

ANYONE CAN SAVE A LIFE



# Emergency Action Planning Guide

for after-school practices and events



Plan. Learn. Save.

Developed and  
supported by



Minnesota State  
High School League



**Medtronic**  
PHILANTHROPY

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*All handouts and resources can be copied from this book or downloaded electronically from our website at:*  
[www.anyonecansavealife.org](http://www.anyonecansavealife.org).



# About Anyone Can Save A Life

This program is a first-of-its-kind emergency action program for after-school practices and events. It is designed to provide a coordinated response to every emergency, including sudden cardiac arrest (SCA), a leading cause of death among adults and student athletes nationwide.

By implementing **Anyone Can Save A Life** – and establishing Student Response Teams – your school is empowering students to be part of the coordinated response necessary to ensure the best possible outcome to every emergency.

**The goal is to save lives by immediately responding to life-threatening emergencies with a simple protocol:**



**Calling 911 to alert the Emergency Medical System (EMS)**



**Early cardiopulmonary resuscitation (CPR)**



**Early use of an automated external defibrillator (AED)**



**Early transition to EMS**

Emergencies go hand-in-hand with after-school participation, so it is not a matter of if an emergency will happen, it's a matter of when. By having an Emergency Action Plan (EAP) in place, you are preparing your school community to respond immediately to get the help that is needed.

*Anyone Can Save A Life* was originally developed and released in 2008 as a joint effort of the Minnesota State High School League and the Medtronic Foundation. This newly updated national version, funded by the NFHS Foundation, is designed to be a turn-key solution for every school wishing to implement an emergency action plan program for after-school practices and events.

## Everything You Need to Implement the Program

This guide will walk you through the steps necessary to implement **Anyone Can Save A Life** in your school. It provides resources to put an EAP in place, train staff, and educate students and parents. Each tab contains all the instructions, handouts, and forms you need to implement the program. In addition, there are additional resources that cover all aspect of preparing your building and training your staff to handle life-threatening emergencies.



**If your school needs additional AEDs to meet the 3-minute goal throughout your school campus, contact your district's Health and Safety Coordinator or designee to investigate funding options. Grants may be available.**

ANYONE CAN SAVE A LIFE 

# Program Implementation: Getting Started

## Introduction

### Who is Responsible?

The Athletic or Activities Administrator must oversee and coordinate **Anyone Can Save A Life** for after-school programs. However, he or she may want to enlist the help of a Program Champion to oversee training and implementation of the program. This person could be the school athletic trainer, school nurse, a coach or community member who knows the inner-workings of the athletic and activities program.

## Athletic Administrator Implementation Checklist





- 1. Review the in-person training DVD and on-line training at [AnyoneCanSaveALife.org](http://AnyoneCanSaveALife.org)**
- 2. Choose the training method you will utilize in your school community (Option 1 or Option 2)**
  - OPTION 1**
    - Conduct In-Person Training (DVD)**
      - Utilize the EAP on Page 10 – Provide a hard copy of the EAP prior to the training and COLLECT the completed EAP
    - OPTION 2**
      - Conduct On-line Training ([www.anyonecansavealife.org](http://www.anyonecansavealife.org))**
        - The EAP will be generated electronically – The final step when the coach completes the EAP will be inputting the ADs email address. The completed EAP will be sent electronically to the AD and the Coach
- 3. Train Coaches**
- 4. Ensure Coaches turn in their completed EAP**
  - a. **In-Person Training** — Collect the hard copy of the EAP
  - b. **On-Line Training** — EAP will be sent via email to the AD and Coach
- 5. Provide CPR and AED Training**
  - a. Contact local EMS if assistance is needed, or
  - b. Utilize the **Anyone Can Save A Life Training DVD**
- 6. Ensure you have access to at least one AED and that it is located in a central location close to your event and practice sites**
- 7. Complete the EAP for Events**
  - a. Talk through each site specific plan with your Event Staff

# Understanding the Emergency Action Plan

Creating a team-specific Emergency Action Plan (EAP) is easy. A designated coach in every sport and at every level will identify several students to be involved in the EAP. These students will make-up four unique teams—the **911 TEAM**, **CPR TEAM**, **AED TEAM** and **HEAT STROKE TEAM**. Each team will have specific jobs and information they will need to know and practice to be prepared to respond effectively.

The designated coach and students in every sport, at every level, will complete the EAP and then practice it, and in doing so will have an effective coordinated response to every emergency without panic or confusion.

Your EAP needs students assigned to **4 TEAMS** for it to work effectively:

- TEAM 1**  **911 Team (6 students)**
- TEAM 2**  **CPR Team (4 students)**
- TEAM 3**  **AED Team (4 students)**
- TEAM 4**  **HEAT STROKE Team (4 students)**

For each team there are **2 STEPS** that must be completed:

**STEP 1 Identify WHAT the TEAM needs to know**

**STEP 2 Identify WHO will be on each TEAM**

**Complete your Emergency Action Plan by completing STEP 1 and STEP 2 for each TEAM and then record your answers on the [Emergency Action Plan Worksheet](#).**





# TEAM 1 – 911 Team

## STEP 1 – WHAT THE TEAM NEEDS TO KNOW



**Where is the closest phone to both practice and events?**

**TIP** *This phone can be a landline or a cell phone. If a cell phone is designated, make sure that team members know who has it.*



**What is the closest cross-street intersection to the access point for both practices and events?**

**TIP** *A street address isn't good enough. Use a cross-street intersection location so an ambulance can reach you quickly.*



**What is the best access point (entry door or gate) for the ambulance to arrive for both practice and events?**

**TIP** *This is important, because the door that is regularly used to access the school may not be the quickest access for EMS.*

## STEP 2 – ASSIGN THE TEAM



– **2 Students** will **call 911** and explain the details of the emergency and provide the location and access point for the ambulance.



– **2 Students** will go to the **access point** to meet the ambulance and then take EMS to the victim.



– **2 Students** will **call the Athletic Trainer and Athletic Director** to let them know there is an emergency.

**TIP** *When team members know where the phone is, the cross-street intersection and the best entry door or gate for the ambulance to arrive to, it can make all the difference in the outcome of a medical emergency.*





## TEAM 2 – CPR Team

### STEP 1 – WHAT THE TEAM NEEDS TO KNOW



Are the students assigned to the CPR TEAM trained in CPR? They must be prior to being assigned to this team.

### STEP 2 – ASSIGN THE TEAM



– **3 Students** will assist the coach in providing CPR until the ambulance arrives.

**TIP** You may have to wait to complete this section until you know which of your students are trained in CPR.



## TEAM 3 – AED Team

### STEP 1 – WHAT THE TEAM NEEDS TO KNOW



Where is the closest AED to practice and events?



What is the typical location of the athletic trainer during your sports season for practices and events?

### STEP 2 – ASSIGN THE TEAM



– **2 Students** will retrieve the AED.



– **2 Students** will find the trainer and bring them to the victim.



# TEAM 4 – HEAT STROKE Team

## STEP 1 – WHAT THE TEAM NEEDS TO KNOW



Where is the emersion tub located?



Where is the source for water, ice and towels?

## STEP 2 – ASSIGN THE TEAM



– **2 Students** will be assigned from only ONE sport/team to **fill the tub daily**. Notify each program as to whose responsibility it is to fill the tub and record their name and sport.



– **2 Students** will be assigned to know the location of the **water, ice and towel source** and will get these items if a heat illness occurs.

**TIP** *The location of the emersion tub and its proximity will determine which sport will be responsible for filling the tub daily.*

**Once the EAP has been completed, the athletic administrator should review for accuracy and provide a copy back to the coach.** In addition, the AD must coordinate a practice session or ensure the coach conducts a practice session 2-3 times throughout the season.





# Option 1

## In-Person Coach/Advisor Training

### Training Preparation

1. Review Training DVD located on the back cover
2. Schedule the training
3. Make copies of the following handouts included within this tabbed section
  - Emergency Action Plan Worksheet
  - Sudden Cardiac Arrest Facts
  - Symptoms and Risk Factors for Sudden Cardiac Arrest
  - Directions
4. **If you are including CPR and AED Training, have CPR manikins and an AED trainer available**
  - If your school does not have CPR manikins or an AED trainer available, contact your local EMS to provide devices and training

***Refer to the statute in your state to determine the level of CPR/AED training needed***

### Training

1. Provide handouts to participants
2. Play the Training DVD
3. When prompted by the DVD, instruct the Coaches and Advisors to complete the following segments of the Emergency Action Plan (EAP) Worksheet:
  - Emergency Contacts
  - Nearest AED to your practice and event venues
  - EMS Access Point for practice and event venues
  - Cross Street Intersection for practice and event venues
4. **Instruct the Coaches and Advisors to complete the following with their team or group:**
  1. Discuss the importance of each student's role on the Student Response team and how it works
  2. Assign students to each role: 911 Call Team, CPR/AED Team, AED Retrieval Team
  3. Use the worksheet as the guide to assign roles, discuss responsibilities and relevant information
  4. Return the completed EAP Worksheet to the Athletic/Activities Administrator. Retain a copy to keep on hand throughout the season
5. **Follow up with Coaches and Advisors to collect their completed EAP Worksheet**
  - Make a copy for file, return original to Coach/Advisor

# Emergency Action Plan Worksheet – Student Response Team

Coach/Advisor Name:	Activity:	Level:
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## 1 911 TEAM

CALL 911	
CALL 911. Explain emergency. Provide location.	
PRACTICE	EVENTS
Closest Phone	
EMS Access Point	
Street Intersection	
Student 1	
Student 2	

MEET AMBULANCE at EMS Access Point. Take to victim.	
PRACTICE	EVENTS
Entry Door/Gate	
Student 1	
Student 2	

CALL CONTACTS. Provide location and victim's name.	
NAME	CELL
Athletic Trainer	
Athletic AD	
Student 1	
Student 2	

## 2 CPR/AED TEAM

START CPR	
1. Position person on back.	
2. Put one hand on top of the other on middle of person's chest. Keeping arms straight, push hard and fast, 100 presses/minute. Let chest completely recoil after each compression.	
3. Take turns with other responders as needed	
Coach	
Student 1	
Student 2	
Student 3	

WHEN AED ARRIVES, TURN IT ON AND FOLLOW VOICE PROMPTS	
1. Remove clothing from chest.	
2. Attach electrode pads as directed by voice prompts.	
3. Stand clear while AED analyzes heart rhythm.	
4. Keep area clear if AED advises a shock.	
5. Follow device prompts for further action.	
6. After EMS takes over, give AED to Athletic Administrator for data download.	

## 3 AED TEAM

GET THE AED	
PRACTICE	EVENTS
Closest AED	
Student 1	
Student 2	

GET THE ATHLETIC TRAINER	
Typical location	
Student 1	
Student 2	

CALL 911 for all medical emergencies. If unresponsive and not breathing normally, begin CPR and get the AED.

## 4 HEAT STROKE TEAM

PREPARE TUB DAILY	
PRACTICE	EVENTS
Tub Location	
Water Source Location	
Ice Source Location	
Ice Towel Location	
Student 1	
Student 2	

PREPARE TUB DAILY	
PRACTICE	EVENTS
Student 1	
Student 2	
1. Remove equipment/excess clothing. Move to shade.	
2. Immerse athlete into cold ice water tub, stir water. *If no tub: cold shower or rotating cold, wet towels over the entire body	
3. Monitor vital signs.	
4. Cool First, Transport Second. <ul style="list-style-type: none"> <li>a. Cool until rectal temperature reaches 102°F if ATC or MD is available.</li> <li>b. If no medical staff, cool until EMS arrives.</li> </ul>	

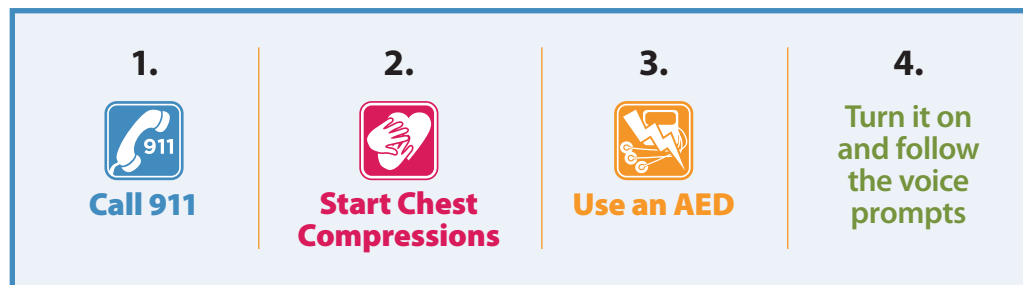
# Sudden Cardiac Arrest Facts

## The Condition

- Almost 400,000 people in the U.S. suffer sudden cardiac arrest (SCA) each year, yet less than 10% survive.
- SCA occurs when the heart suddenly and unexpectedly stops beating.
- At any one time, an estimated 20% of the U.S. population congregates on school grounds, increasing the likelihood of school-based cardiac emergencies.
- In children and adolescents, the causes of SCA are varied and include heart conditions that result from abnormal heart structure or function, primarily electrical abnormalities, and outside factors such as a sudden blow to the chest or drug use.
- Every 3 days a young competitive athlete dies of SCA in the U.S.
- A victim of sudden cardiac arrest will often complain of feeling “faint” or dizzy, usually during or just after exercise. They will rapidly become unconscious and may gasp for breath for a short time.

## The Treatments

- Victims of SCA can be brought back to life by providing chest compressions and early defibrillation with an automated external defibrillator (AED).
- Every second counts. When SCA occurs, chest compressions and the use of an AED need to start immediately.
- Survival rates decrease by 10% with each minute of delay.
- There is a 5- to 6-minute window before death or irreparable brain damage occurs.
- The AED can only help and will only deliver a shock if it is needed.
- The AED is very easy to use. Just turn it on and follow the voice prompts.
- Since anyone might witness a collapse, it is important for all staff members, parents, and athletes to have some general awareness of what sudden cardiac arrest looks like and what the action steps are to help:



# Symptoms and Risk Factors for Sudden Cardiac Arrest

Educating youth about the symptoms and risk factors of sudden cardiac arrest is one way to help prevent it. In more than half of the cases of SCA in youth, death is the first sign of a problem. Young people are often unaware of the risk factors and don't tell adults if they experience the symptoms. They may be frightened, embarrassed, or simply unaware that what they are feeling indicates a potentially fatal condition.

Athletes don't want to jeopardize their playing time, so they may also avoid telling their parents or coaches in hopes that the symptoms will "just go away" on their own. Let student athletes know that if they experience any of the symptoms below, it is crucial to get follow-up care right away with a primary care physician.

## **The symptoms below indicate that SCA may be about to happen:**

- Racing heart, palpitations
- Dizziness or light-headedness
- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise
- Excessive shortness of breath during exercise

## **The following factors increase risk of SCA:**

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of long QT syndrome, Brugada syndrome, hypertrophic cardiomyopathy, or arrhythmogenic right ventricular dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning, or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs such as cocaine, inhalants, or "recreational" drugs



## Option 2

# On-Line Coach/Advisor Training

## Training Preparation

1. Provide Coaches/Advisors with the URL for the on-line training: [www.anyonecansavealife.org](http://www.anyonecansavealife.org)
2. Make copies of the following handouts included under this tab to give to participants prior to training:
  - Instructions for Completing On-Line Training
  - Emergency Action Plan Worksheet
  - Sudden Cardiac Arrest Facts
  - Symptoms and Risk Factors for Sudden Cardiac Arrest
3. Follow up with Coaches and Advisors to collect their completed EAP Worksheet
4. Make a copy to file, and then return original to Coach/Advisor to keep on hand throughout the season

# Instructions for Completing On-Line Training

1. Review the following handouts from your Athletic/Activities Administrator:
  - Emergency Action Plan Worksheet
  - Sudden Cardiac Arrest Facts
  - Symptoms and Risk Factors for Sudden Cardiac Arrest
2. Go to [www.anyonecansavealife.org](http://www.anyonecansavealife.org) website to complete the e-learning module and electronic EAP
3. Coaches and Advisors to complete the following with their team or group:
  - a. Discuss the importance of each student's role on the Student Response Team and how it works
  - b. Assign students to each role: 911 Call Team, CPR/AED Team, AED Retrieval Team
  - c. Use the worksheet as the guide to assign roles, discuss responsibilities, and relevant detailed information
4. Return the completed EAP Worksheet to the Athletic/Activities Administrator
5. Retain a copy to keep on hand throughout the season



*After online training, be sure to review duties with your student EAP team. If you want to conduct a training drill, see your Athletic/Activities Administrator for instructions and a report card.*

# Emergency Action Plan Worksheet – Student Response Team

Coach/Advisor Name:	Activity:	Level:
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## 1 911 TEAM

CALL 911		
CALL 911. Explain emergency. Provide location.		
PRACTICE	EVENTS	
Closest Phone		
EMS Access Point		
Street Intersection		
Student 1		
Student 2		

MEET AMBULANCE at EMS Access Point. Take to victim.		
PRACTICE	EVENTS	
Entry Door/Gate		
Student 1		
Student 2		

CALL CONTACTS. Provide location and victim's name.		
NAME	CELL	
Athletic Trainer		
Athletic AD		
Student 1		
Student 2		

## 2 CPR/AED TEAM

START CPR	
1. Position person on back.	
2. Put one hand on top of the other on middle of person's chest. Keeping arms straight, push hard and fast, 100 presses/minute. Let chest completely recoil after each compression.	
3. Take turns with other responders as needed	
Coach	
Student 1	
Student 2	
Student 3	

WHEN AED ARRIVES, TURN IT ON AND FOLLOW VOICE PROMPTS	
1. Remove clothing from chest.	
2. Attach electrode pads as directed by voice prompts.	
3. Stand clear while AED analyzes heart rhythm.	
4. Keep area clear if AED advises a shock.	
5. Follow device prompts for further action.	
6. After EMS takes over, give AED to Athletic Administrator for data download.	

## 3 AED TEAM

GET THE AED		
PRACTICE	EVENTS	
Closest AED		
Student 1		
Student 2		
GET THE ATHLETIC TRAINER		
Typical location		
Student 1		
Student 2		

CALL 911 for all medical emergencies. If unresponsive and not breathing normally, begin CPR and get the AED.

## 4 HEAT STROKE TEAM

PREPARE TUB DAILY		
PRACTICE	EVENTS	
Tub Location		
Water Source Location		
Ice Source Location		
Ice Towel Location		
Student 1		
Student 2		

HEAT STROKE TEAM		
PRACTICE	EVENTS	
Student 1		
Student 2		

1. Remove equipment/excess clothing. Move to shade.
2. Immerse athlete into cold ice water tub, stir water.
  - \*if no tub: cold shower or rotating cold, wet towels over the entire body
3. Monitor vital signs.
4. Cool First, Transport Second.
  - a. Cool until rectal temperature reaches 102°F if ATC or MD is available.
  - b. If no medical staff, cool until EMS arrives.

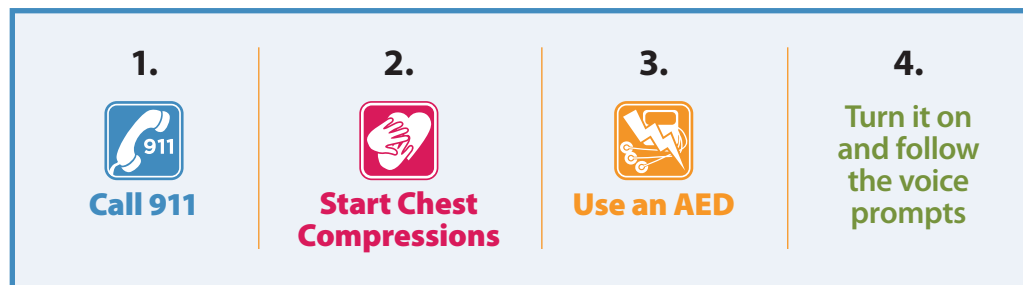
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## The Treatments

- Victims of SCA can be brought back to life by providing chest compressions and early defibrillation with an automated external defibrillator (AED).
- Every second counts. When SCA occurs, chest compressions and the use of an AED need to start immediately.
- Survival rates decrease by 10% with each minute of delay.
- There is a 5- to 6-minute window before death or irreparable brain damage occurs.
- The AED can only help and will only deliver a shock if it is needed.
- The AED is very easy to use. Just turn it on and follow the voice prompts.
- Since anyone might witness a collapse, it is important for all staff members, parents, and athletes to have some general awareness of what sudden cardiac arrest looks like and what the action steps are to help:



# Symptoms and Risk Factors for Sudden Cardiac Arrest

Educating youth about the symptoms and risk factors of sudden cardiac arrest is one way to help prevent it. In more than half of the cases of SCA in youth, death is the first sign of a problem. Young people are often unaware of the risk factors and don't tell adults if they experience the symptoms. They may be frightened, embarrassed, or simply unaware that what they are feeling indicates a potentially fatal condition.

Athletes don't want to jeopardize their playing time, so they may also avoid telling their parents or coaches in hopes that the symptoms will "just go away" on their own. Let student athletes know that if they experience any of the symptoms below, it is crucial to get follow-up care right away with a primary care physician.

## **The symptoms below indicate that SCA may be about to happen:**

- Racing heart, palpitations
- Dizziness or light-headedness
- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise
- Excessive shortness of breath during exercise

## **The following factors increase risk of SCA:**

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- Specific family history of long QT syndrome, Brugada syndrome, hypertrophic cardiomyopathy, or arrhythmogenic right ventricular dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning, or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs such as cocaine, inhalants, or "recreational" drugs






# Event Staff Training


## To be completed by the Athletic/Activities Administrator


1. Complete the Emergency Action Plan for the specific venue.
2. Distribute and review the completed Emergency Action Plan Worksheet with event staff and assign roles.
3. The first trained adult on the scene will be the lead responder and will provide directions to the other responders.
4. Provide a copy of the Emergency Action Plan at the scoring table.
5. Post a copy of the Emergency Action Plan near the phone.
6. Review locations of AED's on the school's campus.
7. Provide CPR and AED training.

# Emergency Action Plan Worksheet – Event Staff

Activity:	Location:
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<b>1</b>	<b>911 TEAM</b>	
<b>CALL 911</b>		
<b>CALL 911. Explain emergency. Provide location.</b>		
Closest Phone	EVENTS	
EMS Access Point		
Street Intersection		
<b>MEET AMBULANCE at EMS Access Point. Take to victim.</b>		
EMS Access Point	EVENTS	
Street Intersection		
<b>CALL CONTACTS. Provide location and victim's name.</b>		
	NAME	CELL
Athletic Trainer		
Athletic AD		
Principal		

<b>2</b>	<b>CPR/AED TEAM</b>	
<b>START CPR</b>		
1. Position person on back.	<ol style="list-style-type: none"> <li>2. Put one hand on top of the other on middle of person's chest. Keeping arms straight, push hard and fast, 100 presses/minute. Let chest completely recoil after each compression.</li> <li>3. Take turns with other responders as needed</li> </ol>	
Responder 1		
Responder 2		
Responder 3		
<b>WHEN AED ARRIVES, TURN IT ON AND FOLLOW VOICE PROMPTS</b>		
1. Remove clothing from chest.	<ol style="list-style-type: none"> <li>2. Attach electrode pads as directed by voice prompts.</li> <li>3. Stand clear while AED analyzes heart rhythm.</li> <li>4. Keep area clear if AED advises a shock.</li> <li>5. Follow device prompts for further action.</li> <li>6. After EMS takes over, give AED to Athletic Administrator for data download.</li> </ol>	
2. Attach electrode pads as directed by voice prompts.		
3. Stand clear while AED analyzes heart rhythm.		
4. Keep area clear if AED advises a shock.		
5. Follow device prompts for further action.		
6. After EMS takes over, give AED to Athletic Administrator for data download.		

<b>3</b>	<b>AED TEAM</b>	
<b>GET THE AED</b>		
Closest AED	EVENTS	
<b>GET THE ATHLETIC TRAINER</b>		
Typical location		

CALL 911 for all medical emergencies. If unresponsive and not breathing normally, begin CPR and get the AED.



# Symptoms and Risk Factors for Sudden Cardiac Arrest

Educating youth about the symptoms and risk factors of sudden cardiac arrest is one way to help prevent it. In more than half of the cases of SCA in youth, death is the first sign of a problem. Young people are often unaware of the risk factors and don't tell adults if they experience the symptoms. They may be frightened, embarrassed, or simply unaware that what they are feeling indicates a potentially fatal condition.

Athletes don't want to jeopardize their playing time, so they may also avoid telling their parents or coaches in hopes that the symptoms will "just go away" on their own. Let student athletes know that if they experience any of the symptoms below, it is crucial to get follow-up care right away with a primary care physician.

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- Family members with unexplained fainting, seizures, drowning or near drowning, or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs such as cocaine, inhalants, or "recreational" drugs



# Athlete Self-Check

## Nobody Knows You Better than You!

Are you at risk for sudden cardiac arrest? Although rare in young people compared to adults, each death from SCA is unexpected and devastating for family and friends, the school, and the community. Recent studies have shown that SCA is the leading cause of death among high school and college athletes.

Sudden cardiac arrest is often the first symptom of a heart problem. But there are other signs and symptoms you should know about. If you check 'yes' on any of these questions, make sure you give this Athlete Self-Check to a parent or guardian, and visit your primary care physician for further evaluation and possible referral to a heart specialist.

### Check one for each question:

Yes	No	Unsure	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I sometimes feel unable to exercise.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have had chest pain or chest tightness during or after exercise.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	My heart has skipped beats, beats very fast, or fluttered unexpectedly.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have had unexplained shortness of breath during or after exercise.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have had unexplained fatigue or tiredness during or after exercise.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have had unexplained seizures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have passed out or nearly fainted (especially during or after exercise).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have a relative that died suddenly (unexplained drowning, car accident, sudden cardiac event).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have a family member that has a genetic or inherited heart condition.

**If you are experiencing these symptoms but feel embarrassed or worried that you won't be able to participate in your sport of choice, please remember:**

- These symptoms are very serious. Several athletes in recent years that died of SCA had these symptoms. Friends and family members mentioned them later, not knowing they were symptoms of a life-threatening disease or condition.
- Athletes that speak up about their symptoms and get a full cardiac evaluation often go on to have the underlying problem resolved and participate in the sport of their choice.

# Coordinate with Local Emergency Medical Systems (EMS) Sample Letter

Dear [NAME OF LOCAL EMS PERSON],

As part of our commitment to the health and safety of our students, families, visitors, and staff,

[YOUR SCHOOL NAME] has acquired automated external defibrillators and implemented the

Anyone Can Save A Life program. This program assists school administrators, coaches, event staff,

and students in being prepared to respond to life-threatening emergencies during practices and events that take place during after-school hours.

- Below are the AED locations at our facility: [LIST LOCATIONS OF AEDs]
- We have implemented an Emergency Action Plan as outlined in the Anyone Can Save a Life program.
- We have [NUMBER AND BRAND OF DEVICE] AEDs.
- The AEDs were placed with the assistance of [LIST THOSE SOURCES, IF ANY].
- Coaches, advisors, and event staff know the location of AEDs.
- Our responders have been trained to implement the Emergency Action Plan and have been trained in CPR and AED operation.

Please contact me if you have any questions or concerns, or would like to visit our facility in this regard.

Sincerely,

[SCHOOL ADMINISTRATOR NAME]

[TITLE]

[CONTACT INFORMATION]



*This sample letter can be downloaded electronically from our website at: [www.anyonecansavealife.org](http://www.anyonecansavealife.org).*



# “Drop the Dummy” Training Drill Instructions

## Planning the Drill

### When:

Each Coach should conduct a drill once per year per sport. Do not tell the athletes exactly when you will do the drill.

### Who:

The drill will involve:

- Your student responder teams
- Your Athletic Administrator and/or your Athletic Trainer
- An objective observer to “drop the dummy” and fill out the Drill Report Card

### Materials required:

- Manikin with a T-shirt
- AED trainer
- Telephone (unconnected)
- First aid kit
- Real AED in its usual location
- Drill Report Card

## Conducting the Drill

1. Have the objective observer place the manikin on the floor in a visible location sometime during your practice. That person can shout, “Someone has collapsed and they’re not breathing. We need help.”
2. Enlist your response team with the agreed-upon phrase.
3. Your observer will fill out the Drill Report Card, recording the times at which each event occurs.
4. When the real AED arrives, the observer gives them the AED trainer to use, and encourages the Rescuer to carry on as if this were a real cardiac arrest.

## After the Drill

Congratulate everyone and then take a few minutes to go over the Drill Report Card together, checking the times for each action.

1. Ask everyone how they felt about the drill and discuss any concerns.
2. Evaluate the Drill Report Card and see if there are any action steps that need to be taken. Were there any communication problems?
3. If the drill indicates any needed changes, discuss these with your response team and Athletic Administrator, make the changes and communicate them clearly to your team, then plan to have another drill that same season to test the new plan.

# “Drop the Dummy” Drill Report Card

SEASON: \_\_\_\_\_ SPORT: \_\_\_\_\_ COACH RUNNING THE DRILL: \_\_\_\_\_

Time drill started: \_\_\_\_\_

Time drill stopped: \_\_\_\_\_

1. Time victim discovered (Rescuer 1): \_\_\_\_\_
2. Staff member's response (check one):
  - Called for help (vocal): \_\_\_\_\_
  - Called for help (phone): \_\_\_\_\_
  - Assessed victim first, then called for help: \_\_\_\_\_
  - Ran for help: \_\_\_\_\_
  - Other: \_\_\_\_\_
3. Time rescue team arrived on scene: \_\_\_\_\_
4. How many people responded to scene: \_\_\_\_\_
5. Who was contacted by phone: 911, Athletic Director, Athletic Trainer, other? \_\_\_\_\_
6. Time 911 was called: \_\_\_\_\_
7. Time other staff/officials notified: \_\_\_\_\_
8. Did Rescuer direct others to await EMS? \_\_\_\_\_
9. Time AED sent for: \_\_\_\_\_
10. Time CPR started: \_\_\_\_\_
11. CPR started by Rescuer who discovered victim? Yes \_\_\_ No, performed by: \_\_\_\_\_
12. Is the Rescuer doing hard, fast chest compressions, 100 per minute? \_\_\_\_\_
13. Time AED arrived: \_\_\_\_\_
14. Time AED applied to victim: \_\_\_\_\_
15. Who performed AED functions: \_\_\_\_\_
16. Time other school staff arrived: \_\_\_\_\_
17. Time EMS arrived on the scene: \_\_\_\_\_

## QUESTIONS:

What did the Rescuers do right? \_\_\_\_\_

What could the Rescuers do better? \_\_\_\_\_

What was easy to remember to do? \_\_\_\_\_

What was hard to remember to do? \_\_\_\_\_

# AED Inspection Readiness Inventory

NAME OF INDIVIDUAL RESPONSIBLE: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ SCHOOL YEAR: \_\_\_\_\_

Please complete this checklist for all AED's currently located in your building/facility.

SAMPLE		BATTERY IS FUNCTIONING											
		Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
AED #	2009-3												
Location	North Gym												
Pad Exp. Date	3/2017	X	X	X	X	X	X	X					
Battery Exp. Date	5/2017												

AED #		Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
Location													
Pad Exp. Date													
Battery Exp. Date													

AED #		Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
Location													
Pad Exp. Date													
Battery Exp. Date													

AED #		Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
Location													
Pad Exp. Date													
Battery Exp. Date													

AED #		Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
Location													
Pad Exp. Date													
Battery Exp. Date													

AED #		Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
Location													
Pad Exp. Date													
Battery Exp. Date													

AED #		Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
Location													
Pad Exp. Date													
Battery Exp. Date													

# After Use of the AED: What To Do Following an SCA Event

## 1. Document the SCA event.

- a. Complete the Emergency Summary Form no more than 24 hours following the event.
- b. Give the Emergency Summary Form and all other documentation to the Health and Safety Coordinator or designee at your school within 24 hours post-event.

**Note:** The Emergency Summary Form is a part of the patient-care record and is confidential to both the patient and your school. This report is not to be altered once it is completed. Discussion of all aspects of the event is to be limited to team members in a formal debriefing session. To prevent violation of patient confidentiality and liability for your school, team members are to refrain from open discussion about any aspects of the medical event. Your EMS agency, Medical Director, and Attending Physician will have access to all appropriate records/downloaded data and will maintain confidential Federal HIPPA guidelines. Any dissemination of records will only be conducted after receiving appropriate patient release and consent.

## 2. Check AED and put back in state of readiness.

Contact the Health and Safety Coordinator at your school to help assist with the post-incident download, debrief, and device re-pack. Check the AED visually for damaged or missing parts, replace all supplies used during the event, download the AED data, run a battery-insertion test and replace the battery if indicated, and return the AED to its designated area for future use.

## 3. Debrief the Response Team following a resuscitation attempt.

It is critical to go over positive and negative aspects of the response and determine the possible need for changes based on the experience. Counseling should also be offered to the response team and others who may be emotionally affected by the event.

- a. Review the Emergency Summary Form at the debriefing session with your Response Team, ideally within 48 hours of the incident.
- b. Discuss what went well and what you would do differently.
- c. If the resuscitation attempt was unsuccessful, affirm to the team they did their best and that many people die despite receiving timely and appropriate care for SCA.
- d. If appropriate, and with the help of a School Counselor, follow the steps of Critical Incident Stress Debriefing as outlined by the American Academy of Experts in Traumatic Stress.

# Emergency Summary Form

At the conclusion of a cardiac emergency, the Athletic/Activities Administrator should provide the lead responder with a copy of the emergency summary form. The lead responder must complete and return the form to the administration within 24 hours.

Location of event:		
Date of event:		
Time of event:		
Victim's name:		
Was the event witnessed or unwitnessed?	<input type="checkbox"/> Witnessed	<input type="checkbox"/> Unwitnessed
Name of trained Rescuer(s):		
Was 9-1-1 called?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, name of 9-1-1 caller:		
Where there signs of life at assessment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was CPR started before the AED arrived?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, name(s) of CPR Rescuer(s):		
Were shocks administered?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Total number of shocks?		
Did victim regain a pulse?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did victim resume breathing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did victim regain consciousness?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was victim transported by the EMS?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, please explain:		
Any problems encountered?		
Did the EMS encounter any problems accessing the venue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please explain:		
Additional comments:		
Name of person completing form:		



# Emergency Debriefing Guidelines

It is critical to go over positive and negative aspects of the SCA incident and determine possible need for changes to the Emergency Action Plan based on the experience. Counseling should also be offered to the Response Team and others who may be emotionally affected by the event.

1. Review the Emergency Summary Form at the debriefing session with your Response Team, ideally within 48 hours of the incident.
2. Discuss what went well, and what you would do differently. Adjust the Emergency Action Plan as needed.
3. If the resuscitation attempt was unsuccessful, affirm the team they did their best, and that many people die despite receiving timely and appropriate care for SCA.
4. If appropriate, and with the help of a School Counselor, follow the steps of Critical Incident Stress Debriefing as outlined by the American Academy of Experts in Traumatic Stress.

## Seven Key Points for Critical Incident Stress Debriefing

1. Assess individuals' situational involvement, age, level of development, and degree of exposure to the critical incident or event. Consider that different aged individuals, for example, may respond differently based on their developmental understanding of the event.
2. Discuss issues surrounding safety and security that may surface, particularly with children. Feeling safe and secure is of major importance when, suddenly and without warning, individuals' lives are shattered by tragedy and loss.
3. Allow ventilation and validation for each team member, in their own way, to discuss their exposure, sensory experiences, thoughts and feelings tied to the event.
4. Assist in predicting future events. This involves education about and discussion of the possible emotions, reactions, and problems that may be experienced after exposure to trauma.
5. Conduct a thorough review of the physical, emotional, and psychological impact of the critical incident on the individuals present. Carefully listen and evaluate their thoughts, mood, affect, choice of words, and perceptions of the critical incident and look for potential clues suggesting problems in terms of managing or coping with the tragic event. Refer these individuals to a professional counselor.
6. Provide a sense of closure. Give information about ongoing support services and resources to the response team.
7. A thorough review of the events surrounding the traumatic situation can be advantageous for the healing process to begin.

*Source: Providing Critical Incident Stress Debriefing (CISD) to Individuals and Communities in Situational Crisis  
Joseph A. Davis, Ph.D., LL.D.(hon), B.C.E.T.S., F.A.A.E.T.S.  
Member, The American Academy of Experts in Traumatic Stress Board of Scientific and Professional Advisors*

# Media Response Guidelines

Any crisis in a school will generate intense interest from the public and the media. It is critical to be prepared for this attention and scrutiny and be ready to communicate during difficult times. The goal is to share information about the situation as quickly as possible with staff members, parents, and community members. The following guidelines may be used when working with the media or communicating during a crisis situation.

- Notify the District Superintendent's office or the Director of Communications when a crisis situation occurs.
- Unless otherwise designated, the Director of Communications will serve as the district's spokesperson with the media during a crisis situation. If another administrator is designated as the spokesperson, the Director of Communications will provide assistance in preparing statements to the media.
- All calls from the media should be referred to the Director of Communications.
- Statements about the crisis situation will be made as soon as possible. The district will share as much information as possible, but will only share information that is factual and can be confirmed. Other updates will be provided to the media and public as more information becomes available.
- Schools are not required to allow media access to facilities during a crisis or at any other time. Principals have the authority to allow or deny access to the campus. Media are allowed on public property near school grounds.
- The Director of Communications will coordinate with information officers from other agencies responding to the crisis.
- Along with sharing information with the media, the department of communications will use other strategies to share information with parents as quickly as possible.
- Depending on the situation, a designated area will be established for the media. Regular updates will be provided to the media by the Director of Communications.
- Students and staff members are not obligated to talk to the media. Unless designated as a spokesperson, staff members should refer all media inquiries to the Director of Communications.

## Handling the Media

The following are basic tips to follow when responding to the media:

- Do not speculate, make judgments, or draw conclusions.
- Only provide information that can be confirmed.
- Do not comment on issues or situations outside of your area of expertise and responsibility.
- A media interview is your opportunity to communicate your message. In an interview, have three or four key points to convey and remain focused on sharing the messages.
- Never use "no comment" as a response. Reporters may assume you are hiding something. Use "I don't know" or "I'm sorry, I'm not able to answer that question at this time."
- Never make "off the record" comments. Only share information with reporters that you are willing to have shared with others.
- Do not offer "exclusives" to a particular reporter. Information that is shared with one reporter should be shared with all reporters.

## Data Privacy Information

- You may disclose that an incident occurred (i.e. the date and time), but DO NOT disclose the names of the individuals involved or any other personally identifiable information (i.e., age, gender or hospital released to, pictures or video) to the media.

# Acknowledgements

## Resources

The Minnesota State High School League and the Medtronic Foundation developed the Anyone Can Save A Life Emergency Action Program using several sources of research and expertise on this topic. We give special thanks to Project S.A.V.E. at the Children's Hospital of Atlanta, Georgia, and Project ADAM at the Children's Hospital of Wisconsin for their expertise, and for allowing us to adapt many of their materials for use in this program.

The Anyone Can Save A Life Program was developed using the following resources:

### Medical Emergency Action Plans (Including AED Programs for Schools):

- National Association of Athletic Trainers [http://www.nata.org/statements/consensus/SCA\\_statement.pdf](http://www.nata.org/statements/consensus/SCA_statement.pdf)
- Drezner, et al. Inter-Association Task Force Recommendations on Emergency Preparedness and Management of Sudden Cardiac Arrest in High School and College Athletic Programs: A Consensus Statement *Journal of Athletic Training* 2007;42(1):143–158
- Hazinski, et al. Medical Emergency Action Plan for Schools *Circulation*. 2004;109:278 –291
- Project ADAM <http://www.chw.org>
- Project S.A.V.E. <http://www.choa.org>
- S.H.O.C. (Saving Hearts in Our Communities) A program of Carver County, MN
- Wayzata High School Emergency Action Plan

### Other SCA Programs, Resources:

- American Heart Association: Emergency Cardiac Care [http://www.heart.org/HEARTORG/CPRAndECC/FindaCourse/Find-a-Course\\_UCM\\_303220\\_SubHomePage.jsp](http://www.heart.org/HEARTORG/CPRAndECC/FindaCourse/Find-a-Course_UCM_303220_SubHomePage.jsp)
- American Heart Association SCA website <http://bethebeat.heart.org/>
- American Red Cross: Take a Class <http://www.redcross.org/take-a-class>
- Arizona Department of Health SHARE Program <http://www.azshare.gov>
- Hands Only CPR <http://handsonlycpr.eisenberginc.com>
- HeartRescue Online Save A Life Simulator <http://www.heartrescuenow.com>
- Louis Acompora Foundation: Taking Our Children Out of Harm's Way <http://www.la12.org/>
- Nick of Time: SCA Education for School <http://nickoftimefoundation.org/>
- Parent Heart Watch: Protecting Youth from SCA <http://parentheartwatch.org/>
- SCA Risk Factor Information <http://www.hearthelp.com>
- Sudden Cardiac Arrest Association <http://www.suddencardiacarrest.org>
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