

CENTRAL CONNECTICUT STATE UNIVERSITY  
SPORTS MEDICINE SYMPOSIUM



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**DISCLAIMER**

*NO FINANCIAL AFFILIATION WITH THIS  
CONFERENCE*

*NO OFF-LABEL USE OF ANY DEVICE OR PRODUCT*

*NO CONFLICT OF INTEREST WITH ANY GROUP*

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**OBJECTIVES**

GAIN INSIGHT INTO...

- COMPLEXITIES OF EVENT MANAGEMENT
- IDENTIFY ACTION PLAN
- ACCESS CURRENT BEST PRACTICE PRINCIPLES
- APPLY CONCEPTS TO REAL-TIME INJURY PROFILES
- IDENTIFY FOCUS POINTS
- ENHANCE UNDERSTANDING OF PERSONAL CAPABILITIES

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# PREPARING FOR ORTHOPEDIC EMERGENCIES ...AND BEYOND

ROBERT S. WASKOWITZ, MD  
ORTHOPEDIC ASSOCIATES OF HARTFORD  
ORTHOPEDIC SURGERY & SPORTS MEDICINE

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## PERSONALITY OF THE EMERGENCY

### INDIVIDUAL

- UNIQUE CHARACTERISTICS SPECIFIC TO
  - SPORTING EVENT
  - UNIQUE VENUE
  - LEVEL OF DIFFICULTY
  - ATHLETE

### COLLECTIVE

- COMMON THEMES
  - INJURY OCCURRENCE
  - RESPONSE
  - TIME MANAGEMENT
  - OUTCOME

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## SIGNIFICANCE

### PEEWEE & WEEKEND WARRIOR



### COLLEGIATE & PROFESSIONAL



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ALL SHAPES & SIZES



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IN PREPARATION FOR BATTLE...

THINK

- ALL SCENARIOS
- ALL OPTIONS
- ALL CONTINGENCIES

"ROLL THE BALL OUT AND PLAY"



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PREPARATION IS THE KEY TO SUCCESS



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PREPARATION

SEVERAL OPTIONS

- IGNORANCE  
CROSS YOUR FINGERS
- REACTION  
EVENT HAS ALREADY HAPPENED
- PROACTION  
SET UP FOR SUCCESS



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EMERGENCY ACTION PLAN (EAP)

SOLE PURPOSE OF THE EAP

**ABILITY TO PROVIDE EFFECTIVE MANAGEMENT OF AN EMERGENT EVENT**

- COORDINATED COMMUNICATION THROUGH CHAIN OF COMMAND
- EFFICIENCY NOT REDUNDANCY
- APPROPRIATE HANDLING OF SITUATION TO MAXIMIZE POSITIVE OUTCOME
- CONTROL WHAT IS CONTROLLABLE THEN ADVANCE UP THE CHAIN *(TRANSPORT)*

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EAP

RULES & REGULATIONS

- OSHA STANDARDS
  - UNITED STATES DEPARTMENT OF LABOR
  - [29 CFR 1910.38\(a\)](#)
- EAP TEMPLATE
  - <https://www.cdc.gov/nceh/docs/2004-101/EMRGACT/EMRGACT.PDF>
- NATA FOR SPORTING EVENT
  - <https://www.nata.org/sites/default/files/winter-emergency-action-plan.pdf>

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EAP  
POSITION STATEMENT

- BEST PRACTICE
- EVIDENCE-BASED RECOMMENDATIONS
  - IOC
  - PROFESSIONAL SPORTS
  - NCAA
  - NATA
  - NFHS
- ANDERSEN J, COURSON RW, KLEINER DM, MCLODA TA. NATIONAL ATHLETIC TRAINERS' ASSOCIATION POSITION STATEMENT: EMERGENCY PLANNING IN ATHLETICS. J ATHL TRAIN. 2002;27(1):99-104.

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POSITION STATEMENT

JOURNAL OF Athletic Training 2002;27(1):99-104 © 2019 National Athletic Trainers' Association, Inc. www.nata.org  
National Athletic Trainers' Association Position Statement: Emergency Planning in Athletics, J. Andersen, R.W. Courson, D.M. Kleiner, T.A. McLoda  
Andersen, J., Courson, R.W., Kleiner, D.M., McLoda, T.A. National Athletic Trainers' Association. 2002. 27(1):99-104.  
Journal of Athletic Training 2002;27(1):99-104 © 2019 National Athletic Trainers' Association, Inc. www.nata.org  
National Athletic Trainers' Association Position Statement: Emergency Planning in Athletics, J. Andersen, R.W. Courson, D.M. Kleiner, T.A. McLoda  
Andersen, J., Courson, R.W., Kleiner, D.M., McLoda, T.A. National Athletic Trainers' Association. 2002. 27(1):99-104.

- "THE NATIONAL ATHLETIC TRAINERS' ASSOCIATION RECOMMENDS THAT EACH ORGANIZATION OR INSTITUTION THAT SPONSORS ATHLETIC ACTIVITIES OR EVENTS DEVELOP AND IMPLEMENT A WRITTEN EMERGENCY PLAN."

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EAP  
COMPLEX COMPONENTS TO THE PUZZLE

- EMERGENCY PERSONNEL
- EMERGENCY EQUIPMENT
- ANCILLARY SUPPORT
- INTANGIBLES
  - WEATHER
  - FIRE
  - THREAT
    - HUMAN BEHAVIOR
  - NATURAL DISASTER
- VENUE LOGISTICS
- COMMUNICATION TECHNOLOGY

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EAP  
EMERGENCY PERSONNEL

- MEDICAL TEAM
  - LEAD: SITUATION SPECIFIC
    - MEDICAL DIRECTOR
    - TEAM PHYSICIAN
    - ATC
    - COACH
    - FIRST RESPONDER
  - TEAM REQUIREMENTS/ABILITIES
    - CPR CERTIFICATION
    - AUTOMATED EXTERNAL DEFIBRILLATOR (AED)
    - PREVENTION OF DISEASE TRANSMISSION
      - CONTAINMENT

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EAP  
ANCILLARY SUPPORT

- ASSISTANT(S)
  - DESIGNEE
    - MD, ATC, PT
    - COACH/PARENT
    - TEAMMATE
    - BYSTANDER
  - DELEGATE ROLES
- EMERGENCY MEDICAL SYSTEM EMS
  - AMBULANCE AND TRAINED PERSONNEL
    - ON-SITE
    - 911

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EAP  
VENUE LOGISTICS

- SITE LOCATION
  - STADIUM
  - CAMPUS
  - HOME VS. AWAY
  - FIELD
- SITE SPECIFIC
  - INGRESS/EGRESS ACCESS POINTS
    - LINE OF SIGHT
    - CHANGING PATTERNS
    - ATHLETE ACCESS
    - SPECTATOR ACCESS

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EAP  
COMMUNICATION TECHNOLOGY

- VOICE
- VISUAL SIGNAL
- RADIO
  - EMBEDDED MEDICAL CHANNEL
- CELL PHONE
  - BATTERY
- PUBLIC ADDRESS SYSTEM

- COMMUNICATION TREE
  - ASCENDING LIMB
    - INFORM THOSE WHO NEED TO KNOW
  - DESCENDING LIMB
    - "ALL HANDS ON DECK"



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EAP  
EMERGENCY EQUIPMENT

- VARIATIONS ON A THEME: CONTROL & STABILIZE
  - MD TRAVEL KIT
  - ATC TRAINER KIT
  - FIRST AID KIT (PREPACKAGED)
- FAMILIARITY WITH DEVICES
  - AED, BACKBOARD, CERVICAL COLLAR, SPLINTS
- EMS AMBULANCE
  - BLS (BASIC LIFE SUPPORT)
    - 2 EMTs
    - NONINVASIVE
  - ALS (ADVANCE LIFE SUPPORT)
    - EMT & PARAMEDIC
      - INVASIVE
      - AIRWAY & CARE/AC MANAGEMENT

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EAP  
EMERGENCY PROTOCOLS

- CERVICAL SPINE
- LOC
- CONCUSSION
- BLUNT TRAUMA
- FRACTURE/DISLOCATION
- HEAT STROKE/HYPOTHERMIA
- EQUIPMENT REMOVAL

- CONSISTENCY IN APPROACH
- VARIABLE INTERPRETATION
- PROTOCOLS EVOLVE TO MAXIMIZE BEST PRACTICE
- OPTIMIZE OUTCOME

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EAP  
INTANGIBLES

- WEATHER
  - LOCAL & REGIONAL FORECAST
  - LIGHTNING WARNING SYSTEM
  - SHELTER
- FIRE
  - EVACUATION
  - AUTHORITY NOTIFICATION
- THREAT
  - HUMAN BEHAVIOR
    - PLAYER
    - SPECTATOR
    - INTRUDER
    - TERRORIST/ACT
  - NATURAL DISASTER
  - BOMB

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EAP  
DEMOGRAPHICS & MAPS

- KNOW WHERE YOU ARE
  - PRIMARY, SECONDARY & TERTIARY ROUTES
  - BLOCKED ROADS/DETOURS
  - SCHEDULED CONSTRUCTION
  - BACKROADS
- KNOW WHERE TO GO
  - PROVIDE PAPER/ELECTRONIC MAPS TO DESTINATION (HOSPITAL, EMERGENCY FACILITY, TRANSPORTATION TERMINALS)
    - FAMILY/FRIEND/DESIGNEE
    - ACCOMPANYING PERSON
    - TEAM/TEAMMATE

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EAP  
DEMOGRAPHICS & MAPS

- CONTACT SHEET
  - COVERING PERSONNEL
  - EMERGENCY MEDICAL FACILITIES
- MEDICAL EQUIPMENT
  - ON-SITE AVAILABILITY
  - SPECIFIC LOCATION ON VENUE

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EAP  
NON-MEDICAL SITUATIONS

- WEATHER
  - OUT OF YOUR CONTROL — MAYBE
    - HEAT INDEX, LIGHTNING
    - FIELD TEMPERATURE MONITOR
  - WET BILLBOARDINGS
  - AMBIENT FACTORS
    - WIND CHILL & WIND FOG, RADAR/HEAT
    - HMO/HYPERTHERMIA
- HUMAN ELEMENT
  - THREATS, DISASTER, TERRORISM
  - ON-SITE POLICE PRESENCE
  - LOCAL MUNICIPALITIES
  - SECURITY: UNDERCOVER OR PRIVACY/IDENTITY

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EAP  
TEST THE SYSTEM

- DRY-RUN [SCENARIOS]
  - ENABLES (VIRTUAL) INVOLVEMENT OF ROLE-SPECIFIC POSITIONS
  - IDENTIFIES FAILURE POINTS, WEAKNESSES & STRENGTHS
  - FAMILIARITY BREEDS CONFIDENCE

"NOT MY FIRST RODEO..."
- CHALLENGE EVENTS
  - CLASSROOM
  - ON-SITE CASES PRESENTED TO PARTICIPANTS
  - AUSTERE CONDITIONS
    - LOCALE
    - TIME OF DAY
    - TEMPERATURE
    - WEATHER

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EVENT PREPARATION  
TREAT EACH EVENT AS AN AWAY GAME

- PERSONAL CHECKLIST
  - TIME & LOCATION
    - "IF YOU'RE NOT EARLY, YOU'RE LATE"
  - CHARGED CELL PHONE
  - FOUL WEATHER GEAR
  - TOOLS OF THE TRADE
    - WHAT MAKES YOU COMFORTABLE
- EVENT CHECKLIST
  - MEDICAL TEAM
    - PRESENT Huddle
    - WHO IS DOING WHAT
    - COMMUNICATION
    - FIELD/VENUE POSITIONING



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### PERSONAL PREPARATION

#### TOOLS OF THE TRADE

• "POOR CARPENTERS BLAME THEIR TOOLS"

- EFFECTIVE SCISSORS
- PLIERS (NEEDLENOSE)
- SHARP BLADE
- WIRE/BELT CUTTER

#### MEDICAL KIT

• EFFECTIVE EQUIPMENT THAT WILL:

- SUPPORT/ASSIST AIRWAY
- CONTROL BLEEDING
- PROTECT EXTREMITY
- STABILIZE FOR TRANSPORT

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### EQUIPMENT

• MULTI TOOL



*Carry what you're comfortable with...but carry something*

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### MEDICAL KIT

"WHAT'S IN MY BAG"



*Personal communication, Dr Tom Hackett, International Extreme Sports Medicine Congress, 2015*

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PREPARATION

COMPLEX PERSPECTIVE

- CONTROL
- STABILIZE
- TRANSPORT



IOC Geneva Switzerland, 2015

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KNOW YOUR "TEAM"

DELEGATE & ASSIGN

- STRATEGIC DEPLOYMENT OF PERSONNEL AT APPROPRIATE POSITIONS
  - SUPPORT
  - BACK-UP
- SHIFT ASSIGNMENT
- ROTATIONS
- NUTRITIONAL SUPPORT
- MENTAL SUPPORT
- PHYSICAL SUPPORT



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KNOW YOUR "PLAYERS"

OPPORTUNITY

- ESTABLISHING A RELATIONSHIP IS TRICKY
  - CONFIDENCE
  - FAMILIARITY
  - TRUST
  - TRENDS



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KNOW "YOURSELF"

NECESSITY

- COMFORT LEVEL
- ABILITY
- LIMITATIONS



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WHEN "IT" HAPPENS

PROTECT YOURSELF      PROTECT YOUR ATHLETE

- COMMUNICATE
  - "RESPONDING ON..."
  - "COURSE ON HOLD"
  - "COURSE IS HOT"
    - LOCATION
    - ACCESS
    - EGRESS
- ROLES
  - "I'VE GOT HEAD"
  - "I'VE GOT EVAL"
    - PREDETERMINED

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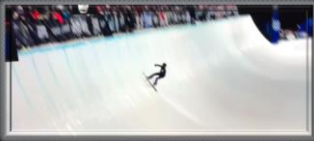
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INJURIES HAPPEN



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### INJURY EVALUATION

<h4>LIFE-THREATENING</h4> <ul style="list-style-type: none"><li>• AIRWAY</li><li>• BREATHING</li><li>• CIRCULATION</li><li>• DISABILITY</li><li>• EXPOSURE</li></ul>	<h4>MECHANISM OF INJURY</h4> <ul style="list-style-type: none"><li>• LOSS OF CONSCIOUSNESS LOC</li><li>• HEAD INJURY<ul style="list-style-type: none"><li>• CALL IT WHAT YOU WANT....<ul style="list-style-type: none"><li>• TRAUMATIC BRAIN INJURY/TBI</li><li>• REPETITIVE PRECONCIOUSIVE EVENT</li><li>• TARGETING</li></ul></li></ul></li><li>• EXTREMITY<ul style="list-style-type: none"><li>• DIRECT CONTACT, TWIST, ROTATION</li></ul></li></ul>
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### INJURY EVALUATION

#### CERVICAL SPINE

- ALWAYS ASSUME....
- TO BOARD OR NOT TO BOARD...
- EQUIPMENT RETENTION OR REMOVAL...



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### CERVICAL SPINE

#### POSITION STATEMENT

- CLEAR CUT OUTLINE OF POTENTIAL CATASTROPHIC INJURY PROTOCOLS
  - REGION SPECIFIC
  - SPORT SPECIFIC
  - RECOMMENDATIONS FOR BEST-PRACTICE

[J. AOLS, 1982, 2009 MAY; JGIM: 44\(3\): 306-331.](#)  
NATIONAL ATHLETIC TRAINERS' ASSOCIATION POSITION STATEMENT: ACUTE MANAGEMENT OF THE CERVICAL SPINE—INJURED ATHLETE  
[ERIK E SWARTZ, PhD ATC,<sup>1</sup> BARRY P. BODEN, MD,<sup>2</sup> RONALD W. FUCHSBERG, ATC PT NREMT-1, CSCS,<sup>3</sup> LAURA C. MARSHALL, ATC,<sup>4</sup> MIKAL BELT-HANSEN, PhD,<sup>5</sup> ATC,<sup>6</sup> SIVAN A. NORDIN, PhD ATC,<sup>7</sup> ROSS S. REHBERG, PhD ATC CSCS NREMT, AND KEVIN N. WANNIGER, MD, MSTAAPP, FACSM<sup>8</sup>](#)

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### SPINE BOARDS

- "SPINAL IMMOBILIZATION IS NOW AN INTEGRAL PART OF PREHOSPITAL MANAGEMENT AND IS ADVOCATED FOR ALL PATIENTS WITH POTENTIAL SPINAL INJURY AFTER TRAUMA BY EMS PROGRAMS NATIONWIDE AND BY THE AMERICAN COLLEGE OF SURGEONS."
- *THEODORE N. HADLEY M. AARABI B. ET AL. PREHOSPITAL CERVICAL SPINAL IMMOBILIZATION AFTER TRAUMA. NEUROSURGERY. 2013;72 (SUPPL 2):22-34.*




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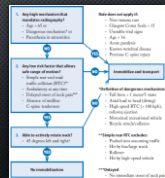
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### SPINE BOARDS

- *JOURNAL OF EMERGENCY MEDICAL SERVICES*  
**An Evidence Review of Prehospital Spinal Immobilization**  
 Traditional stabilization methods are overused, 2015  
 By *Michael Frouf, BSc(ParaSci), Nathan Puckendge, MParaSci(CritCare), BSc(ParaSci)*




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### SPINE BOARDS

- "NEW GUIDELINES SUGGEST A MORE LIMITED ROLE FOR PREHOSPITAL SPINAL IMMOBILIZATION BASED ON INCREASING EVIDENCE THAT THE PRACTICE OFTEN IS NOT ONLY UNNECESSARY, BUT POSSIBLY HARMFUL."
- **CLINICAL REVIEW**  
**THE CHANGING STANDARD OF CARE FOR SPINAL IMMOBILIZATION**  
*EMERGENCY MEDICINE*, 2016 APRIL;48(4):152-157  
 AUTHOR(S): *JAMES R. MYER, MD DEBRA G. FERINA, MD*

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## INJURY EVALUATION

### HEAD INJURY

- KNOW THE SIGNS & SYMPTOMS
  - ANY LOC
  - HEADACHE, NAUSEA, DIZZINESS, PHOTOPHOBIA, SPEECH PATTERNS, GAIT DISTURBANCE, PROGRESSIVE MENTAL STATUS CHANGES
  - SUSPICION WITH HIGH-ENERGY IMPACT
- TESTING (TOOLBOX)
  - SAC
  - SCAT5
  - KING-DEVICK
  - SIDELINE EVALUATION
    - SCOUTS "BLUE TENT"
  - LOCKER ROOM EVALUATION

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## SCAT 5

### CONCUSSION ASSESSMENT

- NEUROPSYCHOLOGICAL TEST
- IMMEDIATE ON-FIELD TEST FOR CONCUSSIVE SYMPTOMS



[Bj. J Sports Med. 2017; Jun;51\(11\):848-859. doi: 10.1177/10834269177097208. Epub 2017 Apr 26.](#)  
**The Sport Concussion Assessment Tool 5th Edition (SCAT5): BACKGROUND AND RATIONALE**  
[Bjorkstrand G, McCrory P, Murray W, et al. Br J Sports Med. 2017; Jun;51\(11\):848-859. doi: 10.1177/10834269177097208. Epub 2017 Apr 26.](#)

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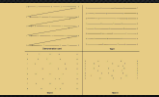
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## KING-DEVICK (K-D) TEST

### EYE MOVEMENT, RAPID NUMBER-NAMING

- THE K-D TEST IS BASED ON THE DETECTION OF IMPAIRED EYE MOVEMENTS AND SACCADES, A FINDING THAT INDICATES SUBOPTIMAL BRAIN FUNCTION



**THE KING-DEVICK TEST OF RAPID NUMBER NAMING FOR CONCUSSION DETECTION: META-ANALYSIS AND SYSTEMATIC REVIEW OF THE LITERATURE**  
[Gharibnia SM, Jaffe M, Jovanic DE, Vanwan BE, Gharibnia S, Balcer LJ. Concussion 2016; 1\(2\): 39-46. 2015.](#)  
**King-Devick Test Identifies Real-time Concussion and Asymptomatic Concussion in Youth Athletes**  
[Dziewan PS, Leung D, Tappin L, Stirling A, J, Galletta SL, Balcer LJ, O'Neill JL, Nasser JR, Hester-Singer ER, Vargas BS, Doolick D. Head Clin Pract 2017; 7\(6\):464-73. December 2017.](#)

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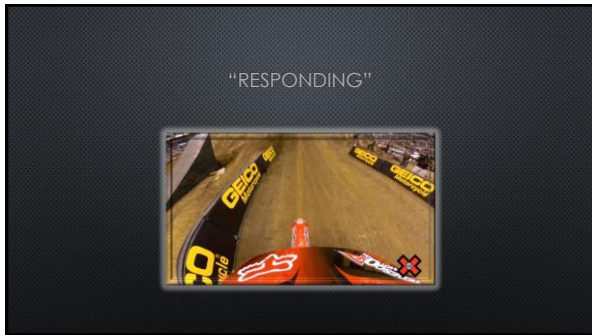
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### CHEST INJURY

<h4>CARDIAC</h4> <ul style="list-style-type: none"><li>• AORTIC ROOT AVULSION</li><li>• PERICARDIAL EFFUSION</li><li>• CARDIAC TAMPONADE</li></ul>	<h4>FLAIL CHEST</h4> <ul style="list-style-type: none"><li>• MULTIPLE RIB FRACTURES WITH ASSOCIATED ASYMMETRIC CHEST WALL MOVEMENT<ul style="list-style-type: none"><li>• PUNCTURE WOUND(S)</li></ul></li><li>• RX: RE-INFLATE LUNG, STABILIZE LUNG FIELD<ul style="list-style-type: none"><li>• CHEST TUBE</li><li>• ? ORIF</li></ul></li></ul>
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### CHEST INJURY

<h4>PULMONARY CONTUSION</h4> <ul style="list-style-type: none"><li>• INTRA-PARENCHYMAL BLEEDING<ul style="list-style-type: none"><li>• PAIN, DIFFICULTY BREATHING, HEMOPTYSIS</li></ul></li><li>• RX: OXYGEN SUPPORT<ul style="list-style-type: none"><li>• MONITOR</li><li>• ? PNEUMONIA</li></ul></li></ul>	<h4>PNEUMOTHORAX</h4> <ul style="list-style-type: none"><li>• VIOLATE PRESSURE GRADIENT WITH INABILITY TO RE-INFLATE LUNG<ul style="list-style-type: none"><li>• PAIN, SOB, PERFUSION COMPROMISE</li></ul></li><li>• RX: RE-INFLATE LUNG<ul style="list-style-type: none"><li>• CHEST TUBE</li></ul></li></ul>
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SOFT TISSUE INJURY

ABDOMINAL TRAUMA

- RENAL-URETERAL-BLADDER TRACT
- SPLEEN
- LIVER
- GASTRO-INTESTINAL TRACT
- RX: SUPPORT VS. SURGERY
- CONTROL BLEEDING
- REESTABLISH PERFUSION
- REESTABLISH FUNCTION
- MONITOR HGB/HCT
  - ? TRANSFUSION

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ORTHOPEDIC INJURY

LONG BONE FRACTURE

- ANY BONE CAN BE BROKEN
- STABILIZE & SUPPORT



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ORTHOPEDIC INJURY

DISLOCATION

STABILIZE, SUPPORT, REDUCE



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TRANSPORT

EXTRACTION

TRICKY

- CONTROLLED VARIABLES
- UNCONTROLLED VARIABLES



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TRANSPORT

MODE

- PERSON
- STAIR-CHAIR
- STRETCHER/GURNEY
- GATOR
- AMBULANCE
- HELICOPTER
- FIXED-WING

- LOGISTICS
  - CHAIR
  - CHAIRLIFT
  - CHICKAL
  - AIRHEADY

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TRANSPORT

VENUE SPECIFIC

EVENT SPECIFIC

- SPORT SPECIFIC
  - KNOWLEDGE OF THE TRICK
  - MECHANISM OF INJURY
  - ANTICIPATED OUTCOME



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### LINES OF COMMUNICATION

<b>FACILITY</b>	<b>STAFF</b>
<ul style="list-style-type: none"><li>• LEVEL-1 TRAUMA CENTER</li><li>• EMERGENCY ROOM</li><li>• TRAUMA TEAM</li><li>• NEUROSURGEON</li><li>• VASCULAR SURGEON</li><li>• ORTHOPEDIC SURGEON</li><li>• STAFFED OPERATING ROOM</li><li>• INTENSIVE CARE UNIT</li></ul>	<ul style="list-style-type: none"><li>• "BACK LINE" OR "BACK DOOR"</li><li>• CHARGE NURSE IN TRIAGE</li><li>• ER PHYSICIAN CONTACT LINE</li></ul> <ul style="list-style-type: none"><li>• FACILITATE EFFICIENCY</li><li>• "HEADS-UP" TO WHAT IS BEING TRANSPORTED TO ALERT APPROPRIATE STAFF</li></ul>

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### INJURY PROGRESSION

EVOLUTION OVER TIME

<ul style="list-style-type: none"><li>• CONTINUOUS MONITORING</li><li>• DILIGENCE</li><li>• PATIENCE</li><li>• PERSISTENCE</li></ul>	
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### EXPECT THE UNEXPECTED

<b>PREPARATION IS PARAMOUNT</b>	<b>FLEXIBILITY IS PENULTIMATE</b>
<ul style="list-style-type: none"><li>• SET-UP FOR SUCCESS</li><li>• CONTROL<ul style="list-style-type: none"><li>• PANIC IS AN ENEMY</li></ul></li><li>• PACE<ul style="list-style-type: none"><li>• ALWAYS BE MOVING FORWARD</li></ul></li><li>• DILIGENCE<ul style="list-style-type: none"><li>• DO YOUR JOB</li></ul></li></ul>	<ul style="list-style-type: none"><li>• SHIFTING LANDSCAPES &amp; MOVING TARGETS</li><li>• THINK OUTSIDE THE BOX</li><li>• BE CREATIVE</li><li>• STEP BACK FOR PERSPECTIVE</li></ul>

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DECONSTRUCTION

CONSTRUCTIVE CRITICISM

- WHAT WORKED
  - EFFICIENT ACTION
  - POSITIVE OUTCOME
  - WELL-OILED MACHINE
- WHAT DIDN'T WORK
  - IDENTIFY WEAK LINKS
  - CORRECT FOR INEQUITIES
  - SQUEAKY WHEEL

*BE PROACTIVE...NOT REACTIVE*

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EXPERIENCE IS SOMETHING YOU GET JUST *AFTER* YOU NEEDED IT



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PUSH PERSONAL BOUNDARIES



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AND THEN THERE'S THIS...



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EMBRACE THE MOMENT

CONFIDENCE

- REALISTIC CAPABILITIES
- PROACTION NOT REACTION
- NO TIME FOR BRAVADO
- TRUST YOURSELF
- DO YOUR JOB

RELIANCE

- SUPPORT OF COLLEAGUES
- SUPPORT OF THE SYSTEM

*Complacency breeds mediocrity...don't be mediocre*

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PERFECTION



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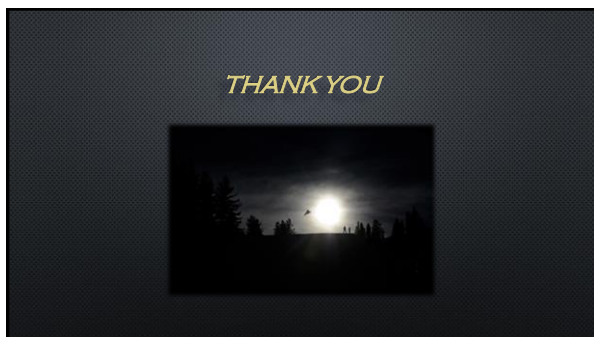
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