

MEDIC GUIDELINES

Pittsburgh Amateur Hockey League 2024-25



OVERVIEW

For the safety and wellbeing of our athletes, the Pittsburgh Amateur Hockey League chooses to require a Medic at each game, which is not otherwise mandated by USA Hockey nor the Mid-American District. The protocols put in place by the PAHL for medical providers place additional emphasis on maintaining a high level of care and protection for our players during each game. Therefore, our medical providers play an important role in our game operations and safety initiatives.

The PAHL expects that our Medics are professional and active in their duties throughout the game, and the protocols established by the PAHL must be followed without exception due to the important safety factors and the legal liability tied to those processes. Most importantly, the Medic needs to be positioned properly relative to the playing surface, and when a potential injury situation arises, the Medic needs to be immediately responsive to the situation.

ASSIGNMENT OF MEDICS

The host team shall arrange for a Medic to be present for the duration of each game. The individual serving as the Medic must be currently and verifiably certified as at least one of the following:

- Emergency Medical Responder (EMT-R)
- Emergency Medical Technician (EMT-B)
- Paramedic
- Certified Athletic Trainer
- Medical/Osteopathic Physician
- Licensed Healthcare Professional

No game shall start nor resume unless a qualified Medic is on-duty and adhering to the parameters of Medic Stationing, and the individual serving as the Medic shall not concurrently be serving in any other official role in the game (player, coach, on-ice official). The Medic must also be attending to only one game on one ice surface at a time; the Medic cannot be covering multiple, concurrent games within the facility, even if another game cannot otherwise proceed due to the lack of a Medic. A PAHL game without a dedicated Medic actively serving the game simply cannot proceed.

An adult at the game who is currently and verifiably certified with the minimum requirements may fill the role of the Medic if the assigned Medic does not arrive or becomes unavailable. No less than all the required certifications must be satisfied for an individual to assume the role of the Medic, regardless of any other circumstance. Additionally, the substitute must meet and abide by all requirements and provisions of the Medic, including access to all required medical equipment and adherence to the Medic Stationing protocols.

MEDICAL EQUIPMENT

The Medic shall have, at a minimum, the following supplies readily available in a trauma bag, first aid kit, or similar at each game:

- 1) Ice packs
- 2) Bandages, wraps, gauze, and medical tape
- 3) Disinfectant wipes/solution
- 4) Nitrile exam gloves

MEDIC STATIONING

Unless otherwise attending to an injured player from the game, the Medic shall be stationed in an area that is directly accessible to the ice surface. This area shall be at the end of either team bench or in a penalty box that is stationed between both team benches. It is recommended that Medics wear traction shoes or add traction attachments to their footwear as a means of arriving to an injured player on the ice more quickly and more safely.

The Medic must be attending to only one game on one ice surface at a time; the Medic cannot be covering multiple, concurrent games within the facility, even if another game cannot proceed due to the lack of a Medic. The Medic shall immediately enter the ice surface and quickly tend to an injured player when play is stopped for an injury or when summoned to do so by an On-Ice Official. The Medic shall also enter either team bench when requested to do so to tend to an injured player in that location.

It is not an option for the Medic to leave the required stationing for a break, to sit in another area of the rink, or check in on another game. The Medic may temporarily leave the required stationing to tend to an injured player outside of the playing surface or in a locker room, but the Medic shall use discernment to return to the proper stationing in a timely manner.

If the Medic departs from the standard stationing to attend to an injury situation and is just beyond an immediate proximity to the ice surface, the Medic should ask for a responsible individual to monitor the playing area and alert the Medic if another injury situation arises in the game. If the Medic is needed for an injury or emergency that is not within reason reasonable proximity to the playing area, the game shall be paused until the Medic is able to resume required stationing.

When tending to an injured player in a locker room or other enclosed area, the Medic shall request the presence of the player's parent, a rostered coach, or an approved Locker Room Monitor from the team. The Medic must avoid, in all practicality, being alone in a locker room or enclosed area with a minor, and representatives from the team of the injured player must recognize and actively assist in situations where the Medic must enter an enclosed area with a player.

INJURED PLAYERS

Upon a stoppage for an injury to a player on the ice surface, only the Medic shall enter the ice surface to attend to the player. Any other individuals – including coaches and trainers – must first have permission from either the Medic or an On-Ice Official to enter the ice surface to attend to an injured player. The League Office shall investigate all violations and reserves the right to issue disciplinary actions, as warranted.

Only the Medic shall make an official determination regarding the further participation of any player deemed to be injured or ill. No other entity – regardless of affiliation, title, or certification – shall overrule, interfere with, nor unduly influence the Medic on this matter. The Medic shall evaluate any player suspected to be injured or ill to determine the condition of the player, provide appropriate treatment, and determine if the player may continue to participate in the game. The Medic reserves the right to transfer further treatment of a player to any qualified individual (doctor, nurse, trainer, etc.), but authority on participation does not transfer from the Medic.

If the Medic determines that a player is not capable of safely continuing to participate in the game, the player shall be deemed an ineligible player for the remainder of that game or until that player complies with the treatment prescribed by the Medic, as applicable. Violation of this policy shall result in a thorough disciplinary review of the ineligible player and the team's Head Coach.

CONCUSSIONS

Athletes with a suspected concussion must be immediately removed from competition so that a medical examination can be conducted by the Medic. The responsibility to identify a player who exhibits signs, symptoms, or behaviors consistent with a concussion is shared equally by all participants, including players, coaches, On-Ice Officials, and the Medic. Medics and On-Ice Officials always reserve the ability to intervene if a player is suspected of having a concussion.

If a possible concussion is suspected via initial evaluation by the Medic, the player shall be deemed ineligible for participation until, at minimum, the athlete is fully re-evaluated by the Medic after an appropriate rest period. A player with a suspected concussion shall only return to play if the Medic concludes that no concussion is present and explicitly approves the player to return to the game. A player who is directed not to return to the game by the Medic after being fully evaluated for a possible concussion shall be withheld from the remainder of the game and must follow the USA Hockey "Return To Play Protocol" prior to any further participation.