

Event Medical Service Plan Amgen Tour of California

Overview

Professional cyclists, while able to exert themselves in extremes of weather and terrain, also need special care and treatment. In a multi-day stage race it is critical that athletes receive appropriate treatment from medical professionals in order to remain competitive. In addition, the race medical team is able to provide emergency response to accidents on the race course.

The Medical Provider oversees medical services for the race entourage. Services rendered include:

- Coordination of all race medical staff (physicians, trainers, EMTs, etc.)
- Coordination with all local EMS agencies and local hospitals
- Contact point for all race staff with medical issues

The Medical Provider for the Amgen Tour of California is the Santa Monica Orthopaedic Group with ambulance services provided by American Medical Response (AMR).

Areas of Responsibility

Medical Suite

Based at the Headquarters hotel each night. This suite provides all types of care to athletes and entourage. Examples include: wound care, massage therapy, physical therapy and general medical services.

The medical suite is generally staffed for several hours after the arrival of athletes. After this time a member of the medical staff remains “on call” for other athlete needs.

The medical suite is utilized by athletes for a variety of medical needs. This is especially important for those teams without a team physician. In some cases the medical suite may also serve to support team physicians.

In some cases the suite will be a standalone suite while in other it will be in a room attached to the hotel room of the Chief Medical Officer.

Caravan Medical

Provides medical service in the race caravan. Vehicles and staff include:

- Race Doctor in dedicated car
- Medical Motorcycle with medic or ATC
- Medical Sag vehicle with ATC

Ambulance

Services are concentrated on emergency medical services (Race Doctor, Medical Motorcycle, Ambulances) as well as preventive medical issues (Medical Sag Vehicle).

Athletes sometime receive treatment out of the Race Doctor's car for conditions such as bee stings, upset stomach or recurring injuries. This treatment is often accomplished "on the go" in the race caravan.

In the case of a severe accident the Race Doctor works with the race EMS crews to provide treatment and/or arrange transport.

Caravan Medical units also coordinate with local EMS jurisdictions to provide additional support and response.

Start/Finish Line Medical

Based at race finish, these staff members provide immediate care to athletes and staff before, during and after the race finish. Examples of treatments include: athlete hydration, wound care, follow up on previous treatment.

The staff at the finish line will often treat injuries that athletes received during the race but were not severe to cause the athlete to drop out. Examples include "road rash" from crashes or exposure to extreme weather conditions.

The finish line medical staff will send more serious cases to the medical suite after initial treatment.

Staffing

Number of Physicians

Minimum two physicians. One in caravan and one with medical suite.

Ambulances

One in caravan
Support from local EMS for transports if required
Medical SAG

Number of Trainers

4 trainers with 2 support staff

Operations

Response during Race

First response during the race will be from the Race Doctor, who will stop with any crashes and do an assessment. During the time the caravan passes the doctor will make an assessment on a method of treatment and will alert the race ambulance if it needs to remain on site to assist. Actions that might be taken include the following:

1. Rider needs advanced treatment: The race doctor and ambulance begin treatment immediately and notify the Command Post that a transport will be needed. The local ambulance crew is given an ingress point to the field of play.

If a neutralization or stoppage of the race needs to take place it is coordinated through the Race Doctor and Technical Director and communicated to the race officials and Command Post.

2. Rider needs minor treatment but cannot continue: The Race Doctor leaves the athletes in the care of the medical sag vehicles. The rider will be transported back to the finish line medical area in the sag or broom vehicle.

Communications

The race medical staff will communicate on the inter-race UHF radio system on all stages. Primary frequency will be the *Medical* simplex frequency with a backup on the *Caravan* repeater frequency in case of a large split in the field.

All announcements to teams will be coordinated through Race Command to *the Radio Tour* frequency.

Each medical asset will be provided with mobile and portable radios as well as a satellite phone.

Coordination with local agencies will be through the *Caravan* frequency to the race representative in the Command Post.

Command Structure

The Race Doctor will make all medical decisions for the race staff and entourage in coordination with the Race Director and Technical Director.

Coordination of caravan assets will be coordinated through Race Command and the Technical Director when on the road.

Communication with local agencies (Police, Fire, EMS, Public Works) will take place through the race representative in the Race Command Post.

In the case of a Public Safety type emergency on course (fire, 911 response, robbery, etc.) the appropriate public safety agency in the Command Post will advise race staff on what action is to be taken through the race representative.