



Coventry Little League

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Pottstown, PA 19465

Email:

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www.coventryll.org



Coventry Little League

2021 Safety Manual



League ID Number 238-27-04

Table of Contents

1. What is ASAP?	3
2. Important Contacts and Dates.....	3
3. League Contacts	4
4. The “Where is it” List	5
5. Safety Code	6
a. Steps to Playing Safe	6
b. Steps to General Safety	7
c. Training to be Safe	8
d. Young Athlete Bill of Rights	8
e. Concession Stand	8
f. Volunteer Requirements	9
g. Lightning Rules	9
h. COVID19	9
i. Incident Reporting System	11
6. Safety / First Aid Information	14
7. CLL Facility Survey.....	Appendix A

What is ASAP?

In 1995, ASAP (A Safety Awareness Program) was introduced with the goal of re-emphasizing the position of the Safety Officer “to create awareness, through education and information, of the opportunities to provide a safer environment for kids and all participants of Little League Baseball”. This manual is issued to all managers, coaches and league officers to coordinate and organize the safety efforts of the league.

Coventry Little League Safety Officer: William Derban

2021 Important Dates

Team Selections – Week of February 15th

Wampler Clean-up Day – March 6th @ 8am

Coaches Clinic – March 6th, 12:00pm – 2:00pm @ Wampler

Manager’s Meeting – March 7th at 8:00pm @ Norco Township building

Important Contacts

Name	Contact Information
Emergency	911
Norco Ambulance Service	(610) 326-5460
Norco Fire Department	(610) 323-3263
North Coventry Police	(610) 323-8360

League Officials

Director	Position / Responsibility	E-mail	Phone
Kevin Kirby	President	Kkirby @ pgsd.org	267-718-5480
Mike Brilla	Vice President Majors/Intermediate Baseball Representative and Safety Officer	brillafamily4 @ gmail.com	
John Cooper	Treasurer Concessions	johnnycoop8503 @ gmail.com	
Ryan Vermillion	Coach/Player Development	rvermillion @ vwgroup.com	
Bob Brobst	Information Officer Uniforms	rdbrobst @ yahoo.com	
Randy Taylor	Complex Supervisor	randy.taylor @ colonialelectric.com	
Jim Beideman	Secretary Training Coordinator	james.beideman @ yahoo.com	
Scott Shebelsky	T-Ball Representative	sshebelsky @ gmail.com	
Christine Campbell	Softball Representative Uniforms	christinecamp3 @ gmail.com	
Leslie Proffitt	Challenger Representative	laproffitt16 @ gmail.com	
Dustin Locklear	Minors Baseball Representative	lockleardustin209 @ gmail.com	
Mike Murray	Sponsorship/Fundraising	mmurray928 @ comcast.net	
Kevin Kasper	Scheduling	forrest212 @ hotmail.com	

The “Where is it” List

Item	Location
First Aid Kits	<ul style="list-style-type: none"> ● In every Coach’s Equipment Bag ● In the Field #1 Press Box ● In the Concession Stand
Ice Packs	<ul style="list-style-type: none"> ● In every Coach’s Equipment Bag First Aid Kit ● In the Field #1 Press Box First Aid Kit ● In the Concession Stand First Aid Kit ● Additional Packs in Concession Stand/Equipment Room
Phone	<ul style="list-style-type: none"> ● Inside Concession Stand
Public Address System	<ul style="list-style-type: none"> ● In the Field #1 Press Box ● In the Field #2 Press Box
Incident / Injury Tracking Forms	<ul style="list-style-type: none"> ● In the Concession Stand Mail Bin (left side of door) <ul style="list-style-type: none"> ○ Blank Forms in Top Bin ○ Completed Forms in Bottom Bin ● See Incident Report System on page 11
Safety Program Suggestions	<ul style="list-style-type: none"> ● Notify League Safety Officer

All Managers, Coaches, and Board Members will be issued a copy of the current Safety Manual at the start of each season. In addition, the plan is posted on the league website.

Safety Code

1. Steps to Playing Safe:

The adherence of the following steps is the responsibility of every manager, coach, and player of Coventry Little League.

- 1.1. Inspect playing area before each practice or game for holes or foreign objects that may cause injury.
- 1.2. Always warm-up with calisthenics and/or running prior to a practice or game.
- 1.3. Do not play or practice when weather, light, or field conditions are not adequate for safe play.
- 1.4. Inspect equipment before each practice or game. Do not allow the use of cracked bats.
- 1.5. Batters must wear batting helmets whenever they are batting, including in the batting cages.
- 1.6. Catchers must wear full gear when catching in practice or a game including a protective cup, a throat protector (dangler), and a chest protector.
- 1.7. Only umpires, managers, coaches and players are allowed on the playing field or in the dugouts during a game.
- 1.8. All equipment must be kept out of "The field of play."
- 1.9. Remove all jewelry or watches before the start of practice or game.
- 1.10. Catchers must wear a helmet and a mask (with a dangler) at a minimum whenever they are warming up pitchers. Managers/Coaches are NOT allowed to warm up pitchers.
- 1.11. On-deck batters are not allowed at any time. All offensive players, except the batter, must stay in the dugout or on the bench.
- 1.12. Headfirst slides are not allowed, except when the runner is returning to the base.
- 1.13. Foul balls hit out of play should be returned to the nearest manager or coach.
- 1.14. Children wearing glasses should be encouraged to wear safety glasses.
- 1.15. First aid kits will be issued to every manager prior to the start of the season.

2. Steps to General Safety

The adherence of the following steps is the responsibility of EVERYONE having any involvement with Coventry Little League.

- 2.1. 2021 CLL ASAP Plan will be provided to every team manager. He or she should review with all assistant coaches.
- 2.2. Never leave an unattended child at a practice or game.
- 2.3. Do not hesitate to administer First Aid when needed, but know your limitations.
- 2.4. Never administer medications or transport the injured. Utilize the emergency system as needed.
- 2.5. Managers will be made aware of any pertinent (and shared during parents during registration) medical issues for their players.
- 2.6. Report all injuries and incidents to the League Safety Officer using the Incident Reporting System.
- 2.7. Report any present or potential safety hazards to the League Safety Officer by phone or safety mail bin located inside the Concession Stand.
- 2.8. Evacuation of fields due to lightning/extreme weather for all coaches, players, and spectators will consist of, at a minimum, immediate stoppage of play and evacuation of the Wampler Complex to your automobiles with doors and windows closed. Concession workers and umpires may remain in concession stand with doors and windows closed.
- 2.9. The decision regarding re-opening of the complex and resuming of play is the responsibility of an acting umpire and can only be done if lightning strikes have not been seen for a minimum of 20 minutes.
- 2.10. No one under the age of 12 is permitted inside the concession stand.
- 2.11. No one is permitted to play within the work-shed area.
- 2.12. Throwing and batting is not permitted within spectator areas.
- 2.13. Horseplay is not permitted within the complex and its parking lots.
- 2.14. Fence climbing is not permitted.

3. Training to Be Safe
 - 3.1. Training of Managers and Coaches is the responsibility of the League Safety Officer of the Coventry Little League.
 - 3.2. First-aid kits will be handed out with coaching equipment on March 6th, 2021. Additional kits are available through the Safety Officer / Board Members.
 - 3.3. Coaching and baseball fundamental education will be given to all Managers on March 7th, 2021.
 - 3.4. The League performs a facility survey as part of the annual Spring clean-up activities.

4. Young Athlete Bill of Rights
 - 4.1. Right to participate in sports.
 - 4.2. Right to participate at a level commensurate with each child's maturity and ability.
 - 4.3. Right to have qualified adult leadership.
 - 4.4. Right to play as a child and not as an adult.
 - 4.5. Right to share in leadership and decision-making of sport participation.
 - 4.6. Right to participate in a safe and healthy environment.
 - 4.7. Right to proper preparation for participation in sports.
 - 4.8. Right to an equal opportunity to strive for success.
 - 4.9. Right to be treated with dignity.
 - 4.10. Right to have fun in sports.
 - 4.11. Right to play on co-education teams.
 - 4.12. Right to play different team positions.

5. Concession Stand
 - 5.1. Adult must be present in the Concession Stand at all times.
 - 5.2. No children under the age of 12 years old are allowed in the Concession Stand.
 - 5.3. Children 12 and over may help handling non-heated items and assisting adults if the child is approved by the Concession Manager.
 - 5.4. No one under the age of 18 is allowed to use heated appliances (hot dog machine, coffee maker, etc).
 - 5.5. No more than 3 child helpers at one time.
 - 5.6. Follow food handler's safety guide for storing all food and in the preparation of food.
 - 5.7. Check condiments frequently to make sure they are filled and cleaned (mustard, ketchup, etc).
 - 5.8. All Concession workers will follow opening and closing procedures as prepared by the Concession Manager.
 - 5.9. All appliances will be unplugged at the close of business.
 - 5.10. Empty all trash at closing time.
 - 5.11. Lock and unlock the bathrooms daily.

6. Volunteer Requirements
 - 6.1. Attention all Coventry Little League Volunteers
 - 6.1.1.1. All CLL Volunteers must complete the Little League Volunteer Application and Request for Criminal Record Check (background checks performed online by league safety officer). Volunteers include, Members of the CLL Board of Directors, Coaches, Assistant Coaches, Team Helpers, and anyone else with direct contact to our players.
 - 6.2. Attention all Coventry Little League Managers
 - 6.2.1.1. Managers must make sure all Assistant Coaches have the appropriate background clearance.
7. Lightning Rules
 - 7.1. The strictest rules in Little League regarding a rainout cover lightning. If anyone sees lightning or hears thunder, adults must immediately clear the field of all players until the lightning storm passes. Everyone should seek shelter in a substantial building or hard-topped vehicle. Coaches and Umpires have the option of either continuing the game if the lightning is not seen for at least 20 minutes – or cancelling the game.
 - 7.2. Please refer to the NOAA “Coaches & Officials Guide to Lightning Safety” for more information.
8. COVID19
 - 8.1. If the current pandemic continues into the 2021 season, the Coventry Little League Board of Directors will follow guidelines defined by local health authorities.



Weather Safety: Lightning

Safety and Preparedness Factsheet

Lightning Safety for You and Your Family

When Thunder Roars, Go Indoors!

Each year in the United States, more than 400 people are struck by lightning. On average, between 55 and 60 people are killed; hundreds of others suffer permanent neurological disabilities. Most of these tragedies can be avoided with a few simple precautions. When thunderstorms threaten, get to a safe place. Lightning safety is an inconvenience that can save your life.

The National Oceanic and Atmospheric Administration (NOAA) collects information on weather-related deaths to learn how to prevent these tragedies. Many lightning victims say they were “caught” outside in the storm and couldn’t get to a safe place. With proper planning, these tragedies could be prevented.

Other victims waited too long before seeking shelter. By heading to a safe place 5 to 10 minutes sooner, they could have avoided being struck by lightning.

Some people were struck because they went back outside too soon. Stay inside a safe building or vehicle for at least 30 minutes after you hear the last thunder clap.

Finally, some victims were struck inside homes or buildings while they were using electrical equipment or corded phones. Others were in contact with plumbing, a metal door or a window frame. Avoid contact with these electrical conductors when a thunderstorm is nearby!

What You Might Not Know About Lightning

- ▶ All thunderstorms produce lightning and are dangerous. In the United States, in an average year, lightning kills about the same number of people as tornadoes and more people than hurricanes.
- ▶ Lightning often strikes outside the area of heavy rain and may strike as far as 10 miles from any rainfall. Many lightning deaths occur ahead of storms or after storms have seemingly passed.
- ▶ If you can hear thunder, you are in danger. Don’t be fooled by blue skies. If you hear thunder, lightning is close enough to pose an immediate threat.

- ▶ Lightning leaves many victims with permanent disabilities. While a small percentage of lightning strike victims die, many survivors must learn to live with very serious lifelong pain and neurological disabilities.

Avoid the Lightning Threat

- ▶ **Have a lightning safety plan.** Know where you’ll go for safety and how much time it will take to get there. Make sure your plan allows enough time to reach safety.
- ▶ **Postpone activities.** Before going outdoors, check the forecast for thunderstorms. Consider postponing activities to avoid being caught in a dangerous situation.
- ▶ **Monitor the weather.** Look for signs of a developing thunderstorm such as darkening skies, flashes of lightning or increasing wind.
- ▶ **Get to a safe place.** If you hear thunder, even a distant rumble, immediately move to a safe place. Fully enclosed buildings with wiring and plumbing provide the best protection. Sheds, picnic shelters, tents or covered porches do NOT protect you from lightning. If a sturdy building is not nearby, get into a hard-topped metal vehicle and close all the windows. Stay inside until 30 minutes after the last rumble of thunder.
- ▶ **If you hear thunder, don’t use a corded phone except in an emergency.** Cordless phones and cell phones are safe to use.
- ▶ **Keep away from electrical equipment and wiring.**
- ▶ **Water pipes conduct electricity.** Don’t take a bath or shower or use other plumbing during a storm.

Organized Outdoor Activities

Many people enjoy outdoor activities. It’s essential for the people in charge of these activities to understand the dangers of lightning, have a lightning safety plan in place, and follow the plan once thunder is heard or lightning is seen. Many outdoor activities rely on volunteer leaders, coaches or sports officials to make safety decisions. Make sure the leaders of these activities follow a lightning safety plan. Don’t be afraid to ask, and don’t be afraid to speak out during an event if conditions become unsafe. You could save a life!

9. Incident Reporting System

9.1. Why?

9.1.1.1. There is no dispute that we would all like to prevent injuries before they happen, but we also need to be prepared if they do occur. Report any incidents, so we can strive to prevent them from occurring again. NOTE – Reporting even minor incidents and near misses helps us identify areas for safety improvement.

9.2. What?

9.2.1.1. Type I – An incident that causes any player, manager, coach, umpire, volunteer or spectator to receive medical treatment or first aid. (Example: ice or bandage)

9.2.1.2. Type II – An incident involving passive treatments, such as the evaluation and diagnosis of the extent of an injury, or periods of rest, that may be caused by an unsafe condition. This includes near misses.

9.3. When?

9.3.1.1. All incidents (Type I and Type II) described above must be documented and reported to the League Safety Officer (LSO) with 48 hours of the incident. Managers and Coaches are responsible for notifying the LSO by telephone and placing the report in the LSO mail bin in the concession stand at the Wampler Complex. The name and phone number of the LSO can be found on page 4.

9.4. How?

9.4.1.1. All incidents must be documented on the Incident Report forms – see page 12. (a blank form is attached to this manual).

9.4.1.2. Hint – Ask for “Safety Parent” volunteers to help you with incident reports, field inspections, injury evaluations, etc.

When in doubt, report it – it’s better to be safe than sorry!

2021 Incident Report

Coventry Little League

Please fill out this form within 48 hours of incident and place in the CLL Safety Officer's mailbox at the Wampler concession stand. For 2021, the CLL Safety Officer is William Derban. The purpose of this report is to document all accidents and "near-miss" events at the Wampler Complex that could have led to injury of a player, coach, umpire, or spectator so that steps can be taken to minimize risk going forward. **In case of emergency, call 9-1-1.**

Contact Name: _____

Contact Phone: _____

Contact e-mail: _____

Description of Incident (Location, Date, Time, Cause etc...):

Was anyone hurt (provide names)? If yes, was 9-1-1 called?

Did the incident cause damage to property? If yes, please describe.

Little League, Baseball & Softball
CLAIM FORM INSTRUCTIONS



WARNING — It is important that parents/guardians and players note that: *Protective equipment cannot prevent all injuries a player might receive while participating in baseball/softball.*

To expedite league personnel's reporting of injuries, we have prepared guidelines to use as a checklist in completing reports. It will save time -- and speed your payment of claims.

The NUFI Accident Master Policy acquired through Little League contains an "Excess Coverage Provision" whereby all personal and/or group insurance shall be used first.

The Accident Claim Form must be fully completed, including a Social Security Number, for processing.

To help explain insurance coverage to parents/guardians refer to *What Parents Should Know* on the internet that should be reproduced on your league's letterhead and distributed to parents/guardians of all participants at registration time.

If injuries occur, initially it is necessary to determine whether claimant's parents/guardians or the claimant has other insurance such as group, employer, Blue Cross and Blue Shield, etc., which pays benefits. (This information should be obtained at the time of registration prior to tryouts.) If such coverage is provided, the claim must be filed first with the primary company under which the parent/guardian or claimant is insured.

When filing a claim, all medical costs should be fully itemized and forwarded to Little League International. If no other insurance is in effect, a letter from the parent's/guardian's or claimant's employer explaining the lack of group or employer insurance should accompany the claim form.

The NUFI Accident Policy is acquired by leagues, not parents, and provides comprehensive coverage at an affordable cost. Accident coverage is underwritten by National Union Fire Insurance Company of Pittsburgh, Pa. This is a brief description of the coverage available under the policy. The policy will contain limitations, exclusions, and termination provisions.

The current insurance rates would not be possible without your help in stressing safety programs at the local level. The ASAP manual, League Safety Officer Program Kit, is recommended for use by your Safety Officer.

TREATMENT OF DENTAL INJURIES

Deferred Dental Treatment for claims or injuries occurring in 2002 and beyond: If the insured incurs injury to sound, natural teeth and necessary treatment requires that dental treatment for that injury must be postponed to a date more than 52 weeks after the date of the injury due to, but not limited to, the physiological changes occurring to an insured who is a growing child, we will pay the lesser of the maximum benefit of \$1,500.00 or the reasonable expense incurred for the deferred dental treatment. Reasonable expenses incurred for deferred dental treatment are only covered if they are incurred on or before the insured's 23rd birthday. Reasonable Expenses incurred for deferred root canal therapy are only covered if they are incurred within 104 weeks after the date the Injury is sustained.



**LITTLE LEAGUE® BASEBALL AND SOFTBALL
ACCIDENT NOTIFICATION FORM
INSTRUCTIONS**

Send Completed Form To:
Little League, International
539 US Route 15 Hwy, PO Box 3495
Williamsport PA 17701-0495
Accident Claim Contact Numbers:
Phone: 570-327-1674 Fax: 570-326-8280

1. This form must be completed by parents (if claimant is under 19 years of age) and a league official and forwarded to Little League Headquarters within 20 days after the accident. A photocopy of this form should be made and kept by the claimant/parent. Initial medical/dental treatment must be rendered within 30 days of the Little League accident.
2. Itemized bills including description of service, date of service, procedure and diagnosis codes for medical services/supplies and/or other documentation related to claim for benefits are to be provided within 90 days after the accident date. In no event shall such proof be furnished later than 12 months from the date the medical expense was incurred.
3. When other insurance is present, parents or claimant must forward copies of the Explanation of Benefits or Notice/Letter of Denial for each charge directly to Little League Headquarters, even if the charges do not exceed the deductible of the primary insurance program.
4. Policy provides benefits for eligible medical expenses incurred within 52 weeks of the accident, subject to Excess Coverage and Exclusion provisions of the plan.
5. *Limited* deferred medical/dental benefits may be available for necessary treatment incurred after 52 weeks. Refer to insurance brochure provided to the league president, or contact Little League Headquarters within the year of injury.
6. Accident Claim Form must be fully completed - including Social Security Number (SSN) - for processing.

League Name			League I.D.		
Name of Injured Person/Claimant		SSN	Date of Birth (MM/DD/YY)		Age
Name of Parent/Guardian, if Claimant is a Minor		Home Phone (Inc. Area Code)	Bus. Phone (Inc. Area Code)		Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
Address of Claimant			Address of Parent/Guardian, if different		

The Little League Master Accident Policy provides benefits in excess of benefits from other insurance programs subject to a \$50 deductible per injury. "Other insurance programs" include family's personal insurance, student insurance through a school or insurance through an employer for employees and family members. Please CHECK the appropriate boxes below. If YES, follow instruction 3 above.

Does the insured Person/Parent/Guardian have any insurance through:

Employer Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	School Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No
Individual Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	Dental Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of Accident	Time of Accident <input type="checkbox"/> AM <input type="checkbox"/> PM	Type of Injury
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Describe exactly how accident happened, including playing position at the time of accident:

Check all applicable responses in each column:

- | | | | | |
|---|--|---|---|--|
| <input type="checkbox"/> BASEBALL | <input type="checkbox"/> CHALLENGER (4-18) | <input type="checkbox"/> PLAYER | <input type="checkbox"/> TRYOUTS | <input type="checkbox"/> SPECIAL EVENT (NOT GAMES) |
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> T-BALL (4-7) | <input type="checkbox"/> MANAGER, COACH | <input type="checkbox"/> PRACTICE | <input type="checkbox"/> SPECIAL GAME(S) |
| <input type="checkbox"/> CHALLENGER | <input type="checkbox"/> MINOR (6-12) | <input type="checkbox"/> VOLUNTEER UMPIRE | <input type="checkbox"/> SCHEDULED GAME | (Submit a copy of your approval from Little League Incorporated) |
| <input type="checkbox"/> TAD (2ND SEASON) | <input type="checkbox"/> LITTLE LEAGUE (8-12) | <input type="checkbox"/> PLAYER AGENT | <input type="checkbox"/> TRAVEL TO | |
| | <input type="checkbox"/> INTERMEDIATE (9-10) (11-13) | <input type="checkbox"/> OFFICIAL SCOREKEEPER | <input type="checkbox"/> TRAVEL FROM | |
| | <input type="checkbox"/> JUNIOR (12-14) | <input type="checkbox"/> SAFETY OFFICER | <input type="checkbox"/> TOURNAMENT | |
| | <input type="checkbox"/> SENIOR (13-16) | <input type="checkbox"/> VOLUNTEER WORKER | <input type="checkbox"/> OTHER (Describe) | |
| | <input type="checkbox"/> BIG (14-18) | | | |

I hereby certify that I have read the answers to all parts of this form and to the best of my knowledge and belief the information contained is complete and correct as herein given.

I understand that it is a crime for any person to intentionally attempt to defraud or knowingly facilitate a fraud against an insurer by submitting an application or filing a claim containing a false or deceptive statement(s). See Remarks section on reverse side of form.

I hereby authorize any physician, hospital or other medically related facility, insurance company or other organization, institution or person that has any records or knowledge of me, and/or the above named claimant, or our health, to disclose, whenever requested to do so by Little League and/or National Union Fire Insurance Company of Pittsburgh, Pa. A photostatic copy of this authorization shall be considered as effective and valid as the original.

Date	Claimant/Parent/Guardian Signature (In a two parent household, both parents must sign this form.)
Date	Claimant/Parent/Guardian Signature

Safety / First Aid Information for Coventry Little League

- Each year, more than 3.5 million sports-related injuries in children under age 15 are treated in hospital, doctor's offices, clinics, and emergency rooms in the USA according to the National Electronic Injury Surveillance System of the Consumer Product Safety Commission (NEISS).
- Young athletes are not merely small adults. Their bones, muscles, tendons and ligaments are still growing which makes them more susceptible to injury than adults.
- Growth plates – the areas where bone growth occurs in youngsters are weaker than the nearby ligaments and tendons. What is often a bruise or sprain in an adult can be a potentially serious growth plate injury in a young athlete.

When do injuries occur?

- Available evidence suggests that injuries are more likely to occur at the start of the season.
- A good warm up is just as important as stretching. Raising the core body temperature helps prepare all the body's muscles for physical activity.
- Stretching the muscle related to the activity is very important.

The causes of injury

- Hit by a ball
- Sliding into base (older children)
- Overexertion
- Falls
- Collision with another player
- Misjudged catches resulting in a finger injury
- Being hit by the baseball bat (younger children)

Most common injuries

- Abrasions (scrapes) contusions (bruises), lacerations (cuts), muscle cramps/spasms
- Strains (a partial or complete tear of a muscle or tendon). Achilles, hamstrings, lower back
 - Pain
 - Muscle spasm
 - Muscle weakness
 - Swelling/Inflammation
 - Cramping

Most common injuries

- Sprains (a partial or complete tear of a ligament (a) around a joint, shoulder, wrist, finger, knee or ankle)
- Myths:
 - Ligament tears are painful
 - Severe ligament injuries prevent activity
 - Complete ligament tears swell badly
 - Pain intensity varies, bruising and swelling

Most common injuries

- Fractures:
 - Obvious deformity
 - Pain with palpitation
 - Pain with motion in all directions
 - Crunching noises with movement

- Eye Injuries:
 - Asymmetry between eyes and eye movement
 - Cloudy or blurred vision
 - Do not wash out the eye or force the eyelid closed
 - Shield or cover eye with patch

- Mouth injuries:
 - Teeth fragments (send teeth with child to ER)

- Small joint injuries:
 - Check active motion, compare to opposite side

Catastrophic injuries are rare

- Most occur when players are struck in the head or chest with a ball or bat. On average three or four children under the age of 15 dies each year from baseball related injuries.
- Not all injuries are caused by a single sudden twist, fall or collision. A series of small injuries to immature bodies can cause minor fractures, muscle tears or progressive bone deformities known as overuse injuries.
- As an example, “Little League Elbow” is the term used to describe a group of common overuse injuries in young throwers involved in many sports, not just baseball. Other common overuse injuries occur in the heels and knees with tears in the tissue where tendons attach to the leg bone or the heel bone.

Work through the pain?

- Children often experience some discomfort with athletic activity. Some aches and pains can be expected. Still, their complaints always deserve careful attention. Some injuries, if left untreated, can cause permanent damage and interfere with proper physical growth.
- A child should never be allowed or expected to “work through the pain”.

What to do when musculoskeletal (sprains/strains) injuries occur?

- The easiest way to detect injury is through the presence of pain. Pain is how your body tells you that it has been damaged in some way, often this pain will result in a loss of athletic performance.
- Any athlete who is not playing up to their skill level may be suffering from a significant injury.
- The most common and effective method of treatment is RICE.
 - Rest – stop further activity and keep injured area in a relaxed position (Do not try to straighten an injured part).
 - Ice – Apply ice to injured area to prevent or slow swelling. Use a bag of ice if possible. You can use a chemical cold pack but it is not as cold as a regular bag of ice. Put a towel between the ice bag and the skin. Every 20 minutes take off the ice pack for about 5 minutes.
 - Compression – Apply pressure and wrap the injured area.
 - Elevation – Raise the injured area to minimize swelling.
- Get evaluated by a physician.

Bleeding you can see

- Remain calm; bleeding often looks worse than it is.
- Put pressure over the wound with a large clean dressing.
- You should be able to stop the bleeding with pressure alone.
- If the bleeding does not stop, add a second dressing. Do not remove the first dressing.
- If bleeding is from a wound on the arm or leg, raise the arm or leg so that it is higher than the chest while you continue to put pressure on the wound. Do not raise the arm or leg if movement causes pain to the child.

Nosebleed

- Have child sit and lean forward.
- With a tissue or clean cloth press both sides of the child's nostrils while the child leans forward. Place constant pressure on both sides of the nostrils for a few minutes.
- Do not ask the child to lean his head back.
- Do not use an icepack on the nose or forehead.

Bleeding you can't see

- When a child loses a lot of blood or when the child's blood does not circulate properly, there is not enough blood delivered to the cells of the body. We call this condition "Shock".
- Signs of shock:
 - Feel cold and shiver
 - Feel weak, faint and dizzy
 - Become restless, agitated or confused
 - Vomit
 - Feel thirsty
- Actions for shock (when there is bleeding you can't see)
 - Help the child lie on their back
 - If there is no leg injury or pain, raise the child's legs about 12 inches
 - Use pressure to stop bleeding you can see
 - Cover the child with a blanket to keep him warm
 - Phone or ask someone to call 9-1-1

Diabetes and low blood sugar

- A change in behavior, such as confusion or irritability
- Sleepiness or even unresponsiveness
- Hunger, thirst or weakness
- Sweating, pale skin color

Actions for low blood sugar

- Give the child something containing sugar to eat or drink. This can be fruit juice, a packet of sugar or soda. Do not use sugar free or diet soda because they do not contain sugar.

Bee stings

- If child is allergic -- Call 9-1-1
- If allergy is known, child may have an epi pen. Have child or parent use epi pen.

Heat cramps

- These are muscle contractions, usually in hamstrings. These contractions can be forceful and painful. These cramps seem to be connected to heat, dehydration and poor condition, rather than to a lack of salt or mineral imbalances.
- They usually improve with rest, drinking water and a cool environment.

Heat exhaustion

- Signs & Symptoms
 - Headaches, dizziness or lightheadedness
 - Mood changes such as irritability, confusion or inability to think straight
 - Upset stomach, vomiting, decreased or dark colored urine, fainting or passing out and pale, clammy skin.
- Action
 - Act immediately!
 - Move child to cool shaded area to rest
 - Do not leave alone
 - If symptoms include dizziness or lightheadedness, lay child on their back and raise legs 6-8 inches
 - If symptoms include nausea or upset stomach, lay child on their side
 - Remove or loosen heavy clothing
 - Have child drink cool water, about with cool mist of water or applying a wet cloth to skin
 - Call 911 if child does not feel better in a few minutes

Heat Stroke

- Signs & Symptoms
 - Dry, pale skin with no sweating
 - Hot, red skin that looks like sunburn
 - Mood changes such as irritability, confusion, or the inability to think straight
 - Seizure and unconsciousness with no response
- Action
 - Call 9-1-1 immediately
 - Move child to cool shaded area
 - Do not leave alone
 - Lay child on their back and move objects away in case seizures begin
 - If symptoms include nausea or upset stomach, lay child on their side
 - Have child drink cool water, about a cup every 15 minutes if alert enough
 - Cool body by fanning, spraying with cool mist of water or apply a wet cloth to skin
 - Place ice packs under armpits and groin area

Water Before, During, and After Practices and Games

Concussions

- Signs & Symptoms
 - Appears dazed or stunned
 - Confusion
 - Forgets an instruction
 - Unsure of surroundings
 - Clumsy movement
 - Slow to answer questions
 - Memory Loss
 - Loss of consciousness (even briefly)
- Action
 - REMOVE PLAYER FROM GAME
 - Ensure athlete is evaluated by a medical professional
 - Inform parent / guardian of suspected injury
 - Keep athlete out of play until cleared by medical professional
 - “When in doubt, sit them out.”
- WWW.CDC.GOV/CONCUSSION

General Rules

- Unresponsive – CALL 9-1-1
- Suspect head or spine injury – DO NOT MOVE THE CHILD. Hold the head and neck so that the head and neck do not move, bend or twist.
- Check child for medical bracelet or necklace.
- Learn or recertify for CPR.