

2017 First Aid Training for Managers

Identify your resources; parents, grandparents, coaching staff.

Forms:

1. Medical Release Information; ALL players must have prior to playing. These need to be carried by coaching staff and readily available in case of emergency
2. Accident Report; must be completed and provided to a) Safety Officer, b) President, c) Division Coordinator, in that order, within 24 hours of injury.

First Aid Kits;

1. Carry them!
2. Replace used items
3. If real ice is available it is preferred

Common issues with baseball:

1. Contusions
Lack of understanding, what is expected from each player
2. Fundamentally Sound Ball
Make sure to teach your coaches the fundamentals of good play for everyone's safety. Catching, throwing, fielding and hitting.
How to protect them self when they get hit at bat.
3. Recognize Early Fatigue Signs of Pitchers
Watch and respond to signs of fatigue. If a youth pitcher complains of fatigue or looks fatigued, let him rest from pitching and other throwing. Follow limits to pitch counts. and days' rest. Learn good throwing mechanics as soon as possible. 1. Basic throwing 2. Fastball pitching, 3 change-up pitching. Do not allow a pitcher to throw a curveball until he or she is 16 or older. Manages your catcher numbers of game be caught. His or her arm gets fatigue also
4. Muscle pulls and strains/rest is the only cure.
5. Fractures/Sprains /have them check out by your local physician
6. Batting safety
Make sure batter is wearing the correct size helmet. Make sure the batter bat is little league legal. Batter doesn't throw the bat after hitting the ball. No on deck batters or swing bat in dug out.
7. Facial injuries/teach kids how to protect their faces while fielding and batting
8. Injuries to teeth/wear a mouth protector
9. Eye Injuries
10. Insect bites and stings
11. Heat/weather related illness

Triage and Emergency Management:

1. Be sure play is stopped by umpire (if present) or manager coach to protect the injured player and to allow for evaluation.
2. Basic ABC's of first aid

3. Is 911 necessary? Delegate! Instruct one person to call **“Mary, Call 911”**. Instruct someone to meet responders and direct them to appropriate area
4. Contact player parents
5. Retrieve the medical release and have it available to provide to the responders, even if the parents are present!
6. Once responders arrive, do not leave the player, you may have valuable information that can be helpful. Be careful not to be in the way.
7. If parents are not available, send one manager/coach with the player

Evaluate the injury:

1. Can the player be moved off the field? DO NOT move a suspected head or neck injury until basic evaluation has taken place
2. If player can be safely removed, move to sideline or dugout for evaluation
3. Determine if player can safely return to play
4. Look for disability, if the player can't use the injured body part this is a more serious injury
5. If removed from play but did not require emergency responders, urge parents to seek medical treatment if they are concerned
6. Follow up with your player until they are able to return to play
7. Player must have a full release to return to play. The release cannot be conditional on one activity, **“can play but can't run”**.

Common sense to avoid issues:

1. Beware of kids who tend to have a mouthful of something...seeds, gum. Moderation is the key
2. Be sensitive to hydration issues
3. If you have a “bug” running through the team, ill players should be excluded from the dugout
4. Basic skills: when to throw, when to slide, bat control.
5. Little League rules are developed for safety...**FOLLOW THEM**. This includes protective gear, swinging of bats, on deck issues, warming up a pitcher, etc.
6. Good warm ups
7. When to slide