

**SUMMER CAMP MEDICAL EMERGENCY PLAN**  
**FOR \_\_\_\_\_ CAMP FOR \_\_\_\_\_ YEAR**

Complete before camp starts, send one copy to the staff supervisor. One copy should be posted at camp and each administrative staff member should have a copy.

**EMERGENCY EQUIPMENT**

Being prepared for emergencies requires having appropriate equipment available, in good condition and ready for use, as well as having personnel trained in the use of the equipment. (First Aid kit, backboard, fire extinguisher, etc.)

What safety and emergency equipment is kept on site?	Where is it kept?	Who is responsible for checking and maintaining it?	When and how often checked?	Who is trained/ authorized to use the equipment?

**EMERGENCY PHONE NUMBERS**

These emergency telephone numbers need to be posted along with what to report and the names of staff who can contact officials.

1. What are the emergency phone numbers of local officials and are they posted by every phone where problems can be reported?

- a. Fire \_\_\_\_\_
- b. Police \_\_\_\_\_
- c. Sherriff \_\_\_\_\_
- d. Doctor \_\_\_\_\_
- e. Poison control center \_\_\_\_\_
- f. Ambulance \_\_\_\_\_
- g. Health Department \_\_\_\_\_
- h. Emergency Room \_\_\_\_\_

2. What is the site address or directions to be given in case of emergency?

\_\_\_\_\_

\_\_\_\_\_ Site Phone # \_\_\_\_\_

**MEDICAL SERVICES**

Information about available medical services will simplify and speed securing the needed treatment in the event of accident, injury or illness.

- 1. Ambulance
  - a) Who do you call for an ambulance? \_\_\_\_\_ Phone \_\_\_\_\_  
 Alternate \_\_\_\_\_ Phone \_\_\_\_\_
  - b) What is estimated response time? \_\_\_\_\_
  - c) How many victims can the ambulance transport? \_\_\_\_\_

- d) Who goes with the injured? \_\_\_\_\_
- e) Can anyone else ride in the ambulance? \_\_\_\_\_
- f) What forms are needed? \_\_\_\_\_

2. Hospital

- a) What is the closest available hospital? \_\_\_\_\_ Phone # \_\_\_\_\_
- b) Directions from site to hospital \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- c) How long does it take to get there? \_\_\_\_\_
- d) What forms/information are needed for treatment? \_\_\_\_\_  
 Health history \_\_\_\_\_ Other \_\_\_\_\_  
 Parent permission \_\_\_\_\_  
 Insurance forms \_\_\_\_\_
- e) When (if ever) is it necessary to call ahead for treatment? \_\_\_\_\_
- f) Do parents need to be reached before treatment will be given? \_\_\_\_\_
- g) What method of payment is required for treatment? \_\_\_\_\_
- h) In case of animal bite does the hospital require you to bring the animal? \_\_\_\_ Yes \_\_\_\_ No
- i) Who should transport injured to hospital? \_\_\_\_\_  
 Alternates \_\_\_\_\_

**EMERGENCY TRANSPORTATION**

When the situation calls for the use of transportation available on site, it is important to have immediate access to the vehicle and driver.

1. What emergency transportation is available on site? \_\_\_\_\_  
 \_\_\_\_\_
2. In what situations would this be used over outside help such as an ambulance service? \_\_\_\_\_  
 \_\_\_\_\_
3. Where is the vehicle(s) kept? \_\_\_\_\_
4. Where are keys kept? \_\_\_\_\_
5. Has vehicle been checked for safety an reliability? \_\_\_\_\_  
 \_\_\_\_\_
6. Who are designated emergency drivers? \_\_\_\_\_  
 \_\_\_\_\_
7. What emergency equipment is kept in the emergency vehicle? \_\_\_\_\_  
 \_\_\_\_\_