



## EMERGENCY ACTION PLAN (EAP)

**Note:**

- You can save and re-use this form to prepare an EAP for your usual practice site and for any site where you host competitions.
- When preparing for away competitions, ask the host team or host facility for a copy of their EAP in advance.
- Ensure the “Player Medical Information Forms” (Ref: *BCSA-FORM-002*) on players is available at each soccer event if the EAP is activated.

### EVENT DETAILS

DATE OF EVENT:		LOCATION OF EVENT:	
EVENT:			

### CHARGE PERSON

MAIN:	
ALTERNATE 1:	
ALERTNATE 2:	

### CALL PERSON

MAIN:	
ALTERNATE 1:	
ALTERNATE 2:	

### IMPORTANT INFORMATION

SITE FACILITY ADDRESS:			
NEAREST MEDICAL CENTER:			
EMERGENCY SERVICE NUMBER:		OTHER NUMBERS:	
ADDITIONAL LOCATION INFORMATION:			

#### CHARGE PERSON RESPONSIBILITIES

1. Conduct an initial assessment of the injury.
2. Designate someone to watch the other participants (stop all activities and ensure all participants
3. are in a safe area if nobody is available to supervise).
4. Wait with the injured participant and help keep them calm until emergency medical services
5. arrive and conduct their assessment of the injury.
6. Record the injury using “Soccer Player Incident Form” (Ref: *BCSA-FORM-017*).

#### CALL PERSON RESPONSIBILITIES

1. Call for emergency help.
2. Provide all necessary information to dispatch.
  - The facility location.
  - The closest access door to the injured participant.
  - The nature of the injury.
  - A description of first aid that has been performed.
  - Other medical information, such as allergies or medical conditions.
3. Clear any traffic from the facility entrance or access road before Emergency Medical Services arrives.
4. Wait by the entrance to direct the ambulance.
5. Call the participant’s emergency contact person.
6. Assist the charge person as needed.



**DIRECTIONS/ MAP TO FACILITY**

This area is left blank for the user to provide directions or a map to the facility.