**FIS/SSNZ Medical Support Requirements for Alpine Disciplines**

**Medical Services required from Event Organisers**

The health and safety of all those involved in an alpine ski competition is a primary concern of all Event Organisers. This includes the competitors, officials, volunteers, course workers and spectators.

The specific composition of the medical support system is dependent on several variables:

* The size and level of the event being held
* The venue
* The estimated number of competitors, support staff and spectators

The scope of responsibility for the Event Medical Organisation (competitors, support staff, spectators) should also be determined.

**Please Note:**

**This document should be read in conjunction with “FIS Medical Guide – containing Medical rules and Guidelines.”** available for download from [www.fis.com](http://www.fis.com) .

For the completion of all tables in this document, an example form is available to consult. This sample if available to download from [www.snowsports.co.nz](http://www.snowsports.co.nz), as are blank versions of this form.

**Personnel/Staff**

Specific job descriptions with requirements should be created according to the specific requirements of the event.

|  |  |
| --- | --- |
| **The Organising Committee** must ensure that emergency medical services are available for each official day of training and competition. | Establishes an evacuation plan for injured athletes, officials and spectators – from site of injury, to initial triage, to hospital or trauma centre if indicated |
| **A medical plan** conforming to SSNZ requirements should be prepared. The detailed form below should be completed to identify the plan. | Secures availability of all necessary facilities, resources and personnel to support evacuation plan. |
| **A First Aid area** close to competition area should be established for initial triage and minor issues for competitors, officials and spectators, with staff trained in emergency techniques.  | Creates a back up plan/system that could be operational if one or more major evacuation is utilised |
| **A back up plan** must be available to allow for the recommencement of the official training or competition. | Defines specifically the personnel roles and responsibilities and communicates these clearly to all parties involved.  |
|  |
| **Technical Delegate** (TD) **C**onfirm**s** with the Event Organising Committee (OC) that the required rescue facilities are in place before starting official training or competition | Publishes the emergency plan (see below) before the first official training. |
|  |
| **First Aid Team** *This role could be taken on by suitably trained Ski Patrol plus as appropriate a doctor. The numbers/staffing will be determined by the nature and course of the event, including replacement in the case of an incident so as to not delay the competition. For Speed events paramedic/trauma trained staff are essential*  | Supports the TD with the recording of all incidents that occur during official training and competition with the completion of the FIS Injury Report for each athlete injury |
| Act as first responders to an injured athlete, officials or spectators | Place themselves so that they always have the race course in view and/or be in contact by radio with the on course medical or race director (CoR) |
|  |
| **Event Medical Director** *This role could be taken on by Chief of Champs or Race, doctor, or Resort Chief of Course. Much of this section is part of normal planning for events.* | **Evacuation protocols** for each level of injury from course with criteria for external specialist transport/ambulance. |
| Directs and coordinates all medical services provided at the event. This person may be a member of the Organising Committee and will report to the committee regarding medical issues with the event. This individual should be competent in managing health and safety. | **Details** of local available medical services to include the phone contact and address for location. This information should include; local medical clinics, physicians, dental offices, pharmacies and hospital. |

**Medical Questions/Aide Memoire for FIS/SSNZ events**

NB refers to all Competitions and Official Training.

1a Doctor on hill for FIS Speed / Ski Cross Yes/No If no include in explanation

1b Doctor on hill for SSNZ Speed / Ski Cross Yes/No If no include in explanation

2a Helicopter on standby for Speed / Ski Cross Yes/No flying time

2b Helicopter on standby for SSNZ Speed / Ski Cross Yes/No flying time

3a Nearest: first aid station minutes/metres away

3b doctor surgery minutes/metres away

3c hospital minutes/metres away

3d level 1 trauma clinic minutes/metres away

4a Ambulance available for all races Yes/No minutes away

4b Advanced life support on board Yes/No If no include in explanation

4c Second available if primary in use Yes/No If no include in explanation

5a Rescue sled at start all races Yes/No If no include in explanation

5b Trained paramedic with sled Yes/No If no include in explanation

5c Second sled available Yes/No If no include in explanation

6a Ski patrol on race course Yes/No If no identify process

6b Trained in Para Med/Advanced life support Yes/No

6c How many: Where placed

7 Name Address Phone Doctor

 SG Doctor

 Hospital

 Level one trauma centre

 Pharmacy

 Dentist

8 Map showing doctor, hospital, pharmacy

9 Describe process for evacuation

**If the answer to any Questions 1, 2, 4, 5, 6 above is No indicate the alternative appropriate arrangements.**

**MEDICAL ASSESSMENT FORM FOR SNOW SPORTS NEW ZEALAND and FIS COMPETITIONS**

The Organising Committee for each competition must fill in the assessment form (or equivalent) prior to the commencement of Training at a Competition.

**THE COMPLETED FORM MUST EMAILED TO SNOW SPORTS NZ. The information must be published on the official notice board and at the team captains’ meeting.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Event Venue** |  | **CoR** |  |
| **Event Dates** |  | **Event Status**  |  |
| **Event Doctor** *(if appropriate)* |  | Phone: +...................... |
| **First Aid provided by name:** |  | First aider or Paramedic *delete as appropriate* |
| **Local Surgery *(if appropriate)*** | **Address:**  **Phone:**  +...**From Venue:**  min ( km) with ambulance/car**Directions** : | **Level of Care:**   |
| **Hospital**  | **Address:**    **Phone:**  +**From Venue:**  min ( km) with ambulance/car**Directions** :  | **Level of Care:**  |
| **Pharmacy** | **Address:**  ‎**Phone:**  + **From Venue:**  min ( km) with car**Directions:**  | **Level of Care:**    |

|  |  |  |
| --- | --- | --- |
| **Slope patrol** | **In contact by:** | **Slope patrol** on-site during racing Yes/No |
| **Ambulance** | **In contact by phone:** | **Location** **From Venue:**  min ( km) |
| **Slope accident****Protocol** | **First aid are located at:** **Doctor located at:****In contact by:** | 1. 2. 3. 4. 5. 6. 7.  |
| **Crowd / Public Protocol*****Only if different from above*** | **First aid are located at:** **Doctor located at:****In contact by:** | 1. 2. 3. 4. 5. 6. 7. |
| **Back up plan** |  |  |

|  |  |
| --- | --- |
| **The Medical arrangements fully meet the criteria for SSNZ competitions** | **Yes/ No If no identify issue below** |
| Description  | **Yes/No** | **Complies fully with FIS/SSNZ Criteria? Y/N** | **Degree of compliance 1-5 (where 5 = fully in place)** | **If not fully complied, reason** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Signed:**  |  | **Technical Delegate/Chief of Race/Medical Director/Chief of Course** | **Date:** |  |

*The plan should be should be discussed on setting up contract with venue and prior to publication of acceptance bulletin – the document should be agreed and signed by Chief of Race/Medical Director and Chief of Course plus TD (if applicable).*

**Please email completed forms to SSNZ.**