

Guidelines for Chirurgeon-Marshall in Training Exchange

Introduction:

The purpose of chirurgeon-marshall exchanges is to improve injury prevention and injury care in martial activities through teamwork between marshals and chirurgeons. The training, duties and structure of the marshallate and the chirurgeonate need to be appreciated by both sides.

I. Who should be trained?

- a. All MITs (from any martial specialty)
- b. EXCEPT MITs who are also warranted or apprentice chirurgeons

II. Who should do the training

- a. Warranted chirurgeons only

III. Where the training should take place:

- a. official practice
- b. event
- c. can be one on one, or as part of a pre-arranged class
- d. As there are more MITs than chirurgeons, may need to work with 2-3 MITs at a time
- e. If this is not easily arranged due to lack of chirurgeon accessibility, can ask for exemption to do outside of an SCA official activity. This will be handled on a case-by-case basis and must be approved by the Kingdom Chirurgeon.

IV. Topics to be covered

A. Qualifications and training

1. Review of the chirurgeon's standard level of training--what is meant by "first aid"
2. Include that some chirurgeons have higher level of training, but are acting on their own when they exceed first aid
3. Review apprenticeship process

B. Chirurgeonate chain of command

1. Group chirurgeons are not part of the chain of command, unlike in marshallate
2. Review chain of command in the chirurgeonate, how to handle a disagreement with chirurgeon about a situation, where to send paperwork if communication needed about an incident
3. Marshal to make sure that if there's an issue, that person was actually a chirurgeon, document that person's name and details of any problems

C. Combat injuries on the field: chirurgeon and marshal roles

1. Chirurgeon's should be VERY familiar with Section III.10 "Combat Injuries" of the SCA Chirurgeon's Handbook. Review with MIT
2. Review how to bring chirurgeon onto the field
3. What information chirurgeon may need from fighter, marshal to assess and treat injury
4. Review what we cannot do: treat a conscious fighter without permission, "pull" a fighter without Marshal's agreement, etc.
5. Review policy on over the counter medications--ok to ask chirurgeon if they have them

6. Review marshal's job: appropriate hold, crowd control/safety, assist getting surgeon and fighter safely off field if needed, contact EMS if needed
7. Assist or delegate someone to assist with armor removal, etc.
8. Deciding whether the fighter may return to combat, respecting the advice of the surgeon. Needs to consider whether fighter in any condition to make that decision for himself, presents a danger to self and especially others.
 - a. Not "all or nothing" decision—can put conditions on how fighter returns to play (tape fingers, fight left handed, wait 15 minutes, etc.). Ask surgeon for help with this.
9. Follow-up of injury—marshal as voice of authority to encourage fighter to see doctor, follow up with surgeon later, inform any necessary others (other marshals, fighter's significant other, household, knight, etc. if indicated). Respect the surgeon's recommendations.

Strongly encourage role-playing or verbal scenarios (can recruit fighters, others to help) to walk through the process

D. Paperwork

1. Marshal in Charge (MIC) needs to know of injury for event report
2. Surgeon will file report to Surgeon in Charge (SiC) for event report
3. If fighter sent to ER (need not be an ambulance), SiC must know immediately and Kingdom Surgeon within 24 hours.
4. Combat-related injury without surgeon assistance: need basic information on injury to SiC for injury tracking purposes. Need not have fighter's name or other identifying information, just what kind of injury and how it happened. If the e: MIC needs the fighter's name, this is OK to give out per SCA privacy policies.
5. If surgeon treats any (above ice/bandaid) martial-related injury (treatment may not happen on the field), surgeon will have paperwork on it.

E. Youth (Minors)

1. Medical waiver needed for surgeon to treat minors--recommend one on file from all parents/guardians if possible
2. Treatment of minor always requires surgeon report within 24 hours

F. When a surgeon isn't available

1. MIC responsible for handling injuries on field in the absence of a surgeon
2. MIC injury plan: phone number and directions to nearest hospital, availability of phone to contact EMS, first aid kit at field--at least ice pack and bandaids
3. Remember to notify autocrat and forward injury report to KC
4. Hand out and review concussion guideline card (archery and thrown weapons MIT's may not need)

G. Preventing injuries

1. Consult surgeons to get help/ advice in keeping conditions safe—(heat, water, ground, help keep injured fighters from getting re-injured).

2. Advise CiC at event if conditions increase risk of specific injuries (heat, ground, insects), or if there are fighters known to have specific medical needs on field (severe asthma, diabetes, etc) with the fighter's permission
2. Heat injuries--give out heat injury card, adjusting or canceling I might reverse it and put 'adjusting or canceling' because someone may see 'cancel' and freak out before they've read the rest of the sentence martial activities for conditions
3. Adequate water at field, waterbearers if needed
4. Survey field conditions: insects, trees, divots, excessive mud, etc.
5. Look out for overuse injuries in your martial activity (e.g. 'tennis elbow', etc., etc.)

H. Privacy issues

1. Chirurgeon should be VERY familiar with SCA privacy policy, Section III.7 in SCA Chirurgeon Handbook. Review with MIT
2. Privileged information may be shared with other Chirurgeons and medical personnel directly involved in the person's treatment.
3. If a person seeks aid from a chirurgeon (unknown to the marshallate), privileged information may be shared with the Marshallate if it is deemed that sharing details of the accident, illness, or injury could prevent similar incidents and/or injuries, or to prevent possible further injury to the person who has been treated. Chirurgeon has responsibility to inform the Marshallate under these circumstances
4. Marshals can ask chirurgeons about the injury/condition of fighter, but may not be given information unless it meets the conditions of #3 above or fighter gives permission for the information to be shared.
5. Information shared on a need-to-know basis should be kept to the minimum necessary for the purpose.
6. This policy does not cover information that is considered public knowledge--information was witnessed by the population at large, not gained from a privileged first-responder/ treated person relationship

I. Good ways for marshals (and fighters) to communicate with chirurgeons

1. We're not adversaries, we're a team trying to keep the fighting and fighters fun and safe.
2. Communicate your needs and concerns in clear terms and a calm voice.
Example: "Lord Smythe can hold his shield if we buddy tape the fingers." Rather than, "Of course he can still fight!"
3. Mutual respect