

SECTION 01 - Elevated Incident System

4 Steps to EIS

Must be able to successfully describe all 4 steps verbally.

- **01) Assess:** Size up the situation to ensure there is no pending subsequent danger to yourself or others.
- **02**) **Remove:** Remove anyone from potential harm, remove all bystanders, and remove unneeded staff.
- **03**) **Decide:** Decide if any direct intervention is necessary by you. Decide if any Public Safety Services are needed (EMS, FD, or PD), if you are not 100% positive, wait until the next step. **04**) **Contact:** Contact Corporate, (If EIC is not GM, contact the GM as well, contact corporate first). Follow corporate instructions as given.

Calling 911

Student must state that they will assign someone specific by making eye contact and they must then display the ability to say verbatim or close to verbatim (ensuring all the key points within): "(Persons name) call 911, tell them to enter through the back, then I want you to report back to me. Now please repeat my instructions" The student must explain that they will ensure a positive reply, then send off 911 caller immediately with a sense of urgency.

Informing Staff

Must be able to successfully recite all 4 steps verbally:

Assure staff there is nothing to be alarmed about.

Instruct staff to keep EI area clear.

Remind staff to stay focused on personal assignments.

Inform staff who the active EIC is.

SECTION 02 - Medical Interventions:

Eye Irritation

Must state that they will wash out eyes with copious amounts of water. Ask the student when they would need to call EMS for eye irritation; the student's answer should be *only in cases* where a chemicals went into victim's eye(s). Explain to student that here it is truly meant a large* amount of chemicals, in other words 911 should not be called if a small amount of Windex spray floated into someone's eye, however a parent should be called in this case.

Note: this is eye irritation not impalement or puncture etc.





Hemorrhaging

Ask student:

- **01**) What to do with a very small cut that is bleeding: *Band-Aid or gauze*.
- **02)** What to do with a heavy bleeding: Gauze with pressure on wound via wrapping it, ensure the student knows not to wrap <u>too tight</u> as you must be careful not to cut off circulation. (**Have the student demonstrate wrapping on yourself with moderate pressure**).
- **03**) What to do with a very profound bleeding (large cut to abdomen, neck, or head etc): Abundance of gauze and pressure. (Have the student demonstrate gauze and pressure on yourself with good pressure).
- **04**) In which case or cases should 911 be called? *Only in a case of profound bleeding*.
- **05**) In which case or cases should parents be called? *All*.

Ensure the student is aware that whenever they deal with blood they should be wearing gloves.

Choking

Start by asking student "You see a child eating a hotdog and has the universal choking sign engaged. The child is coughing profusely. What should you do?" If the student replies "Heimlich Maneuver" they are **incorrect** this child is passing air (via his/her coughing) so the child must be encouraged to cough.

Ensure the student understands that choking is occurring when there is no passing of air. Have the student explain the "Heimlich Maneuver" to you by demonstrating (without *actually* doing) the maneuver on another staff member. Hand-over fist, thrusting over abdomen in an upward position.

Ask victim what to do with pregnant women? Chest Thrust.

victim what to do with an infant? Minding the infants throat, delivery back slaps with the child at 30-45 degree angle, after 5 back blows then child should be flip to deliver 5 chest thrust between the nipple line (repeat until 911 arrives).

Ensure the student knows 911 is the first thing to assign to another staff member!

Hypoglycemia

Ask the student to tell you what Hypoglycemia is and what to do when a victim known to have a history of Hypoglycemia is acting tired, drowsy, and strange.

Answer: After consulting parents: have the victim eat the glucose tube in the first aid bag, no EMS, victim must be picked up by family and victim must be closely watched eating a meal after





receiving glucose.

Ask the student; what if victim is unconscious?

Answer: call EMS, ensure victim is breathing, has a pulse, and is lying in the recovery position-do not feed the unconscious victim anything!

Allergic Rxn & Anaphylaxis

Ask a medium case of urgency (If victim is showing only signs of redness, sneezing, and hives)

Answer: Contact parents and with permission, give victim Liquid Benadryl. Dose is 1mg/kg (kg = 2.2 lbs); 1 teaspoon equals 12.5mg. No EMS, victim needs to be picked up by family.

Ask about a high case of urgency (If victim is struggling to breath, signs of hives, and/or expressing universal choking signs)

Answer: Initiate EMS then call parent, ask permission to administer Epinephrine (Epi Pen) if victim is has signs of apnea (not breathing).

Have student demonstrate the proper use of an EpiPen.

Unconscious Victim (CPR)

Note: it is normal and common to break rips while performing good CPR; explain to student to expect this possibility and to not be alarmed if it occurs.

ADULT:

Here you will use a gym spring board with 2-3 springs in it as your "adult patient" tell the student that the *adult* patient is the spring and has been found unconscious, tell the student to perform by acting out what he/she will do.

- **01)** The student must try to waken victim verbally and by tapping on shoulders etc then the student must attempt a sternal rub... if nothing works (verbalize nothing works to student): check for breathing (tell student there is no breathing).
- **02**) Student should appropriately assign someone for calling 911.
- **03**) Student must find the nipple line and with a 90 degree angle directly over the victim, student must begin chest compressions utilizing the hand over fist method.
- **04)** Chest compressions should be none stop "hard and fast" about two-inches deep (The beat/pace of the popular "staying alive" song is a classically good rule of thumb).
- **05**) Student should ask someone to switch with him/her every 2 minutes and not stop the CPR process until EMS takes over or breathing resumes.





For adults G.USA utilizes "Hands Only CPR" thus "Rescue Breaths" are not necessary.

Have the student should you at least 20 seconds of good compressions before approving.

CHILD:

Here you will use a gym spring board with 2-3 springs in it as your "child patient" tell the student that the *child* patient is the spring and has been found unconscious, tell the student to perform by acting out what he/she will do.

- **01)** The student must try to waken victim verbally and by tapping on shoulders etc then the student must attempt a sternal rub... if nothing works (verbalize nothing works to student): check for breathing (tell student there is no breathing).
- **02**) Student should appropriately assign someone for calling 911.
- **03**) Student must give two slow breaths for about a second each ("Rescue Breaths") while watching for chest rise; student must be careful not to pump *too* much air into the child. "*If they are half your size, give half your breath*". Have the student act out these breaths without touching their lips to the pretend patient.
- **04**) Student must find the nipple line and with a 90 degree angle directly over the victim, student must begin chest compressions utilizing only **one arm/hand**.
- **05**) Chest compressions should be none stop "hard and fast" just enough to visibly push the chest down. Student should give only 30 chest compressions. Student is to count out loud 30 chest compressions.
- **06**) Immediately student should give two more slow breaths ("Rescue Breaths") while watching for chest rise; being careful not to pump *too* much air into the child. "If they are half your size, give half your breath". Have the student act out these breaths without touching their lips to the pretend patient.
- **07**) Student should hypothetically ask someone to switch with him/her every 2 minutes (or about every 5 cycles) and not stop the CPR process until EMS takes over or breathing resumes.

Have the student demonstrate at least 3 good cycles of this.

INFANT:

Here you will use a baby doll as your "infant patient" tell the student that the *infant* patient is the baby doll and has been found unconscious, tell the student to perform by acting out what he/she





will do.

- **01**) The student must try to waken victim verbally and by tapping on shoulders etc (no sternal rub on infants)... if nothing works (verbalize nothing works to student): check for breathing (tell student there is no breathing).
- **02)** Student should appropriately assign someone for calling 911.
- **03**) Student should give two slow breaths for about a second each ("Rescue Breaths") while watching for chest rise; student must be careful not to pump *too* much air into the infant. **Infants should receive what is the equivalent to a "puff" of air.** Student should verbalize that he will cover the mouth and nose of infant's face with their own mouth. Have the student act out these breaths without touching their lips to the pretend patient.
- **04**) Student must find the nipple line and with their hand placed directly over the victim, student must begin chest compressions utilizing only **two fingers**.
- **05**) Chest compressions should be none stop "hard and fast" with the depth being just enough to visibly push the chest down. Student is to count out loud 30 chest compressions.
- **06**) Student must immediately give two more slow breaths ("Rescue Breaths") while watching for chest rise; being careful not to pump *too* much air into the infant. **Infants should receive what is the equivalent to a "puff" of air.** Student should verbalize that he will cover the mouth and nose of infant's face with mouth. Have the student act out these breaths without touching their lips to the pretend patient.
- **07**) Student should hypothetically ask someone to switch with him/her every 2 minutes (or about every 5 cycles) and not stop the CPR process until EMS takes over or breathing resumes.

Have the student demonstrate at least 3 good cycles of this.

Seizures

Ask student to explain how to identify a seizure. Make sure they understand that symptoms can be mild, such as a child gazing off to one side without movement or being coherent.

Ask the student what they would do with a seizure victim:

Answer: Assign a call to 911 and parents. Ensure victim is in soft padded, lightly guide victim away from objects that can harm. DO NOT TRY TO STOP VICTIM'S SHAKES AND DO NOT PLACE ANYTHING IN VICTIMS MOUTH!

Ask the student what would they do when the seizure is over.

Answer: After seizure subsides place victim in the recovery position to prevent aspiration of





vomit.

SECTION 03 - Trauma Interventions:

Cervical Spine Injuries

Have student define what a Cervical Spine Injury is... ask them what area the cervical spine is in

Answer:

When one falls directly on head, scorpions, or folds over. The distance the victim fell from must be higher than the victim's own height, nevertheless depending on the force and position the victim fell, and there can be exceptions. The cervical spine is generally speaking, the neck area.

Ask student how they would handle scenario.

Answer: Victim must lie on back and not move head or body. EIC or delegated staff must hold head still to avoid further injury. EMS must be called immediately if a cervical spine injury is suspected. No ice, gauze, or wrapping needed.

Musculoskeletal Injuries

Ask student what a musculoskeletal injury is.

Answer: Broken Bones, Muscle Tissue Tears, Sprains, or Strains. Typical: wrist fractures, hand fractures, forearm fractures, ankle fractures, and tendon/ligament tares in the knee or ankle, etc.

Ask them what RICE stands for.

Rest, Ice, Compression (light), Elevate.

Ask the student what he/she would do with an open bone fracture

Answer: EMS must be called immediately. If fracture is open, sterile gauze must be placed with slight pressure from the victim's own hand if possible. EIC must use gloves and gauze found in the on property Medical Bag. No other treatment should done until EMS arrives.

Puncture Wounds

Ask student what they would do with small, medium, and large punctures.

Answer:

Small Puncture (example to give; safety pin):

Band-Aide, call parents.

Medium Puncture (example to give; small knife and a small puncture- not deep):

Apply moderate pressure by victim's hand using gauze, no ice. No EMS, hospitalization needed.





Large Puncture (example to give; deep stabbing):

Apply gauze around object stabilizing it, no ice NEVER REMOVE OBJECTS OF SIGNIFICANT SIZE THAT HAVE IMPALED A BODY. Call EMS, hospitalization needed.

SECTION 04 - Other Interventions:

Lights Out

Ask student what they would do in a lights out scenario.

Answer: Cease all physical activity of members in gym. Check all main power breakers to see if any flipped. If unsuccessful, call power company, corporate and G.M.

Taking Cover

Ask student what they would do in a scenario where a storm causes windows to break or a gunman in the facility, etc.

Answer: Staff members must corral all gymnasts and take cover under equipment, locked rooms, and/or mats. Evacuation may be necessary in some scenarios.

Missing Child

Ask student what they would do in a scenario where there is missing child.

Answer:

Activate a "Missing Child Alert"

- 01) EIC must alert all staff of the missing child's name, gender, ethnicity, age, and other possible describers such as clothing last seen in.
- 02) EIC must delegate two-three staff members to check every section of the facility, including all bathroom stalls, and under any possible hiding places in the facility (Mats, Pits, Under trampolines, etc.) Confirm by also checking these areas.
- 03) EIC must receive conformation from every single staff member in the building that child is not found and then when there is no success, move forward to step 04. Ensure the student knows they should not commence steps 4 or 5 until they are 100% confident the child is not in building. Also should contact G.M. and corporate first.
- 04) Contact Family.
- 05) Call 911: report a missing child
- (if family agrees and does not otherwise know where the child went).





Active Child Abuse

Ask how active child abuse is defined.

Answer: Active child abuse is consistent violent strikes upon a child with the intent of undeniable physical harm.

Ask student what they would do if this is occurring.

Answer: 911 should be called first. Non-aggressively approach the assailant keeping a safe distance to avoid violence towards you.

Ask student what he/she would do if child abuse in the home is suspected.

Answer: If anyone suspects child abuse in the home, the General Manager must be notified. DCF is to be contacted after consulting with corporate.

Escalated Adult Confrontation

What would the student do in the case of two adults making violent physical contact or two adults on the verge of making physical contact via loud argument and gesturing?

Answer: He/she must diffuse the confrontation by a non-violent removal of one of the adults unless they can be otherwise calmed, perhaps by pulling them into a back office. If violent physical contact is made between the two adults, 911 should be called and any bystanders must be removed from the area.

