



# Northampton Baseball & Softball

PO Box 347  
Leeds, MA 01053

*“Youth athletics built on integrity, perseverance, community, character & teamwork with a passion to back it up”*

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## ***Basic First Aid Guide for Coaches***

### **Practice Common Sense**

There’s been an accident – one of your players is hurt! What do you do?

**Keep Calm** – try not to panic.

**Provide Reassurance** – a hand on the shoulder and some encouraging words help.

**Be Prepared** – have your first aid kit with you. Know what’s in it.

**Do No Harm** – when in doubt call 9-1-1.

### **Common Injuries / Illnesses Seen on the Baseball Field Sprains and Strains**

**Sprains** are injuries to the ligaments around joints. They typically result from severe twisting or outside forces bending a joint in an opposite direction of its normal function.

The most common sprains are those of the knee, ankle, wrist, fingers, and toes.

#### **Signs and Symptoms**

- Pain in or over the affected joint
- Swelling and tenderness to touch
- Bruising (typically develops after a period of time)
- Loss or limited motion or ability to bear weight

#### **Treatment**

- Rest – remove player from game
- Ice – apply ice pack to affected area
- Compression – apply ace wrap to limit swelling and pain
- Elevation – to limit swelling and pain
- See MD if pain and swelling is severe, or if player is unable to move joint in typical range of motion.

**Strains** are injuries to muscles that typically result from overuse or stretching a muscle group beyond normal parameters. The most common strains are those of the shoulder (especially in pitchers), groin muscle, hamstring, thigh, lower back, and rib cage. The best way to prevent a strain is to ensure players stretch and warm up gradually before games and workouts.

### **Signs and Symptoms**

- Pain in the affected area typically described as “burning” or a “dull ache”
- Tenderness to touch
- Loss or limited motion or ability to bear weight

### **Treatment**

- Rest – remove player from game
- Ice – apply ice pack to affected area
- Compression – apply ace wrap to limit swelling and pain
- Elevation – to limit swelling and pain
- See MD if pain is severe, or if player is unable to move affected area in typical range of motion.

### **Fractures and Dislocations**

**Fractures** are breaks in a bone due to blunt trauma or severe twisting. Common fractures seen in baseball are those to the bones in the ankle, arm, fingers, toes, and face. Often these injuries result from a hard slide into a base, a collision with another player, a diving attempt by player to field a ball, or being struck by a pitched or batted ball.

### **Signs and Symptoms**

- Pain in or over the affected bone
- Swelling and tenderness to touch
- Deformity
- Bruising (typically develops after a period of time)
- Loss or limited motion or ability to bear weight

### **Treatment**

- Stabilize the bone (splint or physically hold the area)
- Cover any open wounds with a sterile dressing and control bleeding
- Rest – remove player from game
- Ice – apply ice pack to affected area
- Compression – apply ace wrap to limit swelling and pain
- Elevation – to limit swelling and pain
- Transport to MD or Emergency Room ASAP.

**Dislocations** are injuries to joints that cause the joint to lose its ability to move. Common dislocations are those joints in the fingers, the ankle and patella (kneecap).

### **Signs and Symptoms**

Pain in or over the affected joint  
Swelling and tenderness to touch  
Deformity  
Loss or limited motion or ability to bear weight  
Tingling or numbness in area distal to injury

### **Treatment**

Stabilize the injury (splint or physically hold the area)  
Rest – remove player from game  
Ice – apply ice pack to affected area  
Compression – apply ace wrap to limit swelling and pain  
Elevation – to limit swelling and pain  
Transport to MD or Emergency Room ASAP.

## **Bleeding and Open Wounds**

Open wounds either take the form of a laceration that results from a sharp object, like a cleat on a shoe, or an abrasion, that is a scraping injury typically resulting from contact with turf when sliding or diving.

**Lacerations** are cuts or jagged tears in the skin that can either be deep or superficial. Deep lacerations and those to the head and face often bleed quite a bit.

### **Treatment**

- Control bleeding – apply sterile bandage and direct pressure to site
- Ice – apply ice pack to affected area – this can help slow bleeding and reduce pain
- Compression – apply compression dressing after bleeding is controlled
- Elevation – to limited swelling and pain
- Transport to MD or Emergency Room if suturing is required.

**Abrasions** are superficial skin injuries – a.k.a. raspberries, typically caused by sliding or diving on the ground or infield. The treatment is essentially the same as for lacerations with one additional word to the wise –  
CLEAN THE WOUND

The biggest problem with abrasions is the potential for infection. Cleansing the wound as soon as possible with soap and water and applying a sterile bandage to prevent the wound from contamination can prevent this. If infection results (pain, swelling, yellow discharge), see MD.

## **Head Injuries**

Helmets are designed to prevent serious head injuries but that does not mean they are 100% protection. Anyone who has been hit by a fastball in the helmet knows this. Head injuries can and will occur despite helmets. Here are some signs to watch for and things to consider when dealing with head injuries.

Any head injury that results in a “change in the level of consciousness” should be considered significant. Changes in the level of consciousness can occur immediately after the injury or days later.

Things to look for commonly referred to as *Head Injury Precautions* include:

- Confusion
- Disorientation
- Unconscious or delayed responsiveness to voice or physical stimulus

Other signs and symptoms to watch for:

- Nausea / vomiting
- Dizziness or blurred vision
- Unstable balance / gait
- Unequal pupils

### **Treatment**

***If unconscious – DO NOT MOVE – CALL 9-1-1***

Keep player warm

Watch for vomiting

SERIOUS HEAD INJURIES MAY ALSO INDICATE NECK/SPINE INJURY

**If conscious** – watch for level of consciousness changes – check player every 15 minutes

- Remove player from game
- Get player out of the sun Ice to any contusion
- Do not give fluids unless stable for 30 minutes

Any head injury that results in a change in the level of consciousness should be evaluated by a physician and head injury precautions communicated to parents or caregivers.

### **Heat Related Problems**

Under normal conditions a healthy body can manage exertion in high temperatures by perspiring. As long as fluids are maintained and exposure is not prolonged, most of us can cope. When the conditions include little breeze and high humidity, the normal control mechanisms may fail resulting in either Heat Exhaustion or Heat Stroke.

**Heat Exhaustion** can occur after excessive perspiration is combined with inadequate fluid intake. The best way to prevent heat exhaustion is to simply replace fluids and electrolytes by drinking water, Gatorade, or diet soda. If heat exhaustion should develop the following symptoms often present suddenly.

#### **Signs and Symptoms**

- Dizziness, lightheadedness
- Nausea
- Rapid breathing and heart rate
- Cool, clammy skin
- Pale skin color
- Abdominal or other large muscle cramps

#### **Treatment**

- Remove player from sun – put in the shade or air conditioned area
- Allow player to lay down, slightly elevate feet and legs
- Loosen any restrictive clothing
- Provide cool water, Gatorade, or diet soda in small, frequent drinks
- Watch for any changes in players level of consciousness If confusion / disorientation develop – CALL 9-1-1

**Heat Stroke** is a medical emergency. It can develop after someone displays symptoms of heat exhaustion or may present without warning.

#### **Signs and Symptoms**

- Changes in level of consciousness (similar to head injuries)
- Red colored skin
- Hot, dry skin
- Rapid breathing and heart rate
- Seizures or convulsions can develop

#### **Treatment**

- CALL 9-1-1
- Remove player from sun – put in the shade or air conditioned area
- Remove outer clothing
- Apply cool, moist compresses or towels, spray with water
- Fan with papers, scorebook, whatever

# HEADS UP CONCUSSION



## SIGNS AND SYMPTOMS

Athletes who experience one or more of the signs or symptoms listed below after a bump, blow, or jolt to the head or body may have a concussion.

### › SIGNS OBSERVED BY COACHING STAFF

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

### › SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not "feeling right" or is "feeling down"

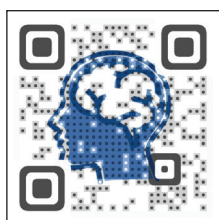


## ACTION PLAN

As a coach, if you think an athlete may have a concussion, you should:

1. **Remove the athlete** from play.
2. **Keep an athlete with a possible concussion out of play on the same day of the injury and until cleared by a health care provider.** Do not try to judge the severity of the injury yourself. Only a health care provider should assess an athlete for a possible concussion.
3. **Record and share information about the injury**, such as how it happened and the athlete's symptoms, to help a health care provider assess the athlete.
4. **Inform the athlete's parent(s) or guardian(s)** about the possible concussion and refer them to CDC's website for concussion information.
5. **Ask for written instructions from the athlete's health care provider** about the steps you should take to help the athlete safely return to play. Before returning to play an athlete should:
  - › Be back to doing their regular school activities.
  - › Not have any symptoms from the injury when doing normal activities.
  - › Have the green-light from their health care provider to begin the return to play process.

**IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.**



For more information and to order additional materials **free-of-charge**, visit: [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP).

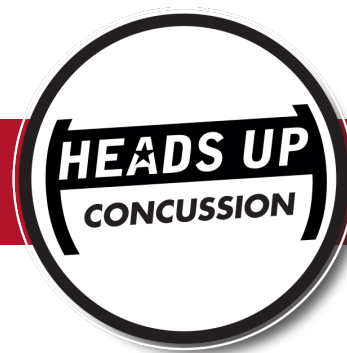
You can also download the CDC **HEADS UP** app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.



Centers for Disease  
Control and Prevention  
National Center for Injury  
Prevention and Control

The information provided in this document or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to a physician or other health care provider.

# HEADS UP CONCUSSION ACTION PLAN



## IF YOU SUSPECT THAT AN ATHLETE HAS A CONCUSSION, YOU SHOULD TAKE THE FOLLOWING STEPS:

1. Remove the athlete from play.
2. Ensure that the athlete is evaluated by a health care professional experienced in evaluating for concussion. Do not try to judge the seriousness of the injury yourself.
3. Inform the athlete's parents or guardians about the possible concussion and give them the fact sheet on concussion.
4. Keep the athlete out of play the day of the injury. An athlete should only return to play with permission from a health care professional, who is experienced in evaluating for concussion.

▶ **"IT'S BETTER TO MISS ONE GAME, THAN THE WHOLE SEASON."**



## CONCUSSION SIGNS AND SYMPTOMS

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### SIGNS OBSERVED BY COACHING STAFF

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[ INSERT YOUR LOGO ]

JOIN THE CONVERSATION AT [www.facebook.com/CDCHeadsUp](https://www.facebook.com/CDCHeadsUp)

TO LEARN MORE GO TO [WWW.CDC.GOV/CONCUSSION](http://www.cdc.gov/concussion)