



National Sports M.A.P.®, LLC Standard Operating Procedures

Thank you for choosing to work with our team at
National Sports Massage & Athletic Practitioners®, LLC!

These Standard Operating Procedures are to be followed at all times.

Please maintain and uphold all legal and professional laws, roles and responsibilities according to your scope of work with NationalSportsMAP.com! We look forward to working with you!

A. National Sports Massage & Athletic Practitioners® is a limited liability company that hires screened, certified and/or licensed (applied individually by state regulations) practitioners in the fields of: massage therapy, athletic training, physical therapy, sports chiropractic (CCSP), and emergency medical technicians including paramedics. As independent contractors, each provides specialty coverage to tournaments, events, games, camps and races.

B. A Green Light Standard from NCSI Background Check must be applied for, received and maintained every two years. The cost to you is \$58 and covers one (1) county background check processing. Additional fees may be incurred due to additional counties lived in and their possible pass through fees.

C. By signing this document, you acknowledge that you have completed a credentialed course and have a current and valid First Aid, CPR, and AED certifications. These certification cards must be presented prior to working any event, and submitted through either (a) NCSI Background Check Certification process or (b) by sending after your completed NCSI Background Check directly to info@nationalsportsmap.com.

D. I hereby acknowledge that any NationalSportsMAP.com client relationship hindered, damaged, misconstrued and/or misrepresented at events by me may result in removal from that job and possibly any job board National Sports M.A.P.®, LLC, is associated with. Any negative incident of significance may result in my independent contract being terminated immediately or depending on possible damages to National Sports M.A.P.®, LLC, may result in arbitration and, in a worse case scenario, further on to court in the State of Colorado.

Subject: Last Name, First Name First Aid | CPR | Certification Cards

- I. All injuries and treatments will be recorded and kept by National Sports M.A.P.® in a file onsite. All athletes with injuries referred to or evaluated by a physician, must return to the athletic training staff with written instructions from a physician indicating injury diagnosis, prognosis, treatment plan, rehabilitation prescription and return to play criteria before athlete cleared for full participation as tolerated. In case of an emergency, the athletic trainer will call 911 at the earliest sign of emergency and complete the required First Aid treatment form prior to athlete release. (If possible)
 - a. Please take a photo of the First Aid Treatment form to be recorded.
 - i. Organization Records
 - ii. ATC Records
 - iii. National Sports M.A.P.® records
 - iv. Athlete Records
- II. All evaluations, treatments, and bodywork will be performed within the scope of practice for each athletic practitioner as defined by the independent practitioners Standard Practice of Care and Code of Conduct. The practice should meet the criteria that are outlined in this protocol and if necessary, the athlete shall be referred to an appropriate physician for diagnosis.
- III. Focused care by a certified & licensed athletic trainer shall apply the

following principles, methods, and procedures within the scope of the athletic trainer's practice.

“The practice of the profession of athletic training is defined as the application of principles, methods and procedures for managing athletic injuries, which shall include the preconditioning, conditioning and reconditioning of an individual who has suffered an athletic injury through the use of appropriate preventative and supportive devices, under the supervision of a physician and recognizing illness and

refining to the appropriate medical professional with implementation of treatment pursuant to physician's orders. Athletic training includes instruction to coaches, athletes, parents, medical personnel and communities in the area of care and prevention of athletic injuries.”

Other therapeutic agents include: massage, stretching, cryotherapy among others with the property of water (e.g. whirlpool); electricity (e.g. electrical stimulation, diathermy); light (e.g. infrared, ultraviolet); or sound (e.g. ultrasound) The athletic trainer may apply topical prescription medications (e.g. steroid preparation for phonophoresis or iontophoresis) only at the direction of a physician.

IV. Focused care by a certified & licensed massage therapist shall apply the following principles, methods, and procedures within the scope of the massage therapists' practice.

1. Massage Therapy
2. Muscle Manipulation
3. Stretching & Range of Motion
4. Active Release Technique
5. Cryassage – the use of ice massage on a focused area of injury

V. Focused care by a certified & licensed physical therapist shall apply the following principles, methods, and procedures within the scope of the physical therapist's practice. When available on-site, the athlete has availability to request physical therapists assessments, diagnosis, care, injury prevention & recovery methods.

VI. Focused care by a certified & licensed chiropractor shall apply the following principles, methods, and procedures within the scope of the chiropractor's practice. If available on-site, the athlete has availability to request chiropractic adjustments that are common manipulations for the practitioner to perform.

VII. Focused care by a certified & licensed emergency medical technician shall apply the following principles, methods, and procedures within the scope of the EMT's practice. Within the environment we work in, the EMTs are emergency care services; however, it is imperative if any practitioner sees an emergency situation occur, they take a reasonable and responsible approach to determine the next Standard of Care steps.

E. Refer to an Orthopedic Surgeons

- i. All suspected fractures
- ii. All Grade III injuries (sprains, strains, contusions)
- iii. All Grade II injuries, which include significant impairment of function.
- iv. Any Grade I or II injury that does not respond to traditional athletic training room treatments within a two weeks time.

F. Refer to Emergency Room

- i. Any obvious displaced fracture will be immobilized and, if necessary transported by EMS
- ii. All concussions with loss of consciousness will be transported by EMS using full neck injury precautions
- iii. Abnormal level of consciousness or progressive loss of consciousness

- iv. Obvious swelling or deformity of the cervical spine, Cervical pain or tenderness
- v. Neurological signs and symptoms
- vi. Pain, stiffness, or neurological symptoms with active range of motion

If there is any doubt concerning an injury:

G. Guidelines for Head Injuries

I. The Following symptoms require immediate referral:

- i. Any loss of or diminished level of consciousness
- ii. Athlete with history of a recent concussion
- iii. Post-traumatic amnesia
- iv. Increasing headache
- v. Pupils that are unequal or un-reactive to light
- vi. Uncoordinated or involuntary movement of the eyes
- vii. Signs about the head indicating skull fracture
- viii. Unusual slowing of the heart rate and increasing blood pressure
- ix. A positive sign for any cranial nerve injuries
- x. Seizure or Convulsion

II. The following symptoms may indicate a concussion and the athlete must be removed from play and referred to a physician if they have more than one of these symptoms.

- i. Headache
- ii. Dizziness Nausea / Vomiting
- iv. Amnesia
- v. Blurred or disturbed vision
- vi. Balance problems
- vii. Sensitivity to light
- viii. Sensitivity to noise
- ix. Feeling slowed down
- x. Feeling foggy
- xi. Difficulty concentrating
- xii. Difficulty remembering
- xiii. Fatigue, low energy or drowsiness
- xiv. Emotional, more irritated, sadness, nervous or anxious

III. Symptoms that indicate a concussion AND WHEN the athlete requires immediate emergency attention to be called on, notes must be made on the National Sports M.A.P®, LLC First Aid Treatment (Tx) Form and submitted to our team via email info@nationalsportsmap.com.

H. Guidelines for Dislocations and Fractures

I. All dislocations will be splinted as is and sent to the hospital for reduction by the best means possible as dictated by the situation

II. All dislocations and fractures will be referred to a physician for follow-up care after an emergency room visit.

I. Guidelines for Distribution of Prescription and Non-Prescription Medications (at Youth Sports Game days, Camps & Tournaments)

I. Medication prescribed for campers shall be kept in original containers bearing the pharmacy label, which shows the date the prescription was filled, the pharmacy name and address, the filling pharmacist's initials, the serial number of the prescribed medication, directions for use and cautionary statements, if any, contained in such prescription or required by law, if tablets or capsules, the number of pills in the container and of course the prescribing physician's instructions for administering medication. All over the counter medications for campers shall be kept in their original container with its original label, which shall include directions for use.

II. All medication prescribed for campers will be kept in a locked area and will be administered by the Athletic Trainer.

- i. The athletic trainer will be the only staff member allowed to administer
- ii. medications.
- iii. The athletic trainer will develop a log of all medications received from athletes at camp registration and record date and time each medication is administered. Medication prescribed for athletes that is brought from home shall only be administered if the medication is in its original container, and there is written permission and a consent form signed by the parent/guardian or physician.
- iv. All Medication will be administered as prescribed on prescription label.
- v. When no longer needed, medications shall be returned to a parent or guardian whenever possible. If the medication cannot be returned, it will be destroyed as follows:
- vi. Destruction of prescription medication shall be accomplished by the athletic trainer and witnessed by a second person and recorded in a log maintained by the camp for this purpose. The log shall include the name of the camper, the name of the medication, the quantity of medication destroyed and the date and method of destruction. The athletic trainer and witness shall sign each entry in the medication destruction log.
- vii. The medication log shall be maintained for at least three years following the date of the last entry.



National Sports M.A.P.®, LLC Schedule A

1. EVENT INFORMATION

Always go to nationalsportsmap.com event page for updates on the event. You may e-mail info@nationalsportsmap.com with the Job Code in the Subject Line and we'll get back to you at our earliest convenience (typically within 48 hours).

2. SOCIAL MEDIA

Some events will have an independent Facebook Event page. Others will not.

- A. Facebook.com/natlsportsmap
- B. Twitter.com/natlsportsmap
- C. Instagram.com/natlsportsmap

3. PAYMENT COMPENSATION

These rates are merely projections or estimates. Compensation structure will vary depending on the specific event. This compensation outline is not a guarantee of actual compensation for each practitioner will have notice of the compensation prior to working any event. Look in the event information file on our event calendar for information on the event.

A. Per Diem Daily rates

Per Diem Daily rate varies. (\$50 - \$250/day)

Pay will be identified and communicated prior to each respective event you work.

Depends on amount of time, scheduling, location, number of athletes, etc.

B. Tournaments

Hourly Rate – \$20 - \$25

Days are typically 8 – 9 hr. shifts, sometimes they can go as high as 14 hours/day. You will be compensated based on committed hourly for all hours worked. Always bring snacks, food and water so you can maintain full energy levels as lunch may or may not be included.

C. Payment Processing

Payment will be distributed via hard copy check once all documents are received from the event. This includes the events professional consent form as well as any First Aid Treatment forms that have been completed. Your payment will be made using the below information so please ensure you enter your information neatly and clearly on all documents.

Full name / Phone number / Mailing address / City / State / Zip

4. TYPICAL COSTS FOR INDEPENDENT CONTRACTOR TO INCUR ARE:

- National or State Licenses AND NCSI Background Check Verification (\$58 plus any additional fees)
- If your state does not require Licensure, please select the NCSI Background Check (Education)
- General and Professional Insurance (\$1,000,000 aggregate / \$3,000,000 Total)
- Gasoline, mileage, vehicle maintenance
- Muscle creams and lotions
- Business cards, flyers and signs
- Athletic tape, athletic training tools & supplies, cooler and emergency supplies
- Sports medicine table, massage table, practitioner table
- Website registration (not applicable)

5. PRACTITIONER NOTES

Professional Presentation: Please present yourself professionally and wear attire suitable to work any sports event. Khaki pants/shorts or professional athletic pants with blue polo, tennis shoes are acceptable for on-site work at the sports medicine tent. For EMT's and Paramedics, your standard work outfit consisting of blue cargo pants, navy shirt and hard toe boots will work great. To All: If you feel a modification is necessary, especially when weather is a factor in wardrobe selection, please use your best judgment.

A. Sports Massage Therapist:

- Licensed and/or Certified (depending on state requirements) Massage Therapists
- Work with us at local races and sports events
- Current First Aid, CPR, AED Certificates
- Hold General and Professional Liability Insurance in the amount of \$1,000,000 aggregate / \$3,000,000 Total
- There may be volunteer events to work throughout the year. If you are interested, there will be swag for your service. Student Massage Therapists may be used at some events among professionals.
- Interested in working in an active, TEAM environment. Great customer service.
- Send in your client sign-in sheet and any First Aid Treatment Forms your team completed when submitting the project completion paperwork. We will store this information for our statistical records.
- Days are typically 8 – 10 hours. Lunch may or may not be included. Always bring snacks and water so you can maintain full energy levels. Information will be included in the Event job description prior to the confirmation of working each event as to what will or will not be provided.

Experience with athletic training, coaching, high-level athlete, occupational therapist, neuromuscular, or deep tissue therapy, Active Release Technique (A.R.T.), Muscle Activation Technique (M.A.T.), Reiki Massage, and/or Trigger Point Therapy and Range of Motion.

If you work 2 hours straight, take a well deserved 5 – 10 minute break.

B. Certified Athletic Trainer

- Licensed and/or Certified, depending on state requirements, Athletic Trainers
- Current First Aid, CPR, AED Certificates
- Hold General and Professional Liability Insurance in the amount of \$1,000,000 aggregate / \$3,000,000 Total
- Share knowledge, enjoy working with athletes, create relationships
- Bring your supply kit for ease, some supplies may be provided
- Be a team member of the event staff, not just a sideline reporter on the cell phone.
- Communication and Professionalism are our top priority.
- Send in your client sign-in sheet and any First Aid Treatment Forms your team completed when submitting the project completion paperwork. We will store this information for our statistical records.
- Days are typically 8 – 10 hours. Lunch may or may not be included. Always bring snacks and water so you can maintain full energy levels. Information will be included in the event job description prior to the confirmation of working each event as to what will or will not be provided.

C. Licensed Physical Therapists

- Licensed Physical Therapists seeking business opportunities
- Current First Aid, CPR, AED Certificates
- Hold General and Professional Liability Insurance in the amount of \$1,000,000 aggregate / \$3,000,000 Total
- PT/PT Assistant is a valid substitute for an Athletic Trainer at some events. It is required that you are aware of athletic conditions and common injuries in sport. We expect the PT to provide the same high skill level of training as we do the ATC.
- Days are typically 8 – 10 hours. Lunch may or may not be included. Always bring snacks and water so you can maintain full energy levels. Information will be included in the event job description prior to the confirmation of working each event as to what will or will not be provided.

D. Licensed Certified Chiropractor Sports Practitioners

- Licensed Chiropractors
- Current First Aid, CPR, AED Certificates
- Hold General and Professional Liability Insurance in the amount of \$1,000,000 aggregate / \$3,000,000 Total
- Chiropractors are a unique component to sport events.
- Days are typically 8 – 10 hours. Lunch may or may not be included. Always bring snacks and water so you can maintain full energy levels. Information will be included in the event job description prior to the confirmation of working each event as to what will or will not be provided.

E. Emergency Medical Technician or Paramedic

Emergency Medical Technicians and Paramedics should always be aware of their surroundings and willing to maneuver around the facility easily with a quick manner. Depending on the event, an Emergency Medical vehicle may be provided. This will be determined before the event. If no Emergency vehicle is present, it is the EMT’s responsibility to only provide on field/sideline emergency care.

- Days are typically 8 - 10 hours. Lunch may or may not be included. Always bring snacks and water so you can maintain full energy levels. Information will be included in the event job description prior to the confirmation of working each event as to what will or will not be provided.
- Recommendations should be made to the clients for hospital/emergency care as needed. Post event write-up on National Sports M.A.P.® First Aid Treatment Form must be completed and sent to National Sports M.A.P.® with project completion documents for record on injury statistics.

It is recommended that any EMT providing event medical standby services have the following:

State, City, or County EMT Certificate	NREM & Certificate
Current & Valid Driver’s License	Current First Aid, CPR, AED Certificates
General and Professional Liability Insurance	Hold

Circle one from the list: MT | ATC | PT | Sports Chiropractor (CCSP) | EMT | Paramedic

I (Print Name) _____, in respect to National Sports M.A.P.®, LLC, Standard Operating Procedures, Schedule A, and as a sports medicine practitioner also known as a healthcare professional working in my local community, I hereby agree to the roles and responsibilities set forth by National Sports Massage & Athletic Practitioners®, LLC.

Standing Orders

As principal director of National Sports Massage & Athletic Practitioners®, LLC, I agree to provide all massage & athletic practitioners working with National Sports M.A.P.®, LLC, these standing orders to read before being permitted to consult with or treat any athletes. This standing order expires two years from the date of signature upon receipt of background check approval from NCSI.

As principal director of National Sports Massage & Athletic Practitioners®, LLC, I authorize certified & licensed massage and athletic practitioners, hereby known as healthcare professionals, to provide services for active participants, spectators and organization members at the events in accordance with the Standard Operating Procedures and protocols that follow of the practitioner Standard Scope of Practice and the established standing order expires two years from the date of signature upon receipt of background check approval from NCSI.

Company Representative Signature

___04___/___02___/2018
DATE

Practitioners Signature

___/___/2018
DATE

