Track and Field
   Men's and Women's Outdoor Track and Field
   Baseball
   Softball

   On-site coverage on overnight trips for the Women's Volleyball, Baseball, Softball, and the Indoor and Outdoor Track and Field teams will be decided upon on a case by case basis. This decision will be based on the following factors; the risk of injury associated with the sport, the nature of the competition (single game, tournament), the level of care provided by the host institution, and the demands of home competitions.

4. An Attempt will be made to provide all teams on-site coverage for conference championships. This decision will be based on the following factors; the risk of injury associated with the sport, the nature of the competition (single game, tournament), the level of care provided by the host institution, and the demands of home competitions.

5. Non-traditional season away competitions will not be afforded on-site coverage by a Rider University Certified Athletic Trainer.

6. The host institution will be contacted before each competition for which a Rider University Certified Athletic Trainer will be unable to provide on-site coverage, traditional or non-traditional season. The Rider University sports medicine staff will notify the host institution of any athletes that need taping or treatments prior

to competition. An adequately stocked medical kit will be provided to any team traveling without an athletic trainer. The host institution will be responsible for providing any on-site care needed.

7. The head coach of those sports that will have an athletic trainer traveling with them are responsible for communicating departure times to either the Head Athletic Trainer or the Primary Athletic Trainer. If correct departure times are not communicated, away on-site coverage may not be provided.

XVII. Pre-Participation Athletic Physicals

1. Every Rider University student athlete must have a physical performed by the Rider University Team Physicians and Sports Medicine staff in their first year at the university. Athletes that cannot make the assigned physical dates and miss the team physicians may have their physical completed by the Rider University Health Center Physician. Physicals completed by any other physician will not be accepted.

2. Each consecutive year, every returning athlete must complete a re-certification process. This process includes measurement of their blood pressure, pulse, height, and weight. At this time the returning athlete must also complete a re-certification form divulging any changes in their family history, own medical history, and medication usage. Any returning athlete showing abnormal vital signs, significant changes in height and weight, changes in family or personal medical history, or the desire to be seen by a team physician shall be referred at that time.

3. In addition to the forms pertaining to physicals and re-certification the student-athlete must provide the sports medicine staff with a completed Parent/Guardian Insurance Information Form and copies of the front and back of their insurance cards prior to participation. All Rider University student-athletes must have primary health insurance upon arrival at the university.

4. The physical or re-certification process and all forms must be completed before the athlete may participate in their chosen sport in any form.

5. Students who are not officially on the team's NCAA roster but who wish to "try out" or "walk on" to a team must first complete the physical process. If the student does not make the team and wishes to try again the following year they need only complete the re-certification process as long as their physical is on file in the sports medicine department.

XVII. Emergency Response Plan

**Personnel**

The responding personnel will vary from venue to venue based on coverage guidelines established by the sports medicine staff. In order to cover all the venues on the Rider University campus that athletes may be present will require cooperation between many groups. All of the following groups are considered an integral part of all or some of the venue specific emergency response plans.

Certified Athletic Trainers
Security Personnel
Coaches
Administrative Staff
Fitness Center Staff
Lifeguards

The following emergency response plans have been created to make all of the groups aware of their specific roles in a medical emergency.

**Communication**

Each venue specific emergency response plan identifies several ways in which EMS can be contacted and further help can be summoned. Many of the venues have a fixed telephone line that is easily accessible in case of an emergency, for those locations that do not, a cellular phone or walkie-talkie relay system will be used. **Note:** In the event that a member of the sports medicine staff is not on site during and emergency due to coverage guidelines it is the coach's responsibility to initiate the Emergency Response Plan.

**Equipment**

There will be at least three emergency response kits located on the Rider University campus. One will be located in the Athletic Training Room in Alumni Gymnasium. A portable version containing an Automatic External Defibrillator (AED) will be on site with a member of the sports medicine staff during all practices and competitions held on the upper fields (may be located on adjacent field). In addition to the two sports medicine emergency response kits there is also a permanently fixed case containing an AED and oxygen located in Alumni Gymnasium and the Maurer center. The Head Athletic Trainer will be responsible for the maintenance of the two sports medicine emergency response kits and the equipment permanently housed in Alumni Gymnasium and the Maurer Center. All equipment will be tested on a monthly basis. A third emergency response kit, including another AED, will be located in unit 4 of the security fleet. Each of the emergency response kits will contain the following equipment:

Emergency oxygen
Manual suction device
First aid supplies
Bag valve mask
Airway management equipment
Splinting materials
Emergency blankets

**Venue:** Alumni Gymnasium

**Emergency Personnel:** Certified Athletic Trainer on site for all practice and competitions during the traditional season, physicians (limited basis), additional athletic training staff accessible from the athletic training facility in Alumni Gymnasium, coaching staff, and Rider University Security Personnel for assistance and AED response.

**Emergency Communication:** Sports medicine cellular phone system or fixed telephone lines located in the athletic training facility, (609) 896-5052, (609) 896-6052.

**Emergency Equipment:** Permanently Fixed AED and oxygen in Alumni Gymnasium and emergency equipment upon arrival of sports medicine staff or security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Pittaro Baseball Field

**Emergency Personnel:** Certified Athletic Trainer on site for all practice and competitions during the traditional season, athletic training staff accessible from the athletic training facility in Alumni Gymnasium, coaching staff, and Rider University Security Personnel for assistance and AED response.

**Emergency Communication:** Sports medicine cellular phone system or fixed telephone lines located in the baseball dugout, (609) 896-2166 and athletic training facility, (609) 896-5052, (609) 896-6052.

**Emergency Equipment:** Sports medicine portable emergency response kit or campus security unit 4. AED upon arrival of sports medicine AED or arrival of security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance. **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Rider University Fitness Center

**Emergency Personnel:** Fitness Center staff and Rider University Security Personnel.

**Emergency Communication:** Fixed telephone lines located in the fitness center, (609) 896-5059

**Emergency Equipment:** Permanently Fixed AED and oxygen in the Maurer Center and emergency equipment upon arrival of sports medicine staff or security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to "flag down" and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Coppola Natatorium

**Emergency Personnel:** Certified Athletic Trainer on site for competitions only, on duty lifeguards (responsible for removal of victim from water), coaching staff, and Rider University security personnel.

**Emergency Communication:** Sports medicine cellular phone system or fixed telephone lines located on the pool deck, (609) 896-5318.

**Emergency Equipment:** Permanently Fixed AED and oxygen in the Maurer Center and emergency equipment upon arrival of sports medicine staff or security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to "flag down" and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Wrestling practice facility, Maurer Center

**Emergency Personnel:** Certified Athletic Trainer on site for all practices during the traditional season, coaching staff, and Rider University Security Personnel for assistance and AED response.

**Emergency Communication:** Sports medicine cellular phone system or fixed telephone lines located in the wrestling office, (609) 896-5201.

**Emergency Equipment:** Permanently Fixed AED and oxygen in the Maurer Center and emergency equipment upon arrival of sports medicine staff or security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to "flag down" and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Track and Field Hockey game field

**Emergency Personnel:** Certified Athletic Trainer on site for all competitions during the traditional season, additional athletic training staff accessible from adjacent fields, coaching staff, and Rider University Security Personnel for assistance and AED response.

**Emergency Communication:** Sports medicine cellular phone system, walkie-talkie relay system, or athletic staff cellular phones.

**Emergency Equipment:** Sports medicine portable emergency response kit or campus security unit 4. AED upon arrival of sports medicine AED or arrival of security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Softball Field

**Emergency Personnel:** Certified Athletic Trainer on site for all practice and competitions during the traditional season, additional athletic training staff accessible from adjacent fields, coaching staff, and Rider University Security Personnel for assistance and AED response.

**Emergency Communication:** Sports medicine cellular phone system, walkie-talkie relay system.

**Emergency Equipment:** Sports medicine portable emergency response kit or campus security unit 4. AED upon arrival of sports medicine AED or arrival of security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Field Hockey practice field

**Emergency Personnel:** Certified Athletic Trainer on site for all practice and competitions during the traditional season, additional athletic training staff accessible from adjacent fields, coaching staff, and Rider University Security Personnel for assistance and AED response.

**Emergency Communication:** Sports medicine cellular phone system, walkie-talkie relay system

**Emergency Equipment:** Sports medicine portable emergency response kit or campus security unit 4. AED upon arrival of sports medicine AED or arrival of security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Soccer game field, tennis courts, and practice fields

**Emergency Personnel:** Certified Athletic Trainer on site for all practice and competitions during the traditional season, additional athletic training staff accessible from adjacent fields, coaching staff, and Rider University Security Personnel for assistance and AED response.

**Emergency Communication:** Sports medicine cellular phone system or walkie-talkie relay system.

**Emergency Equipment:** Sports medicine portable emergency response kit or campus security unit 4. AED upon arrival of sports medicine AED or arrival of security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Facility Shed/Indoor batting cage

**Emergency Personnel:** Coaching staff, sports medicine staff from adjacent fields, and campus security.

**Emergency Communication:** Athletic department cellular phones. A coach should be always be present during batting cage practices.

**Emergency Equipment:** Sports medicine portable emergency response kit and campus security unit 4. AED upon arrival of sports medicine AED or arrival of security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.

**Venue:** Cross Country Course

**Emergency Personnel:** Certified Athletic Trainer on site for competitions, coaching staff, sports medicine staff from adjacent fields, and campus security.

**Emergency Communication:** Sports medicine cellular phone system, walkie-talkie relay system, or athletic department cellular phones.

**Emergency Equipment:** Sports medicine emergency response kit and campus security unit 4. AED upon arrival of sports medicine AED or arrival of security unit 4.

**Emergency Response:**

1. Immediate care of the injured or ill student-athlete

2. Emergency equipment retrieval

3. Activation of EMS

    a. Call Rider University Security at (609) 896-5321, provide dispatcher with name, location, telephone number, number of victims, condition of victims, specific directions to the site including the best building entrance (front, back, or athletic training facility). **(see map)**

    b. **Sports medicine staff should identify themselves and request that an ambulance is dispatched immediately, otherwise this will not happen until campus security has assessed the situation.**

    c. Contact other members of the sports medicine staff if present on campus and further assistance is needed.

4. Directions of EMS to the scene

    a. Available security unit will proceed to the predetermined entrance, and direct EMS to the location. Security will also be responsible for opening any access gates necessary to get to the site.

    b. Designated individual to “flag down” and direct EMS to the scene.

    c. Scene Control: limit the scene to emergency responders only, campus security may assist emergency personnel with this task.

**Venue Directions:** See provided map for best campus and building entrances.