

EMERGENCY MEDICAL PLAN PROCEDURES FOR CALLING 911

This is to be filled out by the designated caller prior to the activity session, and kept in his/her possession until the session is concluded.

1. **REMAIN CALM.** This will aid the operator in receiving your information.
2. **DIAL 911.** (remember you may need to access outside line first)
3. My name is _____.
4. I need paramedics at _____.
5. The exact address is _____.
The major cross streets are _____ which is
_____ blocks away.
6. There is an athlete with _____ injury
(head/neck, fracture, loss of consciousness, heat illness, cardiac arrest, etc.).

The athlete's name is _____.
7. The athlete is located at _____ (activity area), which is on
the _____ (north, west, etc.) side of the
facility.
8. I am calling from _____ (give phone
number).
9. _____ (name) will meet the ambulance at
_____ and guide them to the injured athlete.
10. Wait until the operator hangs up first.