UEFA

Pitchside Emergency Briefing

WE CARE ABOUT FOOTBALL

Why?

Sudden Cardiac Arrest Strikes Hungarian Footballer Miklos Feher
le coq sportif
le coqsportif
808 200 400
808 200 400

Aims of the UEFA briefing

- Pre-Match — Roles and Responsibilities
  Rehearse
- Match — Recognize
  React and Respond
- Post-Match — Review/Debrief
  Re-stock

Pre-Match

- **Define the Roles and Responsibilities**
  - Establish the role of each Team Doctor and Pitchside Emergency Doctor BEFORE THE MATCH!
  - Team Leader - the person in charge
    - must be agreed and defined at the briefing
  - Allocations - all roles and responsibilities in the Plan **must** have a name beside it.
    - One person may have multiple roles on the Plan.
    - No one should be allocated a role they cannot perform.
    - Each team member must be able to state if not feeling up to the task
  - Ensure that **all equipment is present, clean, working normally and NOT EXPIRED**
    - report this back to the Team Leader

Team Leader:

Phone number:

Ensure that the ambulance is called

Home team:

Away team:

Venue:

KO time:

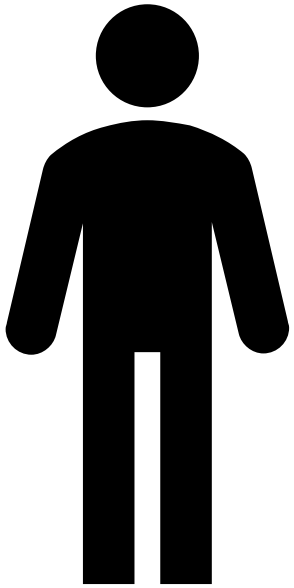
Nearest hospital:

Phone number of the hospital:

EMERGENCY PHYSICIAN WITH AED

BRINGS AED

POS 1
TEAM LEADER
- DIAGNOSIS
- DEFIBRILLATION
- AIRWAY



EMERGENCY BAG

PARAMEDIC

POSITION 3
- CHEST COMPRESSION (TAKES OVER AFTER TWO MINUTES)

PARAMEDIC

POSITION 2
- CHEST COMPRESSION (START)
- BRINGS EMERGENCY BAG

Position	Cardiac Arrest/Collapsed Player
Team Leader	Brings AED Assess signs of life Airway management Airway opening maneuvers Apply Bag/ Valve and squeeze 2 times every 30 compressions
Position 2	Brings emergency bag Starts chest compressions Assist with AED positioning
Position 3	Assist where needed Takes over chest compression after two minutes

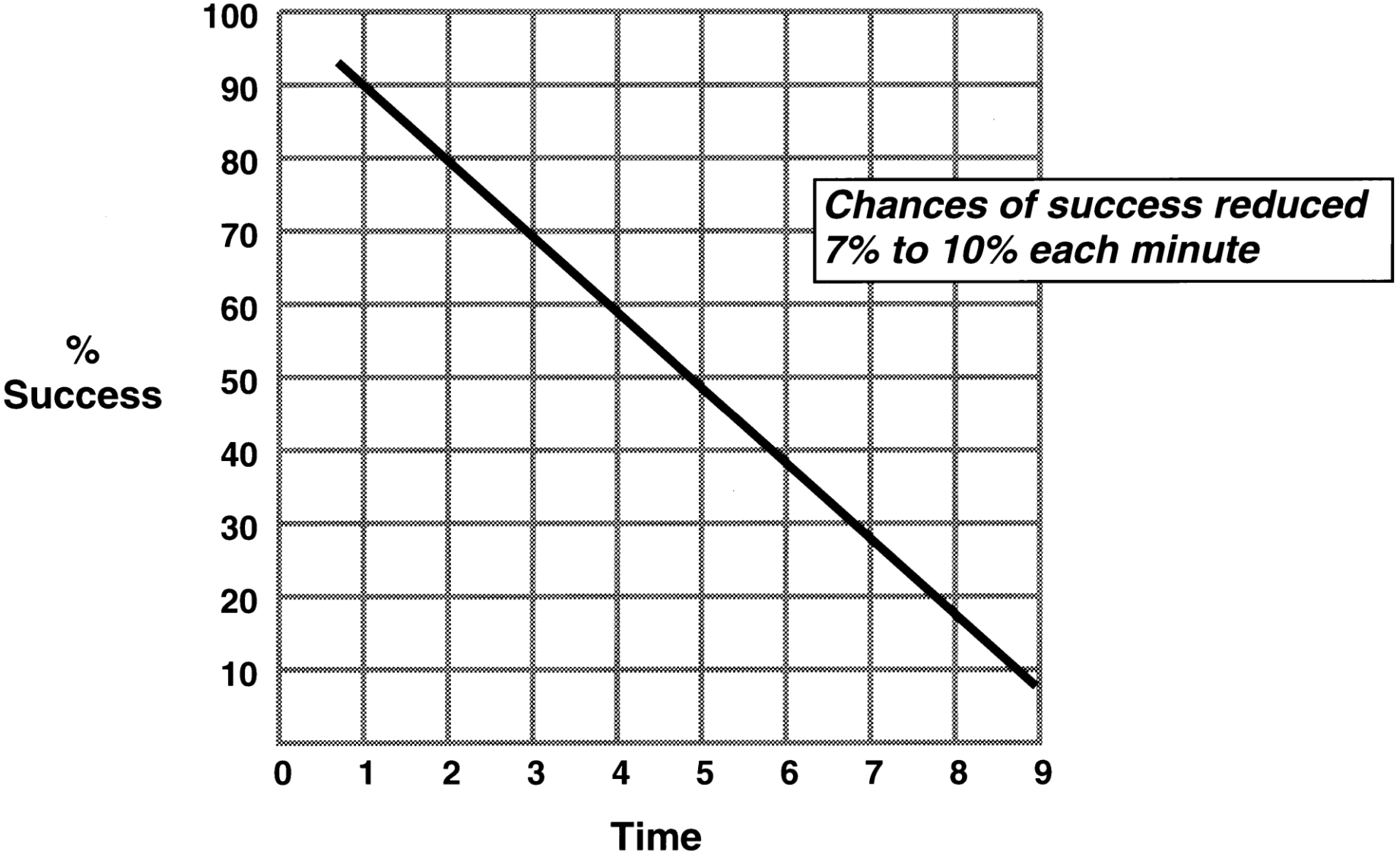
Pre-Match

- **Rehearse**
  - Scenario / simulation
    - The team should undertake scenario training once roles and responsibilities have been allocated
    - it may not be possible for every person at the briefing to be involved in a physical simulation
    - as a minimum the Team Leader and the team should perform a "**Walk-through Case**" of a cardiac arrest scenario
  - The aim is to **clarify roles, expectations and minimize assumptions**
  - The "Walk-through Case" should include details of the physical extraction process including location of medical room/ambulances and routes from the pitch into the medical room and/or ambulance
  - Inform the Team Doctor(s)

Match

- **Recognise**
  - Recognising Sudden Cardiac Arrest (SCA) early is the key element in a successful resuscitation.
  - Sudden Cardiac Arrest
    - Not common
    - Common human response can often be denial
      - "**This can't be happening, therefore it isn't happening**"
    - A potential delay to diagnosis and a delay to treatment
  - **Every collapse without physical contact must be treated as SCA until proven otherwise**

- European Resuscitation Council



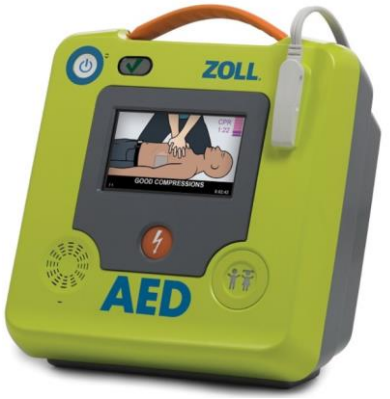
Match

- **Recognize – "Red Flags"**
  - **Collapse**
    - **Every collapse without physical contact must be treated as SCA** until proven otherwise
    - Especially if the players falls forward without protecting their face
  - **Abnormal Breathing**
    - Breathing may appear to be present as the player takes occasional gasping/agonal breaths.
    - Evidence of abnormal breathing in an unresponsive player may indicate cardiac arrest
  - **Seizure**
    - Quite common in sudden cardiac arrest

RESPECT

Match

- **React and Respond**
  - Ensure the Team Leader has recognized that SCA has occurred:
    - Everyone in the team should feel empowered to speak up
    - Speak up and you may save a life
  - Start **proper** chest compressions immediately
  - Chest compressions stop **ONLY** while defibrillator is analyzing
  - The defibrillator must be brought to the player and shock delivered **as soon as possible**



Match

- Extraction
  - Circumstances dictate
  - Decide: medical room or ambulance
- When?
  - When the player is back and stabilized
  - When the player is NOT stabilized after 3 shocks and according to algorithm
  - When there is a safe way to extract the player earlier, without stopping the chest compressions

Post Match

- **Review/Debrief**
  - Should include ALL involved, including respective Team doctor and others (if present/participating).
  - The cardiac arrest will have an impact on the entire team.
  - Find time and make sure everyone is ok.
  - Discuss learning points:
    - dependent on how the team feel able to talk through these immediately after an event.

Post Match

- **Review/Debrief** (should include ALL involved, including Team doctor)
  - Reinforce the good
    - How did we do?
    - What did we do good?
    - What can we do better?
  - Stress the importance of **not discussing the case publicly**, outside the team
  - Reiterate the importance of **not talking to media** about the case

Post Match

- **Restock**
  - Restocking equipment is vital and should be done as soon as possible after the event.
  - If items are not able to be restocked immediately, a list should be created of missing items, and this should be given to the person who has overall responsibility to undertake all restocking

Thank you