



Medical Emergency Action Plan
Collegiate Rugby Championship
April 24-26, 2026

Host: Maryland SoccerPlex Fields 9-13

Address: 18031 Central Park Circle, Boyds, Maryland, 20841

NCR Medical Contact:

Dr. Michael Lewis, MD
NCR BOD and Chair, Medical & Safety Committee
240.481.2989 (cell)

NCR Alternate Contact

Thomas Bennett, MPSM, LAT/ATC
443.803.4071 (cell)

Event Maryland SoccerPlex Contact:

Kimberly Walter
Senior Event Manager
813-545-4924 (cell)

Nearest Hospital

Holy Cross Germantown Hospital (15 minutes)
19801 Observation Drive
Germantown, MD 20876

Nearest Urgent Care Centers

MedStar Health Urgent Care Gaithersburg (10 minutes)
12111 Darnestown Road
Gaithersburg, Maryland 20878

Adventist HealthCare Germantown (10 minutes)
19731 Germantown Road
Germantown, Maryland 20874

Patriot Urgent Care (14 minutes)
19825 Frederick Road
Germantown, Maryland 20876

Medical Staff: Qualified medical professionals can include a Certified Athletic Trainer (ATC), Physical Therapist; a medical physician (MD or DO); and Chiropractor. Medical professionals should be trained in sports medicine, orthopedics or emergency medicine, or have substantial experience in sports medicine.

Identification of Sideline Medical Personnel: There will be a minimum of one athletic trainer assigned per field in addition to any team supplied medical personnel. ***All medical personnel should be readily identifiable wearing a bright red medical jersey and/or emergency personnel vest.*** Team medical personnel should identify themselves to the Field Captain, the Field Athletic Trainer, and the referee prior to a match beginning

and should also wear a bright red medical vest (if available) supplied by the Field Captain or Field Athletic Trainer.

Obligation to Intervene for Medical Reasons: All medical personnel, referees, coaches, and players have the obligation to intervene when a dangerous situation occurs to protect player safety. As an example, if the referee determines that a potential head injury may have occurred, the referee should call for an immediate evaluation by medical personnel or send a player off the pitch for further evaluation. Likewise, a coach, player, or athletic trainer who sees a potential injury, should intervene immediately. Player safety is everyone's responsibility.

Chain of Command on the Field for Medical Decisions During Matches:

1. Team Certified Athletic Trainer (or qualified team medical personnel)
2. Host Site Athletic Trainer
3. Head Referee
4. Head Coach
5. Assistant Coach
6. Other Athletes

Medical Decisions During the Actual Play of a Match: Note that rugby, particularly Sevens rugby, is a fast-moving game with potential for injuries. If a player is injured on the field of play, **medical personnel are authorized and EXPECTED to go onto the field EVEN IF PLAY CONTINUES**. If there is a potentially dangerous situation, the referee has the responsibility to halt play at his/her discretion.

Medical Tent: There will be one NCR medical tent readily identifiable on the edge of the player village outside the SoccerPlex/Adventist Field House. This tent will be manned by contracted athletic trainers and volunteer medical personnel.

Emergency Communication – Medical Channel #3

NCR will provide radio communication for the CRC event.

- NCR will provide a radio communication set to Kimberly Walter at Maryland SoccerPlex for coordination of staff, medical care, and emergencies. Generally, Ms. Walter will be monitoring NCR Staff Channel 1 and will switch to #3 as needed when hailed.
- NCR referees and Field Captains will communicate generally on #2 (Referees). Field Captains will coordinate field care with the field Athletic Trainers and those Athletic Trainers/medical personnel traveling with teams. **If a medical need arises, Field Captains will hail Medical on Channel #3.**
- NCR Medical Staff and Tent, including Dr. Lewis, will be monitoring Channel #3.

Individual Player Medical Equipment and Supplies:

Teams are responsible for providing their own tape, pre-tape, K-tape, and other disposable equipment and supplies. NCR is not responsible for providing individual medical supplies. Teams/players needing supplies will be directed to purchase supplies on the local economy.

Emergency Equipment: Appropriate emergency equipment must be on-hand for each day of the event. All assigned emergency care personnel should be aware of the location and function of all emergency equipment. The equipment is checked prior to practices and competitive events for proper function and availability.

AED (Automated External Defibrillator) – located on the scoreboard post at the Stadium Field. The AED is intended to be used by personnel who have been trained in its operation. The user should be qualified by training in basic life support or other physician-authorized emergency medical response. The device is indicated for emergency treatment of victims exhibiting symptoms of sudden cardiac arrest who are unresponsive and not breathing. Postresuscitation, if the victim is breathing, the AED should be left attached to allow for acquisition and detection of the ECG rhythm. If a shockable ventricular tachyarrhythmia recurs, the device will charge automatically and advise the operator to deliver therapy.

On-site Ambulance: Will be located at the player parking lot near Fields 12 and 13 down the hill from the Player Village. This ambulance is a backup for the 911/EMS system. The ambulance is for serious or life-threatening emergencies. Routine issues should be handled by the medical staff at the NCR Medical Tent. If a major injury occurs during play that requires evacuation, 911 will be activated by the lead SoccerPlex Event Coordinator (Kim Walter) or NCR Medical (Dr. Lewis).

Recommended equipment on board the ambulance: Epi-pen, immobilization splints (such as vacuum splints, neck braces), back immobilization board, and advanced airway management (bag-valve-mask (BVM), nasopharyngeal airways, oxygen tank). The EMS crew needs to be trained, certified, and able to handle major trauma including (but not limited to) unconscious patient, neck injury, back injury, long bone fracture, compound fracture, lacerations that may require suturing, knee and ankle trauma.

Medical Plan for Injury During Play: The first medical staff to the scene will conduct a primary on-field assessment. If the injury is not determined serious, the medical staff will bring the athlete to the sidelines and conduct a secondary assessment. If the injury is determined to be more serious the medical staff will contact SoccerPlex and/or NCR Medical Staff on Channel #3 to determine if more assistance is required. All treatment of injuries will be recorded by the medical staff that administered treatment.

Non-life-threatening evacuation of an immobilized player from the field. If a player is unable to safely or adequately ambulate to the NCR Medical Tent for further evaluation, the Field Captain should contact the NCR Medical Team on Channel #3 for evacuation by golf cart or on-site ambulance as needed.

Evacuation of Non-life threatening injury/illness off-site: An individual of the athlete's choice may provide transportation to a local urgent care or emergency room for an athlete with a non-life-threatening injury. Transportation off-site is not the responsibility of NCR.

Transportation Off-Site for Urgent or Life-Threatening situations:

Emergency transportation of an injured/ill athlete may be provided via the EMS on site for a life-threatening injury/illness. If a major injury occurs that requires evacuation, 911 will be activated by the lead SoccerPlex Event Coordinator (Kim Walter) or NCR Medical (Dr. Lewis).

Directing EMS to the Scene: The primary lead (Kim Walter) of the Maryland SoccerPlex Team will take on the primary role of directing EMS to the scene. NCR's Dr. Lewis will be the secondary lead.

Activation of EMS: Emergency medical services should be activated for the following situations:

- An athlete is not breathing
- An athlete has lost consciousness
- It is suspected that an athlete may have a neck or back injury
- An athlete has an open fracture (bone has punctured through the skin) or a long bone fracture (femur)

- Severe heat exhaustion or suspected heat stroke
- Severe bleeding that cannot be stopped

In the event that EMS is called, the following people will be included in the communications and notified of EMS presence:

- Kimberly Walter, Maryland SoccerPlex
- Michael Lewis, NCR Medical and Safety
- David Haines, NCR Referee Director

In the event that a player is assessed to have a HEAD INJURY:

Initial assessment of a head injury shall be completed by the team or field medical staff on site. If a player is removed from play due to a potential head injury, the team and player name shall be reported to the Referee Director (Dave Haines) and that player shall be withdrawn from any further play until further assessment is conducted.

Before a player may return to play, documentation that a player has been further assessed and cleared by a qualified team medical professional must be provided to the NCR Medical & Safety Chair (Dr. Lewis) who will make the final determination that a player may return and notify the Referee Director of the decision.

If no team medical personnel are available, further assessment may be done at the Medical Tent by contracted or volunteer medical staff. Off-site evaluation may also be done at local Urgent Care Centers or Emergency Departments. Before a player may return to play, documentation that a player has been further assessed and cleared by a qualified medical professional must be provided to the NCR Medical & Safety Chair (Dr. Lewis) who will make the final determination that a player may return and notify the Referee Director of the decision.

If a player is diagnosed by a qualified medical professional that they sustained a concussion, the Event Director reminds the player's coach of the World Rugby Policy regarding Concussions which includes the 5 Rs shown below as well as compliance with the World Rugby Concussion Guidelines. It is imperative that the athlete *does not return* to play until he or she is symptom-free and has been cleared for return to play by a qualified healthcare professional and has provided the appropriate documentation to the Maryland SoccerPlex contact and the NCR Medical & Safety Chair. This clearance will then be provided to the Referee Director. It is strongly recommended that the player complete the GRTP (Graduated Return to Play) procedure prior to return to full play and competition.

ALL rugby players, staff, parents, referees, volunteers, and even fans follow these five basic steps when dealing with suspected concussions:

1. **Recognize** – Learn the signs and symptoms of a concussion so you understand when an athlete might have a suspected concussion.
2. **Remove** – If an athlete has a concussion or even a suspected concussion, he or she must be removed from play immediately.
3. **Refer** – Once removed from play, the player should be referred immediately to a qualified healthcare professional who is trained in evaluating and treating concussions.
4. **Recover** – Full recovery from the concussion is required before return to play is authorized. This includes being *symptom-free*. Rest and some specific treatment options are critical for the health of the injured participant.
5. **Return** – In order for safe return to play in rugby, the athlete must be symptom-free and cleared in writing by a qualified healthcare professional who is trained in evaluating and treating concussions. The athlete completes the GRTP (Graduated Return to Play) protocol.

In the event a player is suspected to have Heat Related Illness and/or Heat Stroke:

Should the Athletic Trainer (AT), referee, coach, or participating athlete suspect heat related illness is occurring, the player should be removed from play and the following procedures should occur:

1. ATC will evaluate signs and symptoms (i.e. serial posturing for exertional collapse), take oral temperature
2. ATC will report current player status to NCR Medical & Safety Chair: levels of consciousness and additional pertinent signs and symptoms.
3. ATC will begin active cooling: remove jersey, apply ice to pulse points.
4. ATC will transport to the closest indoor facility with air conditioning.
5. ATC will monitor and assess temperature report status to NCR Medical & Safety Chair.
6. If at any point and time, temperature is at or exceeds 102 degrees, ATC activates EAP and radios the NCR Medical & Safety Chair. Transport player immediately to the onsite refrigeration truck for rapid cooling.

Miscellaneous:

In the event of hospitalization or surgery, medical personnel will notify the athlete's parent/guardian/spouse or other emergency medical contact identified on the team's emergency medical documentation, as necessary and appropriate. Medical confidentiality will and must be maintained in all cases. In the event of an illness, athletes are advised to update the medical personnel on site, NCR Medical & Safety Chair, and the Referee Director.

Additional Tournament Medical Information:

1. The Medical Staff on site will be responsible for treating minor injuries to players and for caring for more serious injuries until EMS personnel arrive. The Staff makes the decision to call for additional care, and, if an ambulance is not at the field, calls 911 to request EMS (ambulance).
2. Once EMS personnel arrive, Medical Staff on site then provide pertinent info (cause of injury, vital signs, treatment rendered, and medical history) to EMS personnel and assists with emergency care as needed. If the match is on-going, another member of the medical staff will pay attention to athletes in play.
3. The NCR Medical & Safety Chair advises the Coach of the player's team to assign someone to accompany the athlete to the hospital as well as bring pertinent medical history of the player and their personal belongings, including medical insurance card and ID.
4. The injured player's Coach contacts parents/guardians/family as necessary.
5. Medical Staff on site or the Team Athletic Trainer will complete the injury event form and provide it to the Maryland SoccerPlex contact, who in turns provide a copy of all injury reports to the NCR Medical & Safety Chair at the end of each day.

Documentation

At time of injury, all medical personnel that has completed an assessment of an injury (inclusive of those ATs that have provided the appropriate documentation to accompany a participating team), will complete an "Injury Report Form" through the NCR CRC7s app on their phone or iPad. Through that system, the documentation is provided to the NCR Medical & Safety Chair. The NCR Medical & Safety Chair will coordinate with the NCR Referee Director on the nature of injuries and medical events sustained by players throughout the day.

Emergency Action Plans:

A Certified Athletic Trainer (or other qualified medical professional) will provide leadership in the emergency management of injuries/illnesses during athletic participation. It is recommended that coaches and other staff supervisors of game management also be First Aid and CPR certified. Their role is to provide assistance to the medical professional as part of the emergency medical team in the event of an emergency.

The EAP will be distributed to all NCR CRC teams and personnel so that each member of the emergency care team is aware of their respective role in the event of an emergency.

Lightning and Thunderstorms

The Maryland SoccerPlex is equipped with a WeatherBug Lightning Alerting System. The purpose of this system is to protect patrons using the facility when under the threat of dangerous storms. When a cloud-to-cloud or cloud-to-ground lightning strike occurs within ten miles of the Maryland SoccerPlex, one long 15-second horn blast will go off, indicating a **Code Orange**.

At that time, the SCM will instruct the PA announcer to make the following announcement for the evacuation of the stadium and surrounding fields:

“Attention fans. The local weather service has detected severe weather in our area. At this time, we ask that you please calmly and carefully exit the stadium and surrounding fields and return to your vehicles. This event has been temporarily postponed until the weather has cleared.”

Once the stadium and surrounding fields has been cleared of all personnel and patrons; the SCM, Director of Grounds and the NCR Medical and Safety Chair, NCR Referee Director, and NCR Tournament Director will convene inside the Adventist HealthCare Fieldhouse offices to monitor the storm and make all necessary decisions regarding suspension of play.

Event Security and/or Maryland Soccer Foundation staff will monitor all entrance points to the Adventist HealthCare Fieldhouse and locker room(s) access as necessary to ensure the safety of all inside.

When there has been no lightning strike within ten (10) miles for a continuous 15-minute period, the horns will blast three (3) times, each blast lasting five (5) seconds to indicate **All Clear**. At that time, the SCM will evaluate the stadium to ensure safe re-entry for players, patrons and staff. NCR Medical and Safety Chair, NCR Referee Director, and NCR Tournament Director should at this time prepare the players, coaches, and event staff for the re-entry of fans and the possible restart of the matches.

It is possible for the horns signaling **All Clear** and **Code Orange** to go off in quick succession. **All Clear** only indicates lightning has been cleared of the area for 15 minutes, not that the storm has cleared the surrounding area. The decision of re-entry of all personnel for the event shall be made by the SCM, not the lightning detection system.

Lightning Alert Evacuation Procedures – Stadium Event

Once the horn has sounded indicating that there has been a lightning strike within 10- miles of the Maryland SoccerPlex, the following steps need to be taken:

- SCM has the PA announcer make announcement #1 requesting the evacuation of the stadium and surrounding fields. Will read twice.
- SCM calls over the radio to have Gates A, B, and C opened fully for patrons to exit safely. MSF staff will assist in this process. Gate G is to be opened with either an intern or CSC manning for player/coach/field staff to pass through.

- Field manager is then asked by the SCM to bring the teams together with CSC and escort them to the locker room through Gate G and the Adventist HealthCare Fieldhouse North doors.
- Spectators must exit the stadium through the nearest open exit as well as evacuate the surrounding fields and return to their vehicle for the remainder of the lightning delay. Event volunteers and interns are to assist spectators at this time.
- CSC stationed at Gate G, H, and Café doors to prevent fans from entering the building or interacting with the players.
- Once everyone has left the stadium, MSF staff will do a sweep and close all open gates to discourage re-entry to the stadium while under lightning delay. Gates will be dummy locked to make re-entry easier on the all clear is given.
- Vendors are reminded that they must also exit the stadium and return to their vehicles. If high winds are associated with the storm, vendors are encouraged to lower their tents to their lowest settings for the duration of the storm.
- Available CSC need to enter the building and watch all entrances to prevent fans from entering the facility (North, Front, Café and locker rooms).
- The SCM, Director of Grounds, and an NCR Medical and Safety Chair, NCR Referee Director, and NCR Tournament Director will convene inside the AHF offices and monitor the progression of the storm. The Event Representative must be able to maintain contact with the NWSL, team staff, coaches, game officials, etc.
 - All other game staff/officials/players/coaches need to remain outside of the AHF offices during this time.
- All decisions about play will be made by the SCM, Director of Grounds, and NCR Medical and Safety Chair, NCR Referee Director, and NCR Tournament Director based on the storm's progression and how close to curfew the current time is.
- After the All Clear has sounded and the SCM/Director of Grounds feels play will be able to resume without further interruption, the SCM will notify all MSF staff and associated Spirit staff. MSF staff will do another sweep of the stadium to ensure that it is safe for patrons to re-enter. Event staff/CSC will return to their gates for re-entry.
- Once everyone is in place, gates will be re-opened, and patrons will re-enter the stadium. Players will take the field for warm-ups and play will resume.
- NCR Staff will provide an alert to all teams through email that play has resumed, with phone calls to the coaches of the teams set to immediately play.



Other Severe Weather

Hurricanes, Earthquakes, Tornadoes, Etc.

Other severe weather can impact the play of the game and the safety of those in attendance. Hurricanes, earthquakes, and high winds can threaten everyone in the storm's path and cause great panic.

Hurricanes

Hurricanes can bring large amounts of rain, high force winds and possibility of injury due to flying debris. In the event that an established hurricane is in the area, the SCM will evaluate the current and future outdoor conditions. If deemed unsafe, with recommendation from the Director of Grounds, play will be suspended, and patrons will be evacuated.

Earthquakes

Depending on the severity of the earthquake and any structural damage, patrons should be instructed to stay calm, remain in their seats and await further instruction. The SCM will make a radio announcement of "**Code Orange**. Please wait for further instructions. Radio silence is in effect." At this time, the SCM will instruct the PA announcer to make the following announcement:

"Attention fans. We ask that you remain calm, stay in your seats and wait for further instructions. We will make another announcement shortly."

Repeat message.

The SCM and Maryland Soccer Foundation staff will evaluate the Stadium, playing surface and surrounding areas for any potential hazards. Once safety is evaluated, a decision on continuation of play and/or potential for evacuation will be made by the SCM.

Tornadoes

Tornadoes, along with high winds, can bring harm to patrons and damage to property. Care needs to be taken to ensure the safety of all those in attendance. Current conditions will be monitored, and risk will be assessed. If damage from a tornado/high winds renders inevitable, then evacuation of the stadium should occur. Patrons, staff, and players will evacuate the stadium to the interior of the Adventist HealthCare Fieldhouse until the storm has passed. Players and coaching staff will evacuate through Gate F through the North doors and into the locker rooms. Patrons and staff will enter the building through either the café or front doors.



Lost/Misplaced Persons

In all circumstances of a lost/misplaced person, the reunion point will always be on the concourse behind the Stadium press box.

Child found separated from parent

In the event that a child is found separated from their parent/guardian, the staff member who finds the missing child will notify Maryland Soccer Foundation staff immediately. The staff member, along with the missing child and the SCM will meet behind the Stadium press box. Both will try to keep the child calm and gather necessary information so an announcement can be made over the PA. The SCM will notify the PA announcer with the following message:

“Attention please. Will the parent or guardian of (insert child’s name) please report to the concourse behind the Stadium press box.”

Repeat message.

The SCM, unless delegated to another individual, will remain with the child until the parent(s)/guardian(s) are reunited with the child.

Parents get separated from child (CODE AMBER)

In the event that a parent or guardian approaches a member of the Maryland Soccer Foundation or event staff saying that their child is missing, the staff member should immediately notify the SCM. After notifying the SCM, the staff member, parents/guardians, and the SCM will meet on the concourse behind the Stadium press box for stadium events or at the front desk for Fieldhouse events. During the meeting, the SCM should try to collect information about the missing child such as:

- Name
- Gender
- Age
- Physical description
- Clothing worn
- Last known location
- Any other necessary information

Once the information has been collected, the SCM will try to relay to as many staff members as possible the information about the missing child. All non-Maryland Soccer Foundation staff should continue their jobs as normal but be on the look-out for the child. The SCM will designate someone to stay with the parents/guardians so that in case the child is found, an announcement can be made to the parents/guardians quickly.



Lost/Misplaced Person Cont.

Search Procedures:

- All available Park Police officers will monitor the major entry/exit points at the stadium/Fieldhouse
- SCM and staff will do a sweep of the stadium/restrooms/Fieldhouse
- If necessary, SCM and staff will do a sweep of the surrounding grounds
- Event staff should be alert of the situation and keep an eye on anyone who meets the description of the missing child
- If child is found with another adult, both the child and adult should be brought to the Stadium press box/Fieldhouse front desk to confirm with parents the adult's identity and reunite child with parents

Gates should be immediately closed and monitored. The Adventist HealthCare Fieldhouse doors will also be closed and locked in case the child has gone inside the building. Once the child is located, the child and parents/guardians should be reunited at the front desk.



CBRN Threats/Hazmat Situations

Due to the close proximity to Washington, DC and the nature of events hosted at the Maryland SoccerPlex, CBRN threats and hazmat situations should not be taken lightly. CBRN stands for Chemical, Biological, Radiological, and Nuclear threats. In the event that a CBRN threat occurs, if still able, call 911 and initiate Fire and Rescue response. Lockdown stadium/Adventist HealthCare Fieldhouse to keep the threat from spreading.

Chemical threat – Can be introduced as waterborne, airborne, spill or leakage, or through a small explosive. Characterized by rapid onset of medical symptoms (minutes to hours) and easily observed signatures (colored residue, dead foliage, pungent odor, dead insects and animals).

Situational awareness is essential in handling these kinds of threats. These are a few examples of chemical agents that could be used as a threat and their associated symptoms:

- **Blood agent** – (Cyanide, Arsenic etc.) Headaches, respiratory distress, loss of consciousness, vomiting and convulsions.
- **Blister agent** – (mustard gas) may cause severe skin, eye and mucosal pain and irritation; mild to severe respiratory distress; skin erythema with large fluid blisters.
- **Choking agent** – (chlorine, ammonia, phosgene, organohalides, and nitrogen oxides) immediate irritation of the eyes, nose and throat; difficulty breathing; coughing; nausea/vomiting; pulmonary edema.
- **Nerve agent** – (Sarin, Tabun, Soman gas) salivation, runny nose, constriction of pupils, difficulty breathing; hallucinations, slurred speech; chest pain

Biological threat – May take several days to weeks for signs/symptoms of these kind of attacks to manifest. Biological agents are usually odorless and colorless. Due to the delay of symptoms in a biological incident, the area affected may be greater due to the movement of infected individuals. Biological threats can be introduced by the following ways:

- By mail
- The buildings ventilation system
- Unattended baggage
- Food
- Aerosol spray
- Other contaminated items

Safety Considerations

Safety of oneself and other responders should be the most critical consideration. Identification of chemical and biological agents may not be verifiable, protect yourself and approach with caution (wear protective equipment and respiratory protections, if



available). Try to identify the hazard based on the surroundings. Isolate and secure the scene when able. Those that have been contaminated need to be isolated and decontaminated as soon as possible by emergency services to keep from spreading the contamination.

Radiological threat – Also known as a “dirty bomb” or radiological dispersion device (RDD). These are common explosives that are used to spread radiological material over a certain targeted area. Exposure should be limited as much as possible in the event that radiological contamination has occurred. The following are steps to take to limit exposure during a radiological threat:

- If outside – cover your nose and mouth and quickly seek shelter. Once shelter has been taken, close doors and windows and shutdown ventilation system to decrease chance for outside toxins to get in.
- If inside – cover nose and mouth and get out of the building as quickly as possible. Seek alternate forms of shelter.



Power Outages

In the event of a complete power outage where the stadium lights will not immediately come back on, steps need to be taken to ensure that all in attendance remain calm and seated.

- The emergency light located on the exterior of the Adventist HealthCare Fieldhouse near the West concourse will come on and remain on via battery power.
- The Maryland SoccerPlex is not equipped with an emergency backup generator. Lights will not come back on immediately following power failure.
- The SCM will call the electrician and the head of the South Germantown Recreation Park to investigate the nature and severity of the outage.
- Patrons need to be reminded to stay calm and remain in their seats while the situation is being handled. The players should return to their designated benches for the duration. A bullhorn will be used by the SCM and designated staff to issue all instructions.
- The SCM, in conjunction with the head of event staff, will make a decision on the possible suspension/postponement of play based on length of time to return power and proximity to the lease curfew.
- In the event that the game is suspended, and evacuation is necessary, flashlights will be handed out to Maryland Soccer Foundation and event staff to facilitate safe evacuation.
- The stadium will then be evacuated by section, led by members of the event staff. This will be done to ensure safe and orderly exit of all patrons.
- When evacuating sections, one staff member will lead the group with a flashlight and another staff member will follow at the very end of the group with a flashlight. Groups will be led to the appropriate mustering zone.
- The teams will be escorted to the building by Park Police/CSC/Senior Maryland SoccerPlex Staff member



Bomb Threat/Suspicious Object

Bomb Threat Call:

- Remain calm. Stay cordial and **do not** aggravate or anger the caller.
- Keep them on the phone as long as possible. Attempt to keep the conversation going as long as possible to get as much information as you can. Record everything that you hear on the “Bomb Threat Call Sheet.”
- If a location of the bomb is not given, ask him/her for this information.
- Pay attention to background noises, or anything that may alert you to a possible location of the caller.
- Pay attention to the caller’s voice. Are they male or female? Do they seem calm or are they on edge? Do they have a noticeable accent or impaired speech?
- Once the caller has hung up, immediately report the threat to the SCM via two-way radio using **CODE PURPLE**.
- The SCM will then call a 911 to report a potential bomb threat.
- The SCM will then call **CODE PURPLE** via two-way radio. **Radio silence is to follow.**
- The SCM and the SSO will coordinate how to proceed with the management of the situation.

Suspicious Package/Unattended Baggage Found:

- Do not approach or attempt to open any suspicious package or baggage that has been left unattended/unclaimed in the Stadium.
- Alert Maryland SoccerPlex staff immediately upon noticing the item.
- The SCM will then notify M-NCPP that a suspicious package/unattended baggage has been found and its location.
- The SCM and SSO will decide if there is a threat and how to proceed.



Active Shooter

Any and all precautions should be taken in the event that an active shooter is in the vicinity of the Maryland SoccerPlex or in the Stadium. Above all else, employees need to find the most reasonable way to protect their own life first, and then help all those in attendance do the same. Patrons and spectators are more likely to follow suite of those that work at the complex. Remain calm at all times to help reduce the panic that will inevitably follow.

Active Shooter procedure: Determine the most reasonable way to save your own life.

- **Evacuate.** Immediately. Have an escape plan in mind and utilize that plan. Do not take any of your belongings with you. Keep your hands visible at all times.
- **Hide.** Hide out of view of the Active Shooter. If possible, block entry/exit to your hiding spot with heavy furniture and remain silent.
- **Act.** If possible, and only as a last resort, take action to incapacitate the shooter. Do what is necessary when your life is in imminent danger.

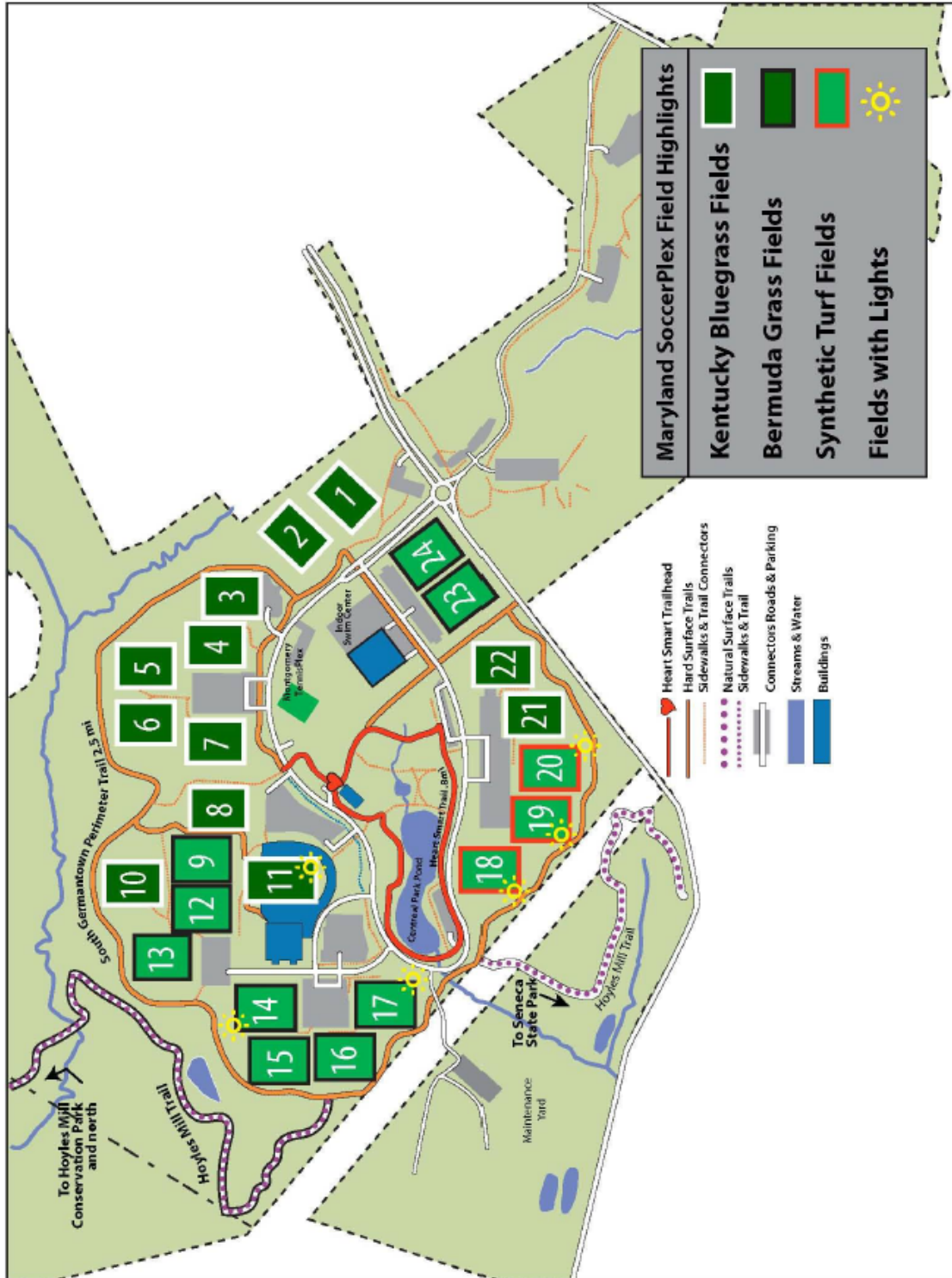
Once in a safe location, the SCM will issue a **CODE BLACK** via radio. **Radio silence will follow.** M-NCPP will be on-site for most events and will mobilize upon radio notification or first sounds of gunfire. All Maryland SoccerPlex staff and event staff need to remain calm and follow direction from the Senior Safety Officer (SSO). The SCM and the SSO will remain in contact throughout the course of the incident.

All Maryland SoccerPlex employees and event staff must remain calm and exercise good situational awareness. It is extremely important to stay vigilant and be able to relay as much information as possible to the proper authorities. Staff should try to determine the location of the shooter(s), a physical description of the shooter(s), type of weapon(s), any potential victims and their locations.

In the case that law enforcement is not already on scene for the event, you must remain calm and follow all direction given once they arrive. Keep hands visible and avoid making any sudden movements. Avoid pointing, screaming and/or yelling to avoid increasing panic of those around you or drawing attention of the shooter to you. The SCM will convene with a representative from law enforcement at this point.



Complex Map/Floorplans





Field 13

Field 10

SoccerPlex
Fields 10, 12, 13

Field 12

Field 9

Field 8

Ambulance
Med Tent

Adventist
HealthCare
Fieldhouse

Maryland SoccerPlex

Field 11