

Medical Time Out Checklist



Review this checklist before any athletic event.

Scheduling number: 615-421-8900
ChildrensHospitalVanderbilt.org/yshc

Check all that apply:	Contacts
<input type="checkbox"/> Emergency Action Plan (EAP) Review <input type="checkbox"/> Advanced Cardiovascular Life Support (ACLS) for Emergency Medical Services (EMS) <input type="checkbox"/> AED Sidelines <input type="checkbox"/> Sentinel Seizure/Agonal Respiration Awareness <input type="checkbox"/> Backboard <input type="checkbox"/> Face Mask Removal Tool <input type="checkbox"/> C-Spine Protocol <input type="checkbox"/> Heat Illness Protocol <input type="checkbox"/> Cool Prior to Transport <input type="checkbox"/> Lightning/Severe Weather Plan <input type="checkbox"/> Hemorrhage Control Kit <input type="checkbox"/> Scene Control & Egress Routes	<p>Emergency Medical Services (EMS) Squad Name: Number:</p> <p>Emergency Medical Services (EMS) Providers Name(s): Cell #:</p> <p>Designated Hospital Name: ED Contact #:</p> <p>Game Administrator Name: Cell:</p> <p>Home Team Physician Name: Cell #:</p> <p>Visitor Team Physician Name: Cell:</p> <p>Home Athletic Trainer Name: Cell #:</p> <p>Visitor Athletic Trainer Name: Cell:</p> <p>Law Enforcement Name: Cell:</p> <p>Game Administrator (School Name) Name: Cell:</p> <p>Referee Officials Name(s): Cell #:</p>
Hand Signals	
Advanced Cardiovascular Life Support (ACLS) to Field: Spinal Immobilization: Concussion: Airway Emergency: Additional Signals:	
Recommended Participants	
<p>All healthcare providers</p> <input type="checkbox"/> Home and visiting athletic trainers <input type="checkbox"/> Team physician(s) <input type="checkbox"/> Emergency Medical Services (EMS) crew <p>Others if onsite</p> <input type="checkbox"/> Athletic director, other administrators <input type="checkbox"/> Police <input type="checkbox"/> Game day operations (ie. who has all the keys) <input type="checkbox"/> Referees, officials, umpires	