2019-2020
Virginia Tech Sport Clubs
Sports Medicine
POLICIES AND PROCEDURES
MANUAL
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Updates to This Document

The Virginia Tech Sport Clubs Sport Medicine Department (commonly referred to as VTSC SMD) policies and procedures will be evaluated and edited on an annual basis. This document will be available from the VTSC SMD or found under the Sport Clubs Sport Medicine section of the VT Sport Clubs Athletics website. The department reserves the right to change any of our policies due to any circumstances throughout the academic year. Every effort will be made to notify affected parties of any that may arise, should they occur.

Scope of Practice

The Sports Medicine Department will only provide services for the current students athletes participating in Virginia Tech Sport Clubs (VTSC). All services rendered will be governed under the Practice Act of the State of Virginia. It should be noted that the needs of the in-season sport clubs athletes will take first precedence and services may not be available to others, based on personnel, equipment, and availability of needed space of the VTSC SMD. Additionally, the VTSC SMD does not provide equipment or medication for individuals who are not VTSC student athletes.

All VT Sport Clubs Sports Medicine Staff members are required to maintain their Board of Certification (BOC), updated First Aid and CPR certification, Virginia Licensure, and complete continuing education units as required. Each staff member should remain in good standing with the BOC and the National Athletic Trainer’s Association (NATA).

The athletic trainer must follow the NATA Code of Ethics. The athletic trainer is under the supervision of the medical director and should follow established standing orders. All staff members should know, understand, and practice according to VTSC SMD Policies and Procedures.

Professional Liability

As is true of any healthcare entity, we understand that the VTSC SMD will be exposed to a certain amount of liability. When providing services to the Virginia Tech community, both the certified staff/faculty and students are covered under the University’s general liability policy. When services are offered to individuals outside the university, the stated policy would provide no coverage. Certified staff members are expected to carry their own liability insurance if they work any events outside of sanctioned university activities.
Vision Statement

The Virginia Tech Sport Clubs Sport Medicine Department strives to provide comprehensive healthcare for the overall well-being of every athlete participating in Virginia Tech Sport Clubs. We serve each athlete in the areas of education, injury prevention, injury evaluation and management, and rehabilitation. Our goal is to not only support the student athlete’s quality of life during Virginia Tech athletics but also upon completion of athletics. The VTSC SMD is committed to delivering professional, quality healthcare by incorporating a patient-centered approach and using recognized best practices.

Mission Statement

The VTSC SMD will function as a part of a comprehensive healthcare team in order to support overall student-athlete well-being. The certified athletic training staff will coordinate care and work in conjunction with administrators, team physicians, coaches, Schiffert Health Center, VT Rec Sports Fitness Strength and Conditioning, Emergency Medical Services (EMS), and other on-campus services. We will deliver quality services to our patients by incorporating best practices, current research, and clinical expertise into our operation.

The Sports Medicine Department assists the physically active population of the University; we are tasked with ensuring the overall wellness for the sport clubs student athletes. We accomplish this by upholding the six recognized domains of athletic training: injury prevention, clinical evaluation and diagnosis, immediate care, treatment, rehabilitation and reconditioning, organization and administration, and professional responsibility. The goal of the VTSC SMD is to consistently uphold the high professional standards while delivering our services. Our staff will exhibit ethical practice in order to develop appropriate rapport with our patients and uphold the quality of the athletic training profession.

The mission of the VTSC SMD is to provide exemplary healthcare for all our constituents. This will be accomplished by maintaining an attitude of consistent improvement and innovation, both for the organization and individuals. We will utilize the staff members’ broad knowledge and skill base and incorporate current research to develop and refine an evidence-based practice. The staff will incorporate scientific research and advances to build upon our foundational knowledge and skills in the areas of orthopedics, anatomy and physiology, epidemiology, kinesiology, emergency management, biomechanics, nutrition, and mental health. Our philosophy is to provide optimal care for each patient in all circumstances.
NATA Code of Ethics

1. Members shall practice with compassion, respecting the rights, welfare, and dignity of others
1.1 Members shall render quality patient care regardless of the patient’s race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity.
1.2. Member’s duty to the patient is the first concern, and therefore members are obligated to place the welfare and long-term well-being of their patient above other groups and their own self-interest, to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient at all times as delineated by professional statements and best practices.
1.3. Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient’s care without a release unless required by law.

2. Members shall comply with the laws and regulations governing the practice of athletic training, National Athletic Trainers’ Association (NATA) Membership Standards, and the NATA Code of Ethics
2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.
2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.
2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.
2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.
2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.
2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

3. Members shall maintain and promote high standards in their provision of services
3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.
3.2. Members shall provide only those services for which they are qualified through education or experience and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.
3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.
3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational.
requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.

3.5. Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

3.6. Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.

4. Members shall not engage in conduct that could be construed as a conflict of interest, reflects negatively on the athletic training profession, or jeopardizes a patient’s health and well-being.

4.1. Members should conduct themselves personally and professionally in a manner that does not compromise their professional responsibilities or the practice of athletic training.

4.2. All NATA members, whether current or past, shall not use the NATA logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

4.3. Members shall not place financial gain above the patient’s welfare and shall not participate in any arrangement that exploits the patient.

4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.
ADMINISTRATIVE POLICIES AND PROCEDURES
Sport Clubs Sports Medicine Personnel

The Sports Medicine Staff will consist of 1 primary athletic trainer and 3 primary physicians. All athletic trainers are certified by NATA and are licensed in the state of Virginia.

Athletic Trainers:
Lydia Haren, MS, LAT, ATC
Virginia Tech Sport Clubs
VCOM Sports and Osteopathic Medicine

Team Physicians:
Mark Rogers, D.O. – Primary Care/ Sports Medicine
VCOM Outreach Coordinator
VCOM Sports and Osteopathic Medicine, Blacksburg, VA
Virginia Tech Sports Medicine, Blacksburg, VA

Jon Maher M.D. - Orthopedics
(M/W Rugby, M/W Soccer)
Carilion Orthopedics, Blacksburg, VA

Bart Eastwood D.O.-Orthopedics
(M/W Lacrosse, Ice Hockey)
Sideline Orthopedics, Blacksburg, VA

Sports Medicine Aides/ Medical Students:
We encourage all patients to allow for sports medicine aides’ involvement with their care; however, we will respect any patient’s decision if they wish to not have a sports medicine aide involved in their care.

Sports medicine aides will only be permitted to make and execute decisions for skills after they have demonstrated understanding of that skill and have verbal affirmation from the certified athletic trainer. Examples include basic wound care, assisting with rehabilitation exercises, and basic modalities (i.e. ice and heat application) among others. The following general guidelines serve to frame the privileges given to sport medicine aides:

1. Sports medicine aides are expected to operate under the same guidelines as the entire Sports Medicine Department. They are expected to uphold a high level of conduct. We ask that they are respected as healthcare providers by both coaches and student athletes.
2. Sports medicine aides will have the opportunity to work with all patients and in nearly all situations to gain a wide variety and high volume of clinical experiences; preferential treatment will not be given based on a student athlete’s role on an athletic team.
3. No sports medicine aides may operate or act on decisions without the supervision of the certified athletic trainer.
4. Any decisions regarding medications must be approved by the certified athletic trainer.
5. All return to play decisions must be approved by the certified athletic trainer.
6. All referral decisions are ultimately the responsibility of the certified athletic trainer.
Policy for Physical Violence, Sexual Misconduct, or Child Endangerment

The VTSC SMD contributes to providing the university community with a safe, welcoming, and inclusive environment. All staff members are expected to act ethically and within all expectations of our community. Any personnel affiliated with the department are expected to follow local, state, and federal laws and mandatory reporting guidelines. Members of the department are expected to support compliance with all university policies, including but not limited to: student handbook, employee handbook, and the University Policy Against Discrimination, Harassment and Gender Based Misconduct and Sexual Misconduct.

Any situations of impropriety should be reported to the proper personnel, depending on the specific dynamics of each situation. Communication when dealing with various situations may include the following personnel or offices on campus: Athletic Trainer, Team Physician, Athletic Director, local law enforcement and EMS, Campus Safety, Campus Counselor, Student Affairs, Human Resources, Facilities Management, Residence Life, Health Services, or others as needed.
Staff Communication

The VTSC SMD recognizes and appreciates the essential role that communication plays in our organizational operation on a daily basis. Our staff takes pride in being effective communicators with the many parties with whom we must communicate on a regular basis. We also expect regular and useful communications from those we interact with on a consistent basis.

The VTSC SMD holds the responsibility to communicate with many parties in order to facilitate our departmental operation and to coordinate and provide care for our patients. The sports medicine staff is expected to use professional and effective communication with other members of the department, administrators, patients, team physicians, coaches, parents, external physicians and other healthcare providers, staff of other institutions, suppliers, maintenance and custodial staff, Schiffert Health Center, and other personnel as needed. Staff members are expected to be professional, regardless of the method of communication that is chosen.

Our department requests that those who rely on our services be respectful when communicating with us as well. This includes using appropriate communication methods, communicating in advance when possible, and not abusing methods of communication. Student athletes and coaches should not contact the athletic trainer on personal cell phone except in emergency situations or if asked to follow up from previous incidents. We also expect that those communicating with us respect Health Insurance Portability and Accountability Act (HIPPA) and Family Educational Rights and Privacy Act (FERPA) guidelines.
Athletic Training Room Policies

War Memorial Athletic Training Room Schedule
General Athletic Training Room (ATR) hours for weekdays are Monday, Wednesday, Thursday, 12pm-3pm. These hours are maintained while school is in session. There are no general ATR hours on Saturdays and Sundays, or on recognized holidays. All evaluations, rehabilitations and treatments should be completed during the morning/early afternoon hours at the War Athletic Training Room unless other arrangements have been made with the athletic trainer. All student athletes must make an appointment with the Sport Clubs Office, or have been arranged with the athletic trainer at a prior time.

The athletic training facility will be open on a restricted appointment-only schedule throughout the summer. Any events requiring requested coverage must be made in advance and approved by the Sport Clubs Coordinator and the athletic trainer no less than two weeks in advance of any event. During the summer, communication with any member of the VTSC SMD may be delayed; any urgent matters should first be directed to the Sport Clubs office.

Upper Sport Club Fields Athletic Training Room Schedule
The Upper SRA Athletic Training Room is open Monday through Thursday, 5:00pm-8:30pm. These hours are for practice and event coverage. The athletic trainer will provide emergency care and evaluations during these hours. Rehabilitations may be scheduled during these hours, at the discretion of the athletic trainer. Due to the varying nature of class and team schedules, the VTSC SMD schedules will vary. The athletic trainer will make the best effort to be available to patients and teams that they work with regularly.

Cancellation/No-Show Policy
Appointments canceled 24 hours or more before scheduled appointment may be rescheduled with no fine. Appointments cancelled less than 24 hours before scheduled appointment, athletes will receive one “grace” offense. After the first offense, the second offense will result in athlete’s club being assessed a $25 fine by the Sport Clubs office. Appointments may still be rescheduled. If the athlete arrives late (less than 10 minutes), the treatment session will last only for the remainder of the allotted time slot. Arrival (at 10 minutes or later), the appointment will result in a no-show and the team will be assessed $25 cancellation/no-show fine, if it’s after the first offense. After two cancellations are made after 24 hours before scheduled appointment and/or no-shows, the athlete’s team will be assessed a $30 fine for every additional cancellation that occurs less than 24 hours before appointment/no-show.
**Athletic Training Room Rules**

The athletic training clinic is under the direct supervision of the certified athletic trainer. Under no circumstances is anyone to be in the facility or use its equipment without supervision. The facility is not to be accessed by anyone other than the sports medicine staff for the purpose of using or taking the equipment or supplies. The athletic training clinic is a medical facility and should be treated as such.

It is the goal of the VTSC SMD to provide the highest quality service to our patients; we must follow certain guidelines in order to facilitate this objective. All individuals using the ATR are expected to comply with all written and verbal instructions of the SMD at all times. The following is a list of policies for the use of the athletic training facility:

1. The ATR is a medical facility: please respect the facility, the equipment, the athletic trainer, and other patients.
2. No eating, drinking, or use of tobacco products.
3. Please use appropriate language; no abusive language or cursing.
4. Electronic devices, such as cell phones, computers, or use of headphones are prohibited while working with an athletic trainer.
5. All patients must enter the ATR fully-clothed.
6. No cleats or sport equipment are allowed in the ATR; please leave coats and backpacks in a locker room, hallway, or otherwise designated area, if possible.
7. When possible, please shower after practices/games before receiving treatment.
8. ATR telephones, fax machines, and computers are off-limits for all student-athletes.
9. No supplies are to be removed from the ATR without the permission of a staff athletic trainer.
10. Student-athletes or coaches will not determine what type of treatment is received; this is left to the discretion of the VTSC SMD.

**NOTE:** Virginia Tech Club Sports student-athletes who do not comply with these rules will receive a violation. Repeated violations may warrant further action, including immediate removal from the ATR and/or suspension of the student’s privileges to use the ATR.
Requirements and Procedures for Participation

Virginia Tech Sport Club’s Sports Medicine Department requires the following forms to be completed and approved by the sports medicine staff prior to beginning participation in any team physical activities:

- Medical History Form
- Consent to Treat Form
- Recreational Sports Waiver
- HIPAA Form
- Assumption of Risk Form

Other Pre-participation Requirements

- Concussion Baseline Assessment for high-risk sports (Soccer, Rugby Lacrosse, Field Hockey, Ice Hockey, Gymnastics, and Competitive Cheer
- Physician Examination and Clearance

All required paperwork must be completed on the current VTSC SMD forms only (no other forms will be accepted).

The Medical History Form must be thoroughly completed online in order for an athlete to participate in Virginia Tech Club Sports. A complete medical history is essential because it allows the Sports Medicine Department to perform at the highest level of quality for every student athlete. If the Sports Medicine Department is not provided with a complete and current medical history for each athlete, it increases the risk for further injury or fatality.

NOTE: The Sports Medicine Department will not be held liable for any medical situation due to inaccurate or missing medical information.

The Consent to Treat form and HIPAA form must be read, signed and submitted back to the VTSC SMD to allow the athletic trainer and any other SMD staff to treat or provide care for a student-athlete. In the instance a student-athlete refuses to sign this form, no care will be provided by the VTSC SMD with the exception of life-saving procedures when there is implied consent, and calling Emergency Medical Services.

All student-athletes participating in sports that have been deemed “high-risk” will complete a baseline concussion screening. This must be completed to use as a ‘healthy’ baseline comparison should a head injury occur.

Additionally, all student-athletes participating in club sports and who have a previous medical condition that needs additional medical attention will be required to receive a follow-up examination by a primary care physician or specialist. Participation will be limited or completely prohibited until clearance documentation is received.
Care of Injuries and Illnesses

Policy
The goal of the VTSC SMD is to provide excellent care for all of our student-athletes. In order to provide this level of care, any student-athlete who has suffered any injury or illness must report their injuries in a timely manner to the Sports Medicine Staff, even when student-athlete is not in their competition season.

If the student-athlete is not satisfied with the administered care, it is the athlete’s responsibility to make arrangements to get a second opinion. The Department of Recreational Sports will not be responsible for any of the costs associated with second-opinion visits. The Virginia Tech Sports Medicine staff will still however have final authority, in conjunction with outside staff, for whether the ill or injured student-athlete may return to practice or competition. Athletes must follow the instructions they are given and ask questions in the case they disagree with or do not understand their plan of care. They are expected to be honest and thorough when completing forms that require a medical history.

Procedure
Athletes should report all injuries immediately to the athletic trainer. It is our goal to be proactive in dealing with concerns in an attempt to minimize their potential impact on the patient. This can only be done if injuries or even minor problems are reported quickly.

All athletes are expected to follow through on courses of treatment when working with the athletic training staff. Before leaving the care of the VTSC SMD, all patients should understand the instructions they have been given and know when and how they are supposed to follow up.

Any injury sustained at an away event requiring Emergency Medical Services or hospitalization in any capacity must be reported to the VTSC SMD athletic trainer and the Sport Club staff as soon as possible (preferably within the hour) via phone call. In the case of a minor injury/illness, the student athlete is responsible for scheduling an appointment in order to be evaluated by the VTSC SMD athletic trainer.

Physician and Medical Referral
When necessary the, sports medicine staff will provide referrals to physicians to facilitate the best possible care. All non-emergency athletic injuries should be reported to the sports medicine staff. The certified athletic trainer has the sole responsibility for making student-athlete referrals. Athletes can be referred to the physicians at the Schiffert Health Center for medical conditions, and our team physicians for sports medicine specific conditions. Our team physicians have a thorough understanding of the needs of our student-athletes.

All others have the right to seek outside medical care of their choosing. However, the VTSC SMD requests to receive medical documentation of any encounters with outside healthcare providers. All athletes are responsible for providing their own transportation to and from all off-
campus medical providers. The sports medicine department might provide transportation when available.

**Taping and Bracing Guidelines**
The use of taping or bracing indicates an inability for the body to stabilize adequately and therefore the need for external support. For this reason, we require that all athletes wishing to be taped or use a brace provided by the VTSC SMD complete regular rehabilitation at an interval determined by the certified athletic trainer. Any taping or bracing used for appearance must be purchased by the student-athletes. All tape should be removed prior to showering and immediately following physical activity. It is the responsibility of the athlete to notify the athletic trainer if s/he is needing a brace, ace wrap, etc. The athlete will be evaluated by the athletic trainer who will decide the treatment of the athlete. To prevent disease transmission, braces and their components should be cleaned or laundered regularly.

**Rehabilitation Guidelines**
The VTSC SMD will administer therapeutic exercise and reconditioning to help student-athletes return to high level athletic activity. This will require significant effort on the part of the patient. We expect patients to arrive at their scheduled time ready to fully participate in the rehabilitation session. Patients should have appropriate clothing to perform strenuous exercise (shorts, t-shirt, and supportive athletic shoes). Patients should allow for adequate time for all rehabilitation sessions with the athletic training staff.

**Modality Guidelines**
For the purposes of this section, the term modalities include electrical stimulation and TENS units, manual therapy, cryotherapies (ice bags, ice cup, cold whirlpool), thermal modalities (moist heat packs, warm whirlpool), and Game Ready treatments. Modalities are not allowed to be used without the supervision of a VTSC SMD staff member present. Patients do not have the authority to set up or adjust modality machine settings. The decisions regarding inclusion and utilization of modalities in a treatment protocol are made by the certified athletic trainer. The VTSC SMD does not have the personnel, equipment, or space to accommodate requests for ‘feel-good’ treatments that are not part of a comprehensive treatment protocol. Modalities should only be used if patients have no contraindications for the desired treatment. If the patient experiences any negative effects, s/he should report them immediately to the athletic trainer.

**Medications**
The VTSC SMD does retain certain over-the-counter (OTC) medications which are available in the athletic training rooms and in the athletic training kits. These medications are available on a very limited basis and are only administered to patients until they can purchase their own medications. All medications will be kept behind a locked door. When dispensing medications to a student athlete, all medications administered will be recorded on the OTC Medication Log, which must be signed by the certified athletic trainer. One unit dose will be administered at a time. Epi-pens, inhalers, and other common prescriptions medications must be provided by each patient to the certified athletic trainer. It is highly recommended that patients with any such condition provide the sports medicine department with their required medication for ready access.
in the kit that will be on the sidelines for all practices and competitions. Extra contacts may also be given to the sports medicine staff to have on hand.

**Athletic Training Coverage**

**Coverage of In-Season Sport Clubs Athletics:**
The athletic trainer will cover practices at the sport club fields from approximately 5-8:30pm during the weekdays and certain home events for sport clubs athletic teams, and will serve as primary care provider and first responder. The athletic trainer will be present at practices as available. Teams deemed “high-risk” will take priority for on-site coverage due to the increased likelihood of an acute and higher severity or catastrophic injury. In-season and high-risk athletes will be given first priority for rehabilitation and treatment, particularly in time periods immediately before and after practices or games. For some practices, the staff member may be stationed in the athletic training room or not on location. In these situations, all parties should be aware in advance of the proper protocol for how to contact the athletic trainer or EMS if necessary.

In the event that the athletic trainer is available at home game events and is attending to another situation or is stationed in the athletic training room, please notify the athletic trainer via air horn (2 BLASTS), cell phone or by having Club Supervisor, Risk Management Officer come to athletic training room to get athletic trainer in order to provide care.

In the event that the athletic trainer is not available to staff a home event or is attending to another situation, the Sport Club Supervisor or Risk Management Officer should assume the responsibility of the first responder and act within their scope of practice (Basic CPR/First-Aid). If an injury is to be deemed life-threatening, follow the Emergency Management Plan and activate EMS.

Team physicians may be present for home competitions. If they are not present, they will be on call as necessary.

The athletic trainer will typically not travel with teams for away competitions due to home team obligations. Student-athletes should read and be familiar with the “Athletes Injured at Away Events” section in the case of an away injury.

Any significant changes to team schedules should be communicated to the athletic training staff well in advance. The athletic training staff reserves the right to deny coverage if not provided with reasonable advance notification. Changes due to inclement weather or other unforeseen circumstances should be communicated as soon as possible.

**Coverage of Out-of-Season Sport Clubs Athletics:**
Non-traditional practices and events will be provided coverage when possible (with the understanding that in-season sports take precedence).

**Provided Supplies**
For practices or events where the VTSC SMD is providing on-site coverage, the following standard supplies will be provided or readily accessible:

- Fully stocked medical kit
- Ice with ice bags and plastic wrap
- AED
- Splint bag

**Coverage of VT Recreational Sports Fitness Strength & Conditioning Sessions:**
The athletic training staff does not provide coverage or services for Strength and Conditioning sessions (although the athletic trainer may be present or the ATR may be open depending on the time of day or other events). Any student-athlete who needs accommodations to participate in strength and conditioning sessions should coordinate with the staff members in advance.

The athletic training staff will communicate at regular intervals with the strength and conditioning coaches to ensure the safety and optimal performance of any student-athlete under the care of the athletic training staff.

**Virginia Tech Club Sports Athletes Injured at Away Events:**
If the VTSC SMD athletic trainer is not traveling to an away event, the coach/risk management officer should seek the assistance of the host certified athletic trainer. It is strongly recommended that any return to play or referral decision is made by the host certified athletic trainer.

In the event that the certified athletic trainer is not traveling with the team, or the host institution does not provide an athletic trainer, the head coach/risk management officer is ultimately responsible for the well-being of the student-athlete and should act within scope of practice.

Every effort should be made to return the student athlete back to campus if it can be done safely and without putting the student athlete in any further danger or making his/her medical condition significantly worse.

If the injured athlete is required to stay at an away site, it is **HIGHLY** recommended that either a coach, risk management officer, or teammate stay with the injured person.

**Injury Reporting**
Any injury/illness sustained at home events will be reported on an Injury Report form by the risk management officer or head coach. At the end of every event, Injury Report forms are to be returned to the athletic trainer, and the VTSC SMD will follow up with the injured/ill athletes. If the athletic trainer or club supervisor is present at a home event, the Injury Report forms will be completed by the athletic trainer or club supervisor only for the athletes they attended to during the event. For all injuries, a follow-up appointment for evaluation is to be made with the Sport Clubs office.
**Protocol for Care of Visiting Athletes:**
If present, the visiting certified athletic trainer will have primary control of the situation. Members of the VTSC SMD will stand ready to provide any support, equipment, and assistance that may be requested.

If the visiting team is not traveling with a certified athletic trainer, VTSC SMD staff member will provide coverage according to our standard practice guidelines.

If the visiting team does not have a certified athletic trainer and request modalities, they must provide a written order specifying the patient’s name and modality treatment protocols. This can be done in advance by email (advance notification preferred) or a letter may be presented on the day of competition. The VTSC SMD will accommodate these requests if possible.

In the event that a visiting team is not traveling with a certified athletic trainer and there is an injury, the VTSC SMD staff member should provide the team with a written injury report, or contact the visiting institution’s sports medicine or recreational staff following the event to give details of the evaluation and treatment that was performed.

**Athletic Training Kits and Emergency Medical Folders:**
Each team will be provided with a fully stocked medical kit that meets each teams’ needs at the beginning of the school year. The risk management officer is responsible for monitoring and maintaining the kit for their team.

Athletic training kits will be re-stocked by the athletic trainer on an as-needed basis. The head coach or risk management officer for each team is responsible for making arrangements for dropping off the kit to the athletic trainer in the Sport Club office. Each re-stock request must be made in-person or via e-mail at a minimum of 24 hours in advance of the requested time that the kit is needed. Additional time on Fridays/Weekends may be required. To re-stock kits, the athletic trainer will notify the risk management officer via email of pick-up time for medical kit.

If the kit is lost or damaged in any way beyond normal wear, the team will be charged $100 for its replacement.

**Emergency Medical Folders**
Each team will be provided with an emergency contact folder that must be at every practice and competition. This emergency and medical information will be available in the case if there is an emergency. This information is the responsibility of the risk management officer, and should be kept in a bag or in the athletic training kit and not given to any other team member. It is **MANDATORY** that the athletic trainer and Sports Club Coordinator be notified should any of this information be lost or stolen.

Both the medical kit and emergency/medical information binder are to be returned to the athletic trainer at the end of each semester (or year depending on the sport). If the kit is lost or damaged in any way beyond normal wear, the team will be held responsible for its replacement.
Medical Records and Documentation

Medical Records
All medical records containing a patient’s files will be stored securely in the athletic training facility. Additionally, all digital records are kept on a secured server database that is password protected. These records are considered and may be viewed only by authorized personnel.

All medical records will be maintained for a minimum of seven years following the completion of a student-athlete’s participation in Virginia Tech Sport Clubs. Patients may request a copy of their records at any time. Please allow at least 24 hours to process request.

Paper records may be used for injury evaluations and rehabilitations. Any copy of medical records received by fax or mail should be filed immediately in the patient’s physical file

Documentation
Athletes will be required to sign in whenever any treatment is received at the athletic training room. Injuries and treatments will be documented utilizing multiple methods. All injuries, rehabilitations, and treatments should be documented thoroughly. This serves multiple purposes: it protects the athletic training staff and university from a liability standpoint, it allows for better continuity of care, and allows for statistical analysis. Data generated from treatment logs can help the Sports Medicine Department operate more efficiently and allocate resources appropriately.

All injuries and treatments should be documented using our computerized electronic medical records system or paper form. This program will be used to record patient profiles, insurance and emergency contact information, injuries, treatments, and physician visits. It will also be used to generate travel emergency information binders. The program can also be used to document participation logs and coaches’ reports.

Confidentiality
All members of the VTSC SMD should comply with the HIPPA and FERPA guidelines at all times and via all methods of communication. This includes any sensitive information, particularly medical records and academic materials. Written or verbal permission from the student-athlete should be obtained prior to sharing any of their protected information. Protected information should only be shared with parties with a need to know. The VTSC SMD staff will maintain medical files of student athletes in protected computerized and hard copy files. All student files will be securely stored via password-protected data bases. Medical records will be maintained for the required six years following completion of a student athlete’s participation. All materials containing protected information will be disposed of properly.
Medical Disqualification Policy

The Virginia Tech Sport Clubs Sports’ Medicine Department, acting in the best interest of the student-athlete, reserves the right to limit or disqualify an athlete from sport participation according to his/her medical condition(s). The medical director for the VTSC SMD will make all final decisions regarding these situations.

Insurance Policy

All student-athletes participating in VT Sport Clubs Program must sign an Assumption of Risk form with the Sport Clubs Department. As such, any injuries or expense occurred while participating in VTSC are the responsibility of the student-athlete. It is highly recommended, but not required, that each student-athlete carry their own personal health insurance. The Schiffert Health Center provides information for those student-athletes seeking personal health insurance.
Transportation

**Individual Transportation**
The student-athlete is responsible for transportation to medical appointments, classes, and other obligations if injury/illness prevents them from doing so. The Dean of Students Office can provide assistance if your injuries cause moving around campus difficult or if you have to miss classes for an extended period of time.

**Sports Medicine Transportation**
The VTSC SMD certified staff member providing and directing care has sole authority to make decisions regarding whether immediate referral and transportation is required, and s/he will provide care until EMS has left the scene. The athletic training staff will not transport athletes to medical appointments. If the student-athlete has an injury/illness, the sports medicine staff will help coordinate transportation to get to and from class, medical appointments, and academic obligations. The student-athlete will be responsible for any additional transportation needs.
**Inventory/Purchasing**

The Sports Medicine Department is the only department authorized to purchase medical supplies, modalities, and athletic training equipment, and will maintain a current inventory of supplies and equipment and order medical supplies and equipment in accordance with the procedures of the Department of Recreation Sports. The Sports Medicine Department will also be responsible for maintaining, using and issuing medical supplies and equipment.

Additionally, any athlete who is issued equipment from the athletic trainer will be responsible for returning it in the same condition that it was issued in. Failure to do so may result in having to pay for the item(s) to be replaced.
OSHA Regulations

Maintenance and Cleaning
The VTSC SMD equipment should be consistent with OSHA guidelines and standard practices for a medical facility. It is the responsibility of all certified athletic trainers and sports medicine aides to assist in the cleaning and upkeep of all athletic training facilities and equipment. All patients are expected to help maintain an appropriate environment.

A cleaning list will be posted in the ATR which will detail both daily and weekly tasks to be completed. Maintenance tasks will be completed as needed to ensure the safety of all patients and practitioners. Anyone who sees a safety or cleanliness concern should report the matter to a VTSC SMD member.

All members of the VTSC SMD will comply with guidelines from the Occupational Safety and Health Administration (OSHA) when handling potentially infectious materials, particularly with respect to biohazardous materials. All staff members who may be exposed to blood and other potentially infectious material (OPIM) shall training and be provided with protective equipment and supplies to safely perform cleanup of spills.

All disposable waste of any blood-contaminated materials, i.e., gauze pads, band-aids, etc., should be deposited in a “Bio-Hazard Bag.” The Bio-Hazard Bag will then be appropriately disposed of according to the procedures listed below. Supplies will be available in both athletic training rooms and should be available at each practice or competition site. If the event of an extensive spill, Custodial Services should be contacted to facilitate cleanup.

Sports medicine personnel should follow these procedures for handling blood or OPIM spills:
1. Wear impermeable gloves. Gloves should be worn for touching blood, bodily fluids, mucous membranes or non-intact skin (e.g., abrasions, cuts) of all athletes.
2. Remove visible material with absorbent towels.
3. If hard surface, flood with 10% hypochlorite (1:10) or comparable solution.
4. Re-clean area with fresh towels.
5. If the spill was on a rug or carpet, use a sanitary absorbent agent according to directions.
6. Place all soiled towels and gloves in a leak-proof bag, appropriately labeled and colored as containing biohazardous material.
   (This material must be treated or disposed of in accordance with OSHA-compliant rules).
7. Wash hands immediately and thoroughly.
8. If a spill is extensive, housekeeping or custodial services should be notified.
**Sharps**
The following athletic training room policy is set forth as a safeguard concerning the use of sharp instruments, i.e. scalpel blades, callous shaver blades, needles, etc.

Sports medicine personnel should follow the procedures for preventing the spreading any infectious diseases after contact with sharp instruments as outlined below:

1. All disposable equipment designed to penetrate the skin or may otherwise be exposed to blood or bodily fluids should be immediately disposed of properly following use. These instruments should never be reused.
2. All used scalpel blades, needles, and other sharp instruments must be disposed of by putting them in the containers labeled “Sharps Collector-Infectious Waste.” These are found in the athletic training rooms.
3. Callous shaver blades need to be disposed of by using the “Sharps” container. Callous razor blades need to be changed after each use and disposed of properly.

**NOTE:** All waste and sharps will be properly disposed by Virginia Tech Environmental Health and Safety Services when deemed needed by the VTSC SMD.

**Contact Information**
Frank Imperatore, Hazardous Materials Manager
Phone: 540.231.2982
Email: imperato@vt.edu
Medical Situations and Conditions
Heat Illnesses

Policy
Student-athletes are frequently exposed to high temperatures. The National Athletic Trainers’ Association (NATA) position statement on exertional heat illnesses provides guidance for prevention, recognition, and treatment of these conditions. The VTSC SMD will follow the NATA position statement and guidelines to prevent heat illnesses, including exercise-associated muscle cramps, heat syncope, heat exhaustion, exertional heat injury, and heat stroke among student-athletes. The following procedures should be followed to prevent and address potential heat illnesses:

Procedure
All student-athletes should be allowed an appropriate period for acclimatization to high temperatures which is normally 10-14 days. This can be achieved by progressively increasing ones workout: workout intensity and duration should be progressively increased while athletes become used to stressful environmental conditions. Protective equipment should be phased in.

If the athletic trainer deems conditions to be potentially dangerous for participation, steps will be taken to allow student-athletes to minimize the risk for developing heat illnesses. These precautions may include, but are not limited to: limiting total practice time, practicing at times of non-peak heat exposure, taking additional breaks for water, allowing athletes to rest in the shade, removing protective or other equipment that may cause players to retain heat, and monitoring weight loss. Individuals who are not acclimated properly or have a history of heat illness may require additional precautions.

NOTE: The medical conditions in the following chart below DO NOT occur on a continuum; these are distinct medical conditions that should be treated as separate medical conditions. The athletic trainer will evaluate any student-athlete who displays symptoms of heat illness, and has the authority to remove anyone from participation should a heat illness occur.
## Symptoms and Treatment of Exertional Heat Illnesses

<table>
<thead>
<tr>
<th>Condition</th>
<th>Signs and Symptoms</th>
<th>Management</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Exercise-Associated Heat Cramps</strong></td>
<td>- Visible cramping in active muscles &lt;br&gt; - Localized pain &lt;br&gt; - Dehydration &lt;br&gt; - Thirst &lt;br&gt; - Sweating &lt;br&gt; - Fatigue</td>
<td>- Rest &lt;br&gt; - Passive static stretching and massage of affected muscle group &lt;br&gt; - Icing affected area &lt;br&gt; - Hydrate properly &lt;br&gt; - Same-day return to activity is not recommended and should be avoided</td>
</tr>
<tr>
<td><strong>Heat Syncope</strong></td>
<td>- Fainting &lt;br&gt; - Weakness &lt;br&gt; - Fatigue &lt;br&gt; - Pale or clammy skin</td>
<td>- Lay athlete in cool, shaded area and elevate legs &lt;br&gt; - Monitor vital signs &lt;br&gt; - Hydrate properly &lt;br&gt; - Should be evaluated by physician &lt;br&gt; - Athlete is <strong>NOT</strong> allowed to return to activity</td>
</tr>
<tr>
<td><strong>Exertional Heat Exhaustion</strong></td>
<td>- Excessive fatigue &lt;br&gt; - Nausea/vomiting &lt;br&gt; - Headache &lt;br&gt; - Reduced sweating (clammy skin) &lt;br&gt; - Decreased blood pressure &lt;br&gt; - Dizziness/fainting &lt;br&gt; - Excessive fatigue &lt;br&gt; - Central Nervous System dysfunction &lt;br&gt; - Core body temperature &lt;104°C</td>
<td>- Treat as <strong>Serious Emergency</strong> &lt;br&gt; - Move patient to shaded/cool area &lt;br&gt; - Remove any excess clothing and equipment &lt;br&gt; - Once clothing is removed, immerse body in ice bath supine, with elevated legs &lt;br&gt; - Monitor vital signs &lt;br&gt; - Hydrate slowly &lt;br&gt; - If patient does not improve, call EMS</td>
</tr>
</tbody>
</table>
Exertional Heat Stroke
- Core body temperature ≥ 104°
- Loss of consciousness
- Disorientation
- Central Nervous System dysfunction
- May not be sweating
- Hot, dry skin
- Nausea, vomiting
- Seizures

- Treat as **Life Threatening Emergency**
- Call for EMS and move patient to shaded/cool area
- Perform the rectal thermometer procedure according to NATA guidelines
- Once excess clothing is removed, immerse body in a cold tub **IMMEDIATELY**. The athlete will not be removed until core body temperature is 102°
- Monitor vital signs
- Transportation by EMS will **NOT** occur until body temperature is lowered to 102°

**Participation Guidelines**
Environmental conditions should be monitored in advance of activities in hot weather. The following factors should be taken into account when making decisions regarding practices and games: temperature, humidity, heat index, wind, sun exposure, wet bulb globe temperature (WBGT), and the demands of the activity. The weather will be monitored using a weather app (i.e. WeatherBug). Listed below are the medical conditions that place individuals at a higher risk of heat illness:

- Previous history of heat illness
- Poor physical conditioning
- Poor nutrition
- Obesity
- Non-acclimatized individual
- Sickle-Cell Trait
- Prescription drugs and Supplements being used

The fastest way to decrease body core temperature is immersion of the body into an ice water bath (between 35°F and 59°F). On days when the athletic trainer feels that an athlete may be at risk for suffering from exertional heat stroke (i.e., two-a-days), a cooling tub will be set up outside near practice of high-risk sports. In the event that the athletic trainer believes the athlete is suffering from exertional heat stroke, s/he will immediately be placed in the tub to begin the cooling process, and the EAP will be activated.

**NOTE:** The following chart should be strictly enforced to prevent the occurrence of heat illnesses.
Cold Exposure and Low Temperatures

Policy
As with any inclement weather, every effort should be made to protect participants from dangerously cold conditions. Any time low temperatures, wind chill, precipitation, and/or high winds are present, steps should be taken to prevent cold-related injuries. Cold injuries include hypothermia, frostbite, frostnip, and chilblain. The NATA position statement for environmental cold injuries provides guidelines for preventing and addressing cold injuries. The following guidelines should be followed in cases where prolonged cold exposure could lead to the potential for cold-related injuries.

Procedure
Education should be provided for coaches, student-athletes, and participants regarding the implications of exercising in cold conditions, and signs and symptoms indicative of cold injuries.

If activities are taking place in cold environments, precautions should be taken to prepare participants to exercise safely. Students with general medical conditions, respiratory difficulties, or circulation problems may require extra precautions, including proper nutrition, hydration, and adequate clothing for the activity. Clothing should include multiple layers, which is more beneficial compared to one thicker layer. A designated re-warming area should be established and readily accessible.

Treatment for potential cold-related injuries includes removal from the environment, progressive re-warming, monitoring vital signs, and referrals for medical assistance as needed. Re-warming of a body part should never occur if there is a chance of the tissue refreezing.

Signs of cold injury:
Shivering
Numbness
Tingling
Burning sensation of exposed flesh
Fatigue
Confusion
Slurred speech
Red or painful extremities
Swollen extremities
Clumsy movements

Guidelines for Cold Temperature Participation:

30°F and below: Potential for cold-related injuries; should notify appropriate personnel of the potential for injury

15°F and below or windchill: Modify activities; limit outside exposure; provide opportunities for rewarming

0°F and below or windchill: Terminate, reschedule, or move activities to a more suitable environment

Asthma

Policy
All student-athletes that have been diagnosed with asthma shall be seen by their primary care physician to develop an asthma management plan and should present the athletic trainer with the plan. If an emergency inhaler is needed, the athlete may provide the athletic trainer with an additional inhaler to keep in their kit. It is the student-athlete’s responsibility to have their inhaler with them at all times and to use at the times indicated by their physician. The athlete should always have their inhaler with them during athletic activities. If the athlete or the athletic trainer suspects that the symptoms are not under control, the VTSC SMD will require the athlete to receive further evaluation from a physician.

Procedure
In the event that an athlete experiences respiratory distress, s/he will be removed from play and evaluated by the athletic trainer. The athlete will not be allowed to return to play until their breathing is under control and vital signs are normal. If symptoms do not improve within 15 minutes of using their inhaler, or if they worsen after removal from play, then the Emergency Action Plan (EAP) should be activated and the student-athlete should be transported by EMS to the hospital for further evaluation and treatment.

The VTSC SMD does NOT provide supplemental oxygen; however, it can be given once EMS is activated and they deem it necessary upon evaluation.
Skin Disorders

Policy
The Virginia Tech Sport Clubs Sports Medicine Department has taken many steps to help prevent the spread of contagious skin disorders. The VTSC SMD will follow the prevention guidelines from the National Athletic Training Association (NATA) Position Statement on Skin Diseases. Student-athletes are encouraged to follow these guidelines:

Procedure
1. Keep hands clean by washing thoroughly with soap and warm water or by routinely using an alcohol-based sanitizer
2. Encourage good hygiene practices
   - Showering after activity
   - Ensure availability of adequate antimicrobial soap and water
   - Pump soap dispensers are preferred over bar soap
3. Avoid whirlpools or common tubs
   - Individuals with active infections, open wounds, scrapes or scratches could infect others or become infected in this environment
4. Avoid sharing towels, razors, and daily athletic gear
   - Avoid contact with other people’s wounds or material contaminated from wounds
5. Maintain clean facilities and equipment
   - Wash athletic gear and towels after each use
   - Establish routine cleaning schedules for shared equipment
6. Inform or refer to appropriate health care personnel for all active skin lesions and any suspicious skin lesions that do not respond to treatment
   - Train student-athletes and coaches to recognize potentially infected wounds and seek first aid
   - Encourage coaches and sports medicine staff to evaluate regularly for skin lesions
   - Encourage health care personnel to obtain bacterial cultures to establish a diagnosis
7. Care and cover skin lesions appropriately before participation
   - Keep properly covered with a proper dressing until healed
   - “Properly covered” means that the skin infection is covered by a securely attached bandage or dressing that will contain all drainage and will remain intact throughout the sport activity
   - If wounds can be properly covered, good hygiene measures should be stressed to the student-athlete such as performing hand hygiene before and after changing bandages and throwing used bandages in the trash
   - If wound cannot be properly covered, prohibit players with potentially infectious skin lesions from practice and/or competition until lesions are healed or can be covered adequately
**Mental Health Policy**

**Policy**
The VTSC SMD is committed to supporting the well-being of the entire person. We appreciate the importance of mental health. In the case a mental health concern arises for a Sport Club student-athlete, the athletic trainer will assist with the setting up of appointments with the Cook Counseling Center or at a counseling center of the students preferred location.

The athletic trainer’s role in this protocol is not to provide psychological care directly to the student athlete, as this type of care is outside the scope of practice for the athletic trainer. Instead, the athletic trainer should use the following procedure as an efficient means of evaluation and care by credentialed mental healthcare professionals, risk management and legal considerations for the student athlete and Virginia Tech. Psychological concerns may include depression; anxiety; eating disorders; abuse of drugs, alcohol or other substances; hyperactivity, violence or suicidal thoughts.

**Procedure**
In the event that a student-athlete demonstrates or voices immediate risk to themselves, or others, or reports feeling out of control, unable to make sound decisions, is incoherent, confused or expresses delusional thoughts, an emergent mental health referral is recommended.

**If on campus and the student is with you:**
- Call Cook Counseling Center (540-231-6557)
- **Walk** with Student *immediately* to the Cook Counseling Center (240 McComas Hall)
  - If you believe the student is violent or may become violent – Call Campus Police first (540-231-6411), who will escort the individual to Cook Counseling Center.

**If the student is on campus and not with you/ after hours and you are not on campus:**
- Call Cook Counseling Center and explain situation/concern (540-231-6557)
- Be prepared to ask the student to *immediately* go to Cook Counseling Center or for Campus Police to meet him/her.

**If situation occurs when traveling/ on the road/ away from campus:**
- Locate closest hospital or open healthcare center
- **Immediately** call Cook Counseling Center (540-231-6557) for protocol advice
- Have this information for the counselor:
  - Location/address of hotel or competition site
  - Room number of student (or have student with you)

**REMEMBER: NEVER LEAVE A SUICIDAL INDIVIDUAL ALONE**

If you have a concern with a student-athlete, encourage him/her to go to the Cook Counseling Center for an evaluation or just to talk. Emphasize that it is confidential, free, and that you think it would be beneficial for them.

**Remember:**
- You cannot force someone to attend counseling
Continually encourage, but do not insist:

- Some student-athletes may believe that their coach, teammates or parents may perceive receiving care for mental health as a sign of weakness.

- Explain that while they can speak with you, you do not have counseling training.

- Explain that mental health concerns are just as real as physical injuries and need to be addressed in order to perform and operate at an optimal level.

**Plan of Action for Routine Counseling Referral:**
- Help the student make the initial appointment with Cook Counseling Center services for a mental healthcare evaluation.
  - Call Cook Counseling Center (540-231-6557) when you are with the student athlete.
- Remind them - information discussed at their appointments, unless it is of nature that indicates harm to themselves or others, will be kept confidential.
- Encourage student to inform coach and parents about appointments.

**Follow Up With Student-Athlete After Initial Visit:**

- If the student-athlete would like to talk, ask how the visit went.
- Remind the student that there are other providers in the area if they want to see someone else.
  - If you refer to a community-based mental healthcare professional – the student’s insurance will be used.
    - Inform the student that their parent or guardian will receive notification of their mental health treatment from the insurance company in the form of an explanation of benefits (E.O.B.) notification.

**Recognition of Psychological Concern**

**List of Behaviors to monitor if suspecting a psychological concern:**

- Changes in eating/sleeping habits
- Unexplained dieting or weight loss
- Drug/alcohol abuse
- Uncharacteristically withdrawn socially
- Decreased interest in normal enjoyable activities
- Increase in risky behavior
- Talking about death/dying/ “going away”
- Loss of emotion
- Problems concentrating, focusing, remembering
- Frequent complaints of fatigue, illness, injury preventing participation
- Becoming irritable
- Significant drop in class attendance
- Dramatic drop in grades
- Poor attendance for practice/team meetings
- Decrease in athletic performance
- Increased or persistent physical complaints without medical cause
### Possible Depression Symptoms:
- Sad, anxious, or “empty” mood
- Feelings of hopelessness or pessimism
- Feelings of guilt, worthlessness and helplessness
- Loss of interest or pleasure in hobbies and activities that used to be enjoyable
- Difficulties sleeping or sleeping too much
- Appetite and/or weight loss or increase
- Decreased energy, fatigue, feeling lethargic
- Thoughts or talk of death, suicide, or of “not being around anymore”
- Suicide attempts
- Restlessness, irritability
- Difficulty concentrating, paying attention, remembering things, or making decisions
- Persistent physical symptoms that do not respond to treatment (headache, digestive disorders, or chronic pain)

### Possible Anxiety Symptoms:
- Feeling physically tense, uptight on edge or fatigued
- Excessive feeling of worry, fear or dread that are difficult to control
- Preoccupation of what could go wrong in the future
- Difficulty falling asleep or staying asleep
- Changes in appetite, including either increased eating or difficulty eating due to anxiety
- Feelings ranging from a general uneasiness to complete immobilization
- Pounding heart, sweating, shaking, or trembling
- Feeling jumpy or easily startled
- Impaired concentration, difficulties focusing, feeling of being out of control

### Stressors Unique to Being a Student Athlete:
- Time management of school, sport, social life, family
- Expectations of coach, teammates, professors, friends, parents, self
- Adjusting from being a star athlete to just another team member
- Missing class/assignments/tests due to team travel/obligations
- Lack of sleep
- Sudden increase in pressure

### Triggering Events for a Psychological Concern:
- Poor performance (sports team/academically)
- Conflicts with coach or teammates
- Injury/illness that results in loss of playing time
- Concussion
- Class issues (credit load, grades, work load)
- Family/friend issues
- Changes in the importance of the sport in one’s life
- Being a victim of or witnessing violence
- Death or serious illness/injury of a loved one
- Drug/alcohol use
- Post-Traumatic Stress Disorder
Conditions of Impairment

Students who have lost one of a pair of organs (i.e. lungs, eyes, kidneys, testicle) will need protection in sport and have the written permission of a physician in order to participate in the sport club program. Additionally, a letter of acknowledgement will need to be signed, indicating an understating of the possible high risk in participating in athletic competition with only one organ.
Sickle Cell Policy

Policy
Virginia Tech Sport Clubs does not require sickle cell testing on any participants. If an athlete is suspected of having sickle cell trait or experience sickling event, the appropriate medical care and testing will be recommended at the discretion VTSC SMD. All incurred costs of medical appointments and testing will be the financial responsibility of the student athlete.

If a student tests positive for sickle cell trait, multiple steps will be taken to ensure safe participation, in the sport club program, and educating the coaches about sickle cell.

Accommodations will be made in advance for high risk activities for these individuals. In the case of a sickling event, the VT Rescue Squad or local emergency services will be.

Procedure
Student-athletes with sickle cell trait are suggested to take the following precautions:
- Set his/her own pace.
- Engage in a proper, slow and gradual preseason conditioning program in order to be prepared for rigors of competitive athletics.
- Build up slowly while training (e.g., paced progressions).
- Use adequate rest and recovery between repetitions, especially intense drills.
- Not perform all-out exertion of any kind beyond two to three minutes without rest.
- Be excused from performance tests such as serial sprints or timed mile runs, especially if these are not normal sport activities.
- Stop activity immediately upon struggling or experiencing symptoms such as muscle pain, abnormal weakness, undue fatigue or breathlessness.
- Stay properly hydrated, especially in hot and humid conditions.
- Maintain proper asthma management.
- Refrain from extreme exercise during acute illness, if feeling ill, or while experiencing a fever.
- Seek immediate medical care whenever distress occurs.
**Student-Athlete Pregnancy Policy**

Any Virginia Tech Sport Club student-athlete that suspects or is confirmed to be pregnant should notify the VTSC SMD in order to help coordinate appropriate medical care. Notification of the athletic training staff is done at the discretion of the student-athlete, and no negative action will result from this notification. Students are encouraged to consult with the VTSC SMD in order to obtain information on medical assistance, which may include help with referral to physicians and information on safe and healthy activities in which the student may participate. Students who may be pregnant are encouraged to seek and comply with care given by a qualified obstetrician.

The university is not responsible for any medical bills relating to a student’s pregnancy. The university cannot be held responsible for medical complications resulting from Sport Club participation.
Drug and Substance Policy

The VTSC department does not have any medical guidelines or procedures outside of the current university drug and alcohol policies. No drug testing is being conducted by the Department of Recreational Sports. We encourage anyone with a substance abuse issue to seek help. The VTSC SMD will confidentially assist students in seeking the appropriate care for a substance abuse problem.
Concussion Management Policy

The purpose of this policy is to provide clear communication, procedures, and expectations for the Virginia Tech Sport Clubs (VTSC) staff and VTSC Sports Medicine Department (VTSC SMD) for the management and treatment of an athlete’s concussion.

Policy

The VTSC SMD is committed to upholding the highest standards of care to ensure quality of life during and after the student’s playing career. As all injuries present in a unique manner, the concussion protocol will be applied based on the specific dynamics of each case. **Any athlete with a potential case of a head injury should be removed from play immediately and evaluated by a member of the VTSC SMD before returning to any physical activity.** If a possible head injury occurs at an away event, the host ATC should be notified and make all judgments on the safety and health of the student. In the case no host ATC is present, the student is to be removed from all play and activity until they have been evaluated by a licensed and qualified healthcare professional (MD, DO, or ATC).

The diagnosis of a concussion will be based upon multiple factors. As there is no definitive, stand-alone test for concussions, our clinicians will use their expertise to evaluate the results of a physical examination, signs and symptoms, neurocognitive testing, and balance testing to make a diagnosis. Referrals will be made on a case-by-case basis. Please see full protocol for details.

If a concussion diagnosis is made, a VTSC SMD staff member will manage the recovery of the student. The student may be restricted from academic activities if their symptoms warrant. In this case, a member of the VTSC SMD will notify the Schiffert Health Center and/or VCOM physician. Depending upon the time and location of the injury, as much notification as possible will be given to necessary academic personnel. Any student diagnosed with a concussion will be withheld from all forms of physical activity until they are consistently symptom-free. Once the student has returned to full academic activity, remains asymptomatic, and has returned to baseline levels on all forms of testing, they will be guided through a step-wise progression to return to physical activity and sports participation.
Procedure:
1. All Virginia Tech Sport Club Athletes must sign a statement in which the student accepts the responsibility for reporting their injuries and illnesses to the VTSC SMD, including the signs and symptoms of concussions. The student athletes will be provided with information regarding concussions and the NCAA Concussion Fact Sheet for Student-Athletes will be made available from the VTSC SMD.
2. All VTSC coaches, administrators, and sports medicine staff are responsible for reporting signs and symptoms of concussions to proper medical personnel (i.e. Certified Athletic Trainer and/or Team Physician)
3. The VTSC SMD will have on file a written team physician-directed concussion management plan that specifically outlines the roles of the healthcare team with concussion management (e.g., physician and certified athletic trainer). Any prolonged cases will be assessed and referred to a neurologist or neuropsychologist by the sport club staff.
4. The VTSC SMD will have on file an appropriate health care plan for concussion management that includes equitable access for all sport club student-athletes.
5. The VTSC SMD healthcare providers to determine management and return-to-play of any ill or injured student athletes.
6. The VTSC SMD will document the incident, evaluation, continued management, and clearance of the student athlete with a concussion.

Baseline:
1. The Virginia Tech Sport Clubs Sports Medicine Department will record a baseline assessment for all student athletes participating in what are considered “high-risk” sports. The same baseline assessment tools will be used post-injury at appropriate time intervals. The baseline assessment will include the following:
   a. Symptom Checklist
   b. Concussion Baseline forms
2. If any student athlete sustains a concussion, they will meet with either the team physician or associated physician within 72 hours of the incident. Using a team approach, the physician and the certified athletic trainer will monitor the student athlete on a daily basis.
3. The team physician will refer the student athlete for further treatment as necessary.

Concussion Recognition and Assessment:
Any athlete suspected of having sustained a possible head injury/concussion should be immediately removed from play. The student-athlete is not allowed to return to any physical activity until evaluated by the Virginia Tech Sport Clubs Certified Athletic Trainer or Team Physician / Associated Physician.
In the event the suspected head injury/concussion / sports-related concussion (SRC) occurs at an away event, the Risk Management Officer (RMO) or Head Coach is responsible for removing the student athlete from play, and seeking proper evaluation by the host certified athletic trainer or physician. NO student athlete is allowed to return to play if symptomatic, or if they have not been evaluated by proper healthcare personnel (MD, DO, or ATC).
1. All potential SRC or head injuries will be evaluated using multiple methods and tools, including but not limited to: clinical examination, graded symptom scale, SCAT tool, and
balance/motor control assessment including the BESS test. New technologies may be incorporated as they become available.

2. Athletes that demonstrate any of the following symptoms should be transported to the nearest emergency medical center as directed by the Emergency Action Plan:
   - Glasgow Coma Scale <13
   - Prolonged loss of consciousness
   - Unequal, dilated, or unreactive pupils
   - Deterioration of neurologic function
   - Deterioration or change in mental status
   - Decreasing or fluctuating levels of consciousness
   - Decreasing or irregular pulses or respirations
   - Increasing confusion or irritability
   - Numbness in the arms or legs
   - Slurred speech or inability to speak
   - Inability to recognize people or places
   - Worsening headache
   - Signs or symptoms of associated skull or spine injury/fractures
   - Seizure activity
   - Focal neurological deficit
   - Cranial nerve deficits
   - Repetitive emesis/ (vomiting)

3. An athlete will be determined to have a potential SRC and warrant further testing if ANY one of the following occurs:
   - The athlete reports or demonstrates any sign or symptom of a concussion (see following signs and symptoms list on following page) as a result of a specific hit to the head or other body part.
   - There is a witnessed hit to the head in which any sign or symptom of concussion is observed, or
   - The athlete reports any two signs or symptoms of a concussion as a result of participation in an at-risk sport of concussion, or
   - Potential injury to the head or face.

4. Any student diagnosed with a concussion will be withheld from competitions, practices and possibly classes, and will not return to activity for the remainder of the day.
Post-Injury Management:

1. Student-athletes will be provided with a “Concussion Fact Sheet” and the “Head Injury Instruction Sheet” upon initial discharge. These sheets provide information on concussions, things to monitor, important contact information, and follow-up instructions. When possible, the student-athlete will preferably meet with the certified athletic trainer and discuss this information with a roommate, guardian, friend, teammate, or someone who can follow the instructions.

2. Students will be instructed on proper nutrition and hydration to allow for optimal healing. Instructions will be given to develop or maintain a low-stimulus environment to allow for adequate rest. It is no longer recommended to wake someone with a concussion throughout the night to check on them.

3. They will follow up at least once daily until the completion of the return-to-play (RTP) progression; a communication timeline will be established by the athletic trainer to monitor the student athlete’s condition and recovery progress.

4. The Sports Medicine department will work with the student, university health personnel, and academic personnel to make accommodations for classes, assignments, and tests as needed. (See Return to Academics).

Return-to-Play Progression:

1. Final return-to-play decisions lie solely with the VTSC SMD Medical Director.

2. Students may not take any pain medications during RTP progression, as they may mask pertinent signs and symptoms which are critical for clinical evaluation.

3. Once the student is asymptomatic, and not taking any pain medications for 24 hours, the RTP progression can begin. All steps of the RTP progression will be documented with date, time, activity level, and results of the RTP steps. The RTP progression is as follows:

<table>
<thead>
<tr>
<th>Stage</th>
<th>Aim</th>
<th>Activity</th>
<th>Goal of each step</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Symptom-limited activity</td>
<td>Daily activities that do not provoke symptoms</td>
<td>Gradual reintroduction of normal activities</td>
</tr>
<tr>
<td>2</td>
<td>Light aerobic exercise</td>
<td>Walking or stationary cycling at slow to medium pace. No resistance training</td>
<td>Increase heart rate</td>
</tr>
<tr>
<td>3</td>
<td>Sport-specific exercise</td>
<td>Running or skateboarding. No head impact activities</td>
<td>Add movement</td>
</tr>
<tr>
<td>4</td>
<td>Non-contact training drills</td>
<td>Harder training drills, eg, passing drills. May start progressive resistance training</td>
<td>Exercise, coordination and increased thinking</td>
</tr>
<tr>
<td>5</td>
<td>Full contact practice</td>
<td>Following medical clearance, participate in normal training activities</td>
<td>Restore confidence and assess functional skills by coaching staff</td>
</tr>
</tbody>
</table>

4. The RTP protocol follows a step-wise process. With this protocol the patient progresses to the next level if asymptomatic at the current level. There will be 24 hours between each step. **If at any time signs or symptoms recur during this protocol, the student must immediately stop all physical activity, be re-assessed daily until asymptomatic for a 24-hour period, and then may reattempt that step and continue with the RTP as able.**
5. Student with prolonged recovery will be evaluated by the team physician and may be referred for possible additional diagnosis and best management options.
   - Additional diagnosis includes, but are not limited to post-concussion syndrome, sleep dysfunction, migraine or headache disorders, mood disorders such as anxiety and depression, and ocular or vestibular dysfunction.

Return to Academics
1. The mental and academic well-being of the student-athlete is given the highest priority in the post-injury decision making process.
2. Because each injury is different, decisions regarding classroom attendance and academic work and testing will be made on an individual basis. Student will not be withheld from any academic activities unless deemed medically necessary.
   - If the student athlete tolerate light cognitive activity, s/he should remain at home, or as directed by the team physician or physician’s designee.
3. In the event that a student is withheld from academic activities, the VTSC SMD staff member will communicate with Sport Club staff, professors, Services for Students with Disabilities (SSD), and the Schiffert Health Center. The student will be responsible for contacting their professors to determine what material was missed and to arrange make-up opportunities.
   - If a student is withheld from any academic activities, s/he will also be withheld from team activities and will not attend team practices, competitions, or workouts.
4. Once the student athlete can tolerate cognitive activity without the return of symptoms, he or she can return to the classroom/studying as tolerated. At any point, if the student becomes symptomatic, or scores on clinical measures decline, the student should be removed from stimulus and the athletic trainer or team physician should be notified.
5. Cases that cannot be managed through scheduled modification/ academic accommodations should utilize campus resources consistent with ADAAA, including learning specialists and the Office of Services for Students with Disabilities.
Emergency Management Plan
Emergency Management Plan Telephone List

Athletic Trainers
Lydia Haren (Work) ................................................................. 540-239-9896
(Emergency) ................................................................. 804-386-4773

Sports Club Administrative Staff
Alison Cross ................................................................. 540-231-2543
Julie Rhoads ................................................................. 540-231-5616
Alan Glick ................................................................. 540-231-0467
Bill Old ................................................................. 540-231-4058
Gabby Marquez .............................................................. 540-231-9917
Christian David ............................................................ 540-231-1855
Coty Skaggs ................................................................. 540-231-1467

Venue Sites
Upper Recreation Fields ........................................................ 540-239-9896
Lower Recreation Fields .................................................... 540-231-9896
Band Turf ................................................................. 540-231-9896
Lancer Lot ................................................................. 540-853-2241

Emergency
VT Rescue-Fire-Police .................................................. 911
Campus Police ........................................................... 911
Carilion Roanoke Memorial Hospital .................................... 540-981-7000
Carilion New River Valley Medical Center, Christiansburg .... 540-731-2000
Lewis Gale Hospital Montgomery, Blacksburg .......... 540-951-1111
Lewis Gale Hospital Pulaski ........................................... 540-951-1111
University of Virginia Health System ........................................ 434-924-3627
VCU Health System-Adult Center ........................................... 804-828-0996
VCU Health System-Pediatric Center ..................................... 804-828-9111
VCU Health System-Burn Center ........................................... 804-828-9240

Additional Local Emergency and Non-Emergency Numbers
Virginia Tech Police (Non-emergency) .................................. 540-382-4343
Virginia Tech Safe Ride ..................................................... 540-231-7233
Velocity Care-Blacksburg .................................................. 540-961-8040
Velocity Care-Christiansburg ............................................. 540-961-8040
Shiffert Student Health ................................................... 540-231-5313
Shiffert Student Health (After Hours/Weekends) ................ 540-231-6444
Cook Counseling Services .................................................. 540-231-6557
Cook Counseling Services (After Hours/Weekends) ........ 540-231-6444
Suicide Prevention ......................................................... 540-231-6557
Service for Students with Disabilities ........................................ 540-231-3788
Title IX .................................................................. 540-231-1824
Dean of Students Office………………………………………………………………..540-231-3787
Environmental Health and Safety Services-
Office of Emergency Management………………………………………………540-231-4873
Facilities Services…………………………………………………………………….540-231-4300
Dean of Students Office………………………………………………………………540-231-3787
Women's Center at Virginia Tech………………………………………………540-231-7806
Women's Resource Center of the New River Valley
(24-hour crisis hotline) ……………………………………………………………540-639-1123
Emergency Management Protocol

Activation of the Emergency Medical System
In emergency situations, all personnel should follow the established Emergency Action Plan (EAP). This document can be obtained from the VTSC SMD or VTSC office. Please refer to this document for complete details on the emergency response protocols and site-specific plans for emergencies.

All VTSC SMD personnel will always make decisions in the best interest of student safety when deciding what personnel and resources are needed in emergency situations. If a member of the VTSC SMD staff is not present in an emergency situation involving a student, the team’s risk management officers should follow their level of emergency response certification (typically CPR/AED/First Aid) and act accordingly. The athletic trainer should be contacted as soon as possible.

The VTSC SMD may ask for bystander assistance in emergency situations. This may include calling 911, emergency equipment, meeting an ambulance, holding doors open, calming patients or teammates, directing traffic, or contacting other parties. The assistance of bystanders helps the medical professionals expedite care for the patient and allows for the medical professionals to focus on the provision of care.
Emergency Management Plan Emergency Referral Guide

Medical Emergencies/Injuries that require activation of EMS:

- Respiratory arrest
- Severe chest or abdominal pains that may indicate heart attack, cardiac arrest, or an internal hemorrhage
- Excessive bleeding from a major artery, or loss of a significant amount of blood
- Suspected spinal cord injury, paralysis, or inability to move any body part
- Open or multiple fractures and/or fractures involving the femur, pelvis, or ribs
- Joint fracture or dislocation
- Signs of shock or possible internal hemorrhage
- Eye trauma

Medical Injuries that require immediate physician referral:

- Dental injuries where a tooth has been knocked out or knocked loose
- Minor or simple fractures
- Lacerations that may require suturing
- Loss of normal sensations, or injuries that may indicate a nerve root injury
- Noticeable muscular weakness that may indicate peripheral nerve injury

Emergency conditions should be referred to the nearest trauma center
Catastrophic Injury Management Plan

Policy
A catastrophic incident is defined as a sudden death or disabling injury by any cause. These include, but not limited to the following:

- Death of a student, coach, or VT staff member;
- Spinal cord injury resulting in partial or complete paralysis;
- Loss of a paired organ;
- Severe head injury;
- Injuries / illnesses resulting in severely diminished mental capacity or other neurological injury that results in an inability to perform daily functions (e.g. coma);
- Irrecoverable loss of speech, hearing (both ears), sight (both eyes), or a limb;

Every individual involved in the management of catastrophic incidents should be prepared and knowledgeable of their roles and responsibilities.

Procedure
In the event of a catastrophic incident there are steps that should be followed in order to provide the best care for everyone involved with situation:

1. The Emergency Action Plan for the specific venue (practices, games, weightlifting) should be followed.
2. A Recreational Sports staff member or coach will accompany the injured student to the medical facility.
3. Once at the medical facility, the Recreational Sports staff member will contact the athletic trainer and head coach with medical updates.
4. If possible, the athletic trainer or head coach will also go to the medical facility.
5. If the incident happens during an away event, a member of coaching staff or teammate will stay with the student in order to act as a university representative until other arrangements can be made.
6. If the athletic trainer is covering the event, the athletic trainer will proceed to notify the sport club staff who will notify the following:
   - Director of Recreational Clubs
   - Assistant Director of Sport Clubs
   - Assistant Director of Operations and Risk Management
7. If athletic trainer is not covering event, head coach, risk management officer, or supervisor will proceed to notify the athletic trainer and Sport Club Coordinator who will notify the Director of Recreational Sports.

Contact Information
Campus Police 911
Julie Rhoads Office: (540) 231-5616
Lydia Haren Office: (540) 231-8428
Ali Cross Office: (540) 231-2543
Bill Old Office: (540) 231-3681
Allen Glick Office: (540) 231-9917
Cell: (540) 239-9896
Severe Weather Protocols
**Lightning**

**Policy**
This policy is to be followed in the event of potential severe weather at all sport club and recreational sport events, and helps decrease the risk of injury from lightning strikes to athletes. Lightning proximity will be primarily monitored by using an online weather monitoring system (Weatherbug and NOAA Radar smartphone app) and flash-to-bang method. This policy is in accordance with the 2013 National Athletic Trainer’s Association Position Statement regarding lightning safety for athletic and recreational events.

**Procedure**
1. The National Athletic Trainers’ Association Position Statement for lightning will be followed during all Virginia Club Sports sponsored events.

2. The athletic trainer will have the authority to cancel or modify events/practices for health and safety concerns. If the athletic trainer is not present at event, other sport club staff or sport club student supervisors have the authority to cancel or modify event/practices for health and safety concerns.

3. Activities will be terminated **IMMEDIATELY** if lightning is visible or detected within 10 miles of the site, or thunder is heard. Activities may not resume until there has been no lightning activity within the 10 mile radius for a minimum of 30 minutes following the last strike or the presence of thunder. Restrictions include warm-up activities, not just the resumption of competition.

4. Recreational Sports Staff will alert teams of the presence of lightning utilizing 3 air-horn bursts and via phone call or text messaging when lightning is within the 10 miles radius.

5. Everyone at the site should seek a lightning-safe facility immediately when the warning is sounded. Emergency Action Plans suggest safe locations for each site.

6. All equipment should remain at the field and be cleaned up at a later time. No one should prolong their exposure to dangerous weather in order to make trips to retrieve equipment. Any metal athletic equipment should be immediately dropped or removed in order to decrease the risk of lightning strikes.

7. Everyone has the freedom to leave an athletic site without repercussion or penalty, to seek a safe structure or location if they feel they are in danger from impending lightning activity.

8. For away competitions or events, a host school representative will follow their institution’s weather guidelines and policies. VT Recreational Sports does retain the right to advocate for the safety of our students if there is disagreement. If no host school representative is present at an away site, VT Recreational Sports member will apply the above guidelines and use our best judgement to ensure the safety of everyone.
9. Avoid using a landline telephone: cell phones are a safer alternative.

**In the event of lightning, safe locations include:**
- Fully enclosed buildings with wiring and plumbing (when possible).
- Fully enclosed metal vehicles with windows closed, if no other safe options exist.
- If unable to reach a lightning-safe facility before a storm arrives, you should assume a crouched position on the ground with only the balls of the feet touching the surface. Contact with the ground should be minimized as electrical current can enter your body through the ground. Arms should be wrapped around the knees and you should lower their head.

**Unsafe Lightning Locations include the following:**
- Locations with open areas
- Near tall objects, such as trees, poles
- In or near any body of water
- Close proximity to showers, locker rooms, or indoor pools

**In the event of a lightning-related injury:** Ensure the safety before entering the venue. If the scene is safe, activate Emergency Action Plan (EAP) and move the injured person to safe location and provide first aid care. CPR will most likely be required.
Tornado

Policy
This policy is to be followed in the event of potential severe weather at all events/practices. This policy helps decrease risk of injury from tornados. Tornado activity will be monitored by using an online weather monitoring system (Weatherbug and NOAA Radar smartphone app), VT alerts, and warning sirens.

Procedure
In the event of severe weather, the following steps should be taken, along with all guidelines stated in the lightning policy and procedure:
1. Utilize an online weather monitoring system (Weather STEM and NOAA Radar smartphone app), VT alerts, and warning sirens.
2. If a severe weather or tornado warning is issued for this area, we will be warned of the immediate danger.
   - **Tornado Watch**: weather conditions are favorable for the formation of a tornado
   - **Tornado Warning**: a tornado has been sighted in our area
3. In the event of a tornado warning or tornado sighting, everyone present at an outdoor event should quickly seek indoor shelter.
4. Close all external doors and stay away from windows.
5. Remain in the shelter until an “all-clear” is given.
6. Areas to avoid during tornado warning include: Lobbies of buildings with glass windows, walkways, atriums, rooms with large roof spans (such as auditoriums), end rooms in a one-story building, rooms with large glass areas, and or hallways that could become a “wind tunnel”.
7. If you are in a car, avoid driving out of the path of the tornado or the storm due to the unpredictable movement of tornados. Get out of the car and seek shelter in a sturdy building or structure. If no structure is available, lie flat in the nearest ditch, ravine, or low area, face down with hands protecting the back of your neck and head.