

<p style="text-align: center;">OSAA Pre-Event Safety Timeout</p> <p>Participants: Site Supervisor*, Home/Away Coach(s), Official(s), AD*, AT*, Team Physician*, EMS* (*if present)</p> <p style="text-align: center;">Questions:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Who is the onsite contact for each school? <input type="checkbox"/> Is there a qualified medical professional present? If not, who will lead in case of an emergency? <input type="checkbox"/> Venue EAP: Who calls 911? Who meets EMS (and where)? <input type="checkbox"/> Where's the nearest AED? Who will retrieve it? <input type="checkbox"/> Environmental concerns? (heat index, air quality, lightning) 	<p style="text-align: center;">OSAA Pre-Event Safety Timeout</p> <p>Participants: Site Supervisor*, Home/Away Coach(s), Official(s), AD*, AT*, Team Physician*, EMS* (*if present)</p> <p style="text-align: center;">Questions:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Who is the onsite contact for each school? <input type="checkbox"/> Is there a qualified medical professional present? If not, who will lead in case of an emergency? <input type="checkbox"/> Venue EAP: Who calls 911? Who meets EMS (and where)? <input type="checkbox"/> Where's the nearest AED? Who will retrieve it? <input type="checkbox"/> Environmental concerns? (heat index, air quality, lightning)
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Principal:	<input type="text"/>
Athletic Director:	<input type="text"/>
AT / Medical:	<input type="text"/>
Security:	<input type="text"/>
AED Location:	<input type="text"/>
Venue Address:	<input type="text"/>
EMS Access:	<input type="text"/>

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