Australian Government
Australian Sports Commission

FACTSHEET

Incident management

Coaches need to be able to respond to an emergency situation. These can range from a minor injury to something more serious. If a participant is unconscious, it is a life-threatening situation. The coach must respond immediately, as the participant may need resuscitation. Resuscitation should be performed by someone with first aid training and this is why it is good practice for all coaches to undertake this training.

Coaches should:

- have access to a telephone to contact an ambulance
- have information about the participant's medical history (especially for ongoing health issues such as asthma, epilepsy or diabetes)
- know how to access first aid equipment (blankets, first aid kit, ice etc)
- ideally, be able to administer basic first aid
- ensure an injury report form is completed.

STOP procedure

The STOP procedure allows the coach to assess whether the injury seems severe and to determine whether the participant should continue with the activity.

- **S**top
- **T**alk
- **O**bserve
- **P**revent further injury (via the three options below)

1. ***Severe injury -*** Get help
2. ***Less severe injury -*** Rest, Ice, Compression, Elevation, Referral (RICER)
3. ***Minor injury -*** Play on

RICER regime

Management of sprains, strains, corks, bumps and bruises should follow this procedure:

What	How	Why
Rest the participant	• Remove the participant from the competition area using an method of transport that will prevent further damage • Place the participant in a comfortable position, preferably lying down • The injured part should be immobilised and supported	Further activity will increase bleeding and damage
Ice applied to the injury	The conventional methods are: • crushed ice in a wet towel/plastic bag • immersion in icy water • commercial cold pack wrapped in a wet towel Apply for 20 minutes every two hours for the first 48 hours *Caution:* • Do not apply ice directly to skin as ice burns can occur • Do not apply ice to people who are sensitive to cold or have circulatory problems	Ice decreases: • swelling • muscle spasm • secondary damage to the injured area
Compression applied to the injured area	Apply a firm, elastic, compression bandage over a large area covering the injured part, as well as above and below the injury	Compression reduces swelling and provides support for the injured part
Elevate the injured area	Raise the injured area above the level of the heart whenever possible	Elevation decreases bleeding, swelling and pain.
Refer and record	• Refer to an appropriate health care professional for definitive diagnosis and continuing management • Record your observations, assessment and initial management before referral — send a copy of your records, with the participant, to the health care professional	To obtain an accurate, definitive diagnosis and for continuing management (including anti-inflammatory medication) and prescription of a rehabilitation program