

BASIC FIRST AID FOR PWSI COACHES

The soccer coach is responsible for an injured player until the player is transferred to the care of competent medical personnel, parents, or guardians. We hope that you never have to use the information in this packet. If an injury does occur parents and players expect you to take charge of the situation and know how to proceed.

I. EMERGENCY PROCEDURES:

- a. Take charge of the situation.
- b. Decide the nature and extent of the injury.
- c. Initiate emergency procedures (i.e. call 911) if required.
- d. Transfer care of player to fire and rescue personnel.

II. STEP 1 – TAKE CHARGE OF THE SITUATION:

If you have an injured player you should administer to the needs of that player. Have your assistant coach, or a parent, take charge of all other players. If there is no one else available to help you, send all uninjured players to a gathering area that is within range of your voice and vision until the situation is resolved. By taking these simple actions you will establish immediate control, calm those in the area, and clear the area of unnecessary distractions.

III. STEP 2 – DECIDE THE NATURE AND EXTENT OF THE INJURY:

When you reach the injured player conduct a visual analysis of the situation.

- ✓ Is the player breathing?
- ✓ Is the player conscious?
- ✓ Is the player bleeding?

Ask the player questions to decide what happened and where the pain is. This will help you decide if the injury is serious and requiring emergency medical intervention, or whether it is an injury that can be cared for without emergency medical treatment.

IV. STEP 3 – PROVIDE EMERGENCY CARE:

If you use the ABC's of emergency care as described by the American Red Cross, you will be able to appropriately handle most situations you will encounter.

- A – Airway
- B – Breathing
- C – Circulation

Remembering the ABC's will remind you of what actions you should take in potentially life-threatening situations. We cannot provide you with detailed instructions on how to handle all medical emergencies. We encourage you to

contact your local chapter of the American Red Cross to obtain training on how to conduct Cardiopulmonary Resuscitation (CPR).

The ABC's:

► Open the Airway

Always check the airway to be sure that it is clear of any debris that may be preventing breathing. In soccer, be especially alert for the mouth guard – remove it immediately, even if it does not appear to be an obstruction.

► Restore Breathing

Once the airway is open, check to see if the player is breathing. Is the chest moving up and down? Are there sounds of breathing? Can you feel air being exhaled from the nostrils or mouth? If breathing is not taking place you must begin artificial respiration. The standards taught by the American Red Cross are the standards that must be followed when attempting to restore breathing.

► Restore Circulation

If the heart has stopped beating, circulation must be restored by conducting CPR. Learning CPR is invaluable, especially for those individuals involved in youth sporting activities. The techniques of CPR are beyond our ability to describe here in this handout. PLEASE attend CPR training!

► Bleeding

If the player is bleeding badly, you must still follow the ABC's. It won't do any good to stop the bleeding if the injured player cannot breathe. Extensive bleeding should be controlled by direct pressure. If available, use a sterile pad to apply the pressure. The limited amount of time it will take for fire and rescue to respond in case of a medical emergency involving serious bleeding contradicts the use of a tourniquet to control bleeding.

V. **STEP 4** – TRANSFER CARE TO A MEDICAL PROFESSIONAL

If you determine that the injury may be serious and immediate call for assistance should be made. Do not stop treating the player to make the call for help. Have an assistant, a parent, or if absolutely necessary, a player make the call to 911. Be prepared for this scenario. Know where the nearest phone is located in relation to your practice and game fields. Know what the major intersections or cross streets are to get rescue personnel to your location. You should have a completed and signed medical treatment form in your possession for each player.

If you are unable to make immediate contact with the parents you should accompany the player to the hospital as you are the person designated to authorize emergency medical treatment.

If the player's injury is not serious enough to warrant immediate emergency medical care (i.e., a strain or sprain), you should have in your possession first aid

materials to treat minor conditions. Ice and a small first aid kit should be mandatory items in your inventory of equipment. The items listed below are sufficient for treating most minor injuries:

FIRST AID CHECKLIST

_____ Adhesive Tape	_____ Plastic Bags for Ice
_____ Sterile Gauze Pads	_____ Scissors
_____ Elastic Bandages	_____ Telfa No-Stick Pads
_____ Safety Pins	_____ Tweezers

An excellent substitute for ice cubes is frozen sponges stored inside sandwich bags.

Do not use antiseptic sprays, creams or lotions. A player may have an allergic reaction to one of the ingredients.

A good rule of thumb for coaches is “If you can’t treat the problem using the supplies listed above, then it is too big a problem for you to handle.” You can probably handle bruises, sprains, strains, and small cuts. If you suspect anything more serious, call for professional help.

VI. – CARE FOR MINOR INJURIES

► R.I.C.E.

Again, let us stress that you should not attempt to care for anything except minor injuries. Many minor injuries can be cared for by using the R.I.C.E.

The R.I.C.E. formula for taking care of minor injuries involves the following:

- R = Rest: Keep the player out of action.
- I = Ice: Apply ice to the injured area.

- C = Compression: Wrap an elastic bandage around the injured area and the ice bag to hold the bag in place. The bag should not be so tight as to cut off blood flow to the injured area.

- E = Elevation: Let gravity drain the excess fluid.

When you are using the R.I.C.E. formula, keep ice on the affected area for 15 minutes and leave it off for 20 minutes. Repeat this process three or four times. Keep icing the area for the first 72 hours following the injury. After three days, medical treatment should be obtained in the injury is not substantially better.

In case of any injury requiring medical treatment, or that seems serious, complete the injury report form and turn it into your league director.