

Basic Guide for Medical Services at Equestrian Events

Introduction

In preparation for an equestrian event or venue, determining Emergency Medical Services (EMS) is essential for a safe environment for everyone involved. The basic starting point and primary source for vital emergency planning is your local EMS governing authority. Always prepare and review a specific EMS plan for each venue or event.

Communications

The communication system is the cornerstone of your EMS plan in the event that you need to summon an EMS crew as well as communicating with them to determine the plan for an emergency.

- **Person in Charge**

Have a single individual such as a Safety Coordinator as a contact person whose sole responsibilities are making sure that the EMS crew is on site and can be located quickly, as well as communicating with the EMS team to determine needs.

- **Onsite Communication** Radios, cellular phones, landlines and PA systems all work well but double check that all reception and connections are working properly and have a secondary means of communications in the case of failure or lack of reception. An efficient communication system will determine issues such as:

- Avoiding too many people on the same channel
- Who needs to talk to who
- Providing a secure channel if needed

- **Offsite Communication**

Contact your local EMS providers so that they are aware of your location and what is going on and can prepare for on-call situations.

Site Plan

Since equine events are typically located in large and spread-out areas, it is pertinent that your EMS crew has access by ambulance and foot to all areas. Invite EMS providers to the property before the event in order to become more familiar with the surroundings to improve their response. EMS crews should also have the schedule of events and maps of the layout so they know when and where to be. Be sure to share the activities of the whole event including:

- Stabling
- Warm-Ups
- Dressage
- Jumping
- Cross Country

Event personnel should be aware of the sequence of events in the event of an accident in order to determine an overall plan. Personnel should have a plan in place for different degrees of an emergency. For example:

- Minor – no transport
- Medium – injury with transport (non-life threatening)
- Major – injury with transport (life-threatening)

Event personnel should also be prepared to create and provide needed reports, a standby statement and press releases.

Determine Appropriate Needs

Local, state or regional authorities may govern EMS in your community so it is pertinent to contact those authorities to coordinate a specific plan for each event.

Determine and understand the rules of medical coverage for the organization that is sanctioning your show, clinic, or other equestrian event and what is required.

Sanctioned Events

Each organization that sanctions certain equine events has EMS rules to follow. For example:

- USEA/United States Eventing Association – requires first aid kit onsite and EMS on call for schooling shows or clinics
- USEF/United States Equestrian Federation – requires EMT-Paramedic for Eventing and Hunter/Jumper
- FEI/Federation Equestre Internationale – requires the organizer of the venue, officials and medical officer

Non-Sanctioned Events

If your event is not being sanctioned by an organization or association, check with your local authorities for their rules/requirements as there may be local laws and/or ordinances that require certain EMS coverage depending on the numbers of participants and spectators. If the situation arises where there are no specific rules, at the minimum you should

have an action plan including specific individuals designated to summon help and provide First Aid/CPR until professional help arrives.

EMS Providers

Once the EMS rules and needs are determined for a specific event, the appropriate agency should be contacted for assistance. The authority responsible for governing EMS is a valuable resource that can help you understand your needs, formulate a plan, and determine proper resources. For example:

- Municipal Fire Departments / EMS Departments - may provide their services for free or with a discounted charge if your venue provides some type of economic boost to their city, county, or charity
- Private Providers - charge fees for stand-by coverage and additional fees for transporting
- Volunteer Providers - may provide services for a donation to their fund or organization
- Individual EMT/Paramedics - Most EMS agencies do not allow their employees to function outside of a licensed EMS service. Hiring individuals may be less expensive but there is no protection against liability or malpractice for the individual or you

Fees – Always discuss charges with providers ahead of time. Understand what you and/or the patient will be charged for services. Remember that although EMS coverage may be expensive but there is no price on a life that is saved.

EMS Personnel

Understanding the capabilities of EMS personnel is important when making an EMS plan. Upon arrival at your particular setting, EMS personnel should be prepared to show their credentials and level of training.

- Paramedic (EMT-Paramedic/Mobile Intensive Care Technician, etc.) – highest trained pre-hospital care provider trained in Advanced Life Support (ALS) and can provide an advanced airway, administer IV fluids and emergency medications, perform EKG interpretation and defibrillation and have advanced trauma training
- Advanced EMT (EMT-Intermediate, IMT-IV, etc.) – allows for a scope of practice lesser than the Paramedic but more than the EMT
- EMT (EMT-Basic, etc.) – trained in Basic Life Support (BLS) and can only provide basic treatment such as CPR and basic trauma care (such as fractures).

Some systems are tiered so that a BLS provider responds initially and begins aid prior to the arrival of the ALS provider. In certain settings, it may be appropriate to have a BLS crew on-site and an ALS crew on-call for back-up.

If the local EMS provider is unable to provide ALS, it may be necessary to contact a qualified physician or nurse for support and equipment for advanced airways and other treatments. However, interaction of medical professionals with EMS personnel is strongly regulated by EMS laws and protocols. Other medical professionals on-site wishing to assist EMS personnel should identify themselves and present credentials upon arrival and coordinate with EMS personnel in order to eliminate confusion before an emergency arises.

EMS providers also should be provided with and be familiar with protocols set by the sanctioning organization regarding falls, head injuries, etc. These providers should be advised and assisted by appointed event personnel in the case of equine activity or trauma nearby the patient during an emergency. Introduce EMS providers to the veterinarian at the event.

EMS Transport

The aid rendered in the first few minutes after an injury occurs typically makes the most difference in outcome. Therefore, having on-site EMS personnel can provide immediate aid that can continue until an ambulance/helicopter arrives to transport the patient to a hospital. Once care is initiated, transport in a timely manner to a hospital or trauma center is imperative.

- **Ambulance** – In certain settings, ambulances cannot be dedicated to staying on-site or the expense makes it impossible to afford. A response time of 5-10 minutes is reasonable but longer response times should be taken into account when deciding whether or not to provide an ambulance on site. Also consider what additional time may be needed after the ambulance arrives at the venue to actually reach the patient.
- **Helicopters** – Local EMS protocols dictate the proper use of medical helicopters. Some large 3-day events have helicopters on stand-by at their venues to augment medical care. In remote areas, helicopters can be contacted by your EMS crew when needed and may be the quickest means of transport.
- **Facilities** – EMS personnel and local protocols should dictate the appropriate facility for the specific problem presented by the patient. The local emergency room or hospital can handle typical injuries or medical problems. In situations of major trauma or certain medical emergencies a specialty hospital such as a trauma center may be necessary, even if it's location is farther away.

Post EMS Action Plan

Prepare for the needs presented by others accompanying the patient such as transportation to the hospital or trauma center. Also there may be needs for caring for the patient's equine while they receive medical care and recover.

Spectators

In many cases, a separate plan for spectator emergencies has to be drafted and provided for aside from the competitors at your venue. Some counties or municipalities have ordinances that require a certain amount of EMS coverage depending on the number of participants and spectators. Contact local authorities for more information regarding your location.



Every equine event and venue is different and has specific individual needs. This document is meant to provide guidance and recommendations. For more information contact your local EMS providers and their governing bodies, sanctioning organizations and other informative equine organizations listed below.

NREMT State EMS Agency Information:
www.nremt.org

Equestrian Medical Safety Association (EMSA): www.emsaonline.com

United States Eventing Association (USEA): www.useventing.com

United States Equestrian Federation (USEF): www.usef.org

FEI/Federation Equestre Internationale:
www.fei.org

Rusty Lowe, NRP

EMSA Board Member; former EMSA (formerly AMEA) Executive Director

Rusty served as Safety Coordinator and Medical Officer in eventing for several years. Currently he serves at Fair Hill International, Jersey Fresh, Red Hills, Chatt Hills and Poplar Place. Previously, he was a member and then became Chair of the USEA Safety Committee and Vice Chair of the USEF Safety Committee during the time when many changes were made in the sport, including improved helmet rules, increased medical coverage, a safety manual and first aid/CPR requirements for instructors. In the early days before the EMSA was formed, Rusty was Executive Director of the AMEA. As a firefighter/paramedic for 33 years, he now is the Executive Officer of the Hoover, Ala., Fire Department assisting in overseeing the daily operations of the department and public information. Rusty also is an EMS Instructor at Jefferson State Community College and is a consultant and expert witness.

Mary Fike

EMSA Board Member

Mary is the Manager/Owner of Harrington Mill Farm, an Eventing boarding and training facility in Shelbyville, Ky. She has over 30 years of experience as professional manager of Horse Trials and other equine competitions. She served as Chief Stable Manager for the Olympic Games in Atlanta and was the Equine Services Coordinator for the 2010 WEG in Kentucky. She was responsible for all of the quarantine arrangements and implementation at CVG as well as all stabling at the Kentucky Horse Park. Since 1983, she has been the Chief Stable Manager for The Rolex Kentucky CCI****. Currently, she organizes Spring Bay HT, Kentucky Classique HT and the Hagyard MidSouth CCI* and Team Challenge. She has also served as the Eventing Discipline Director of the FEI NAJYRC since its move to the Kentucky Horse Park. Along with the role of Organizer/Director, Mary is a FEI Eventing Steward and a USEF Licensed Cross Country Course Designer and is responsible for designing, directing and implementing the Cross Country Courses for those competitions.