



Youth Sports Safety Best Practices Checklist

Facility Safety

<input type="checkbox"/> Check Surfaces	<input type="checkbox"/> Clear Debris	<input type="checkbox"/> Check Training Equip.
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Coach Training ([Free Course](#) - includes all below)

<input type="checkbox"/> CPR/First Aid	<input type="checkbox"/> Asthma	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Concussions	<input type="checkbox"/> Seizures	<input type="checkbox"/> Rhabdomyolysis
<input type="checkbox"/> Heat Injuries	<input type="checkbox"/> Bleeding	<input type="checkbox"/> Sickle Cell Trait
<input type="checkbox"/> Sudden Cardiac Arrest	<input type="checkbox"/> Broken Bones	<input type="checkbox"/> Skin Infections
<input type="checkbox"/> Anaphylaxis	<input type="checkbox"/> Spine Injury	<input type="checkbox"/> Lightning Safety

Emergency Action Plan ([Free Fillable Plan](#))

<input type="checkbox"/> Emergency Team Leader	<input type="checkbox"/> Pre-Event Safety Huddle	<input type="checkbox"/> 9-1-1 Call
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Incident/Situation Specific Protocols (See Coach Training above)

<input type="checkbox"/> Concussion	<input type="checkbox"/> Heat	<input type="checkbox"/> Sudden Cardiac Arrest
<input type="checkbox"/> Bleeding	<input type="checkbox"/> Anaphylaxis/Asthma	<input type="checkbox"/> Seizures
<input type="checkbox"/> MRSA	<input type="checkbox"/> Hazardous Weather	<input type="checkbox"/> Fracture/Spine Injury

Emergency Equipment/Medications

<input type="checkbox"/> AED	<input type="checkbox"/> Ice Tub	<input type="checkbox"/> Heat Monitoring Device
<input type="checkbox"/> First Aid Kit -contents	<input type="checkbox"/> EZ Up Canopy	<input type="checkbox"/> EpiPen®, Inhaler, etc.

Parents/Athletes

<input type="checkbox"/> Preparticipation Exam	<input type="checkbox"/> Athlete Daily Readiness	<input type="checkbox"/> Pre-Season Physical Preparedness
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Coach (Field/Court side access – on cell phone)

<input type="checkbox"/> Athlete Emergency Contacts	<input type="checkbox"/> Athlete Emergency Medical Information
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Communication/Documentation/Oversight Risk Management System ([TeamSafeSports®](#))

<input type="checkbox"/> Remove From Play	<input type="checkbox"/> Return To Play	<input type="checkbox"/> Injury Incident Report
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