



Trainer Spot Check – Game • 2005/2006

Date _____ Time _____ Arena _____

Division _____ Rep Select HL Coach _____ Game No. _____

Trainer _____ Certification No. -TK - _____

1) Did the trainer have the following?

- a. Player Information Sheets Yes No
- b. Blank HCIR & Case Report Yes No
- c. Hit to the Head Letter Yes No
- d. Trainer First Aid Kit Yes No
- e. Ice bags Yes No
- f. Tool kit Yes No
- g. Spare parts for helmet Yes No

2) Did the trainer have control of the bench? Yes No

3) Water bottles

- a. Did the number of water bottles on the bench match the number of players on the ice? Yes No
- b. Were the bottles numbered or have player's names on them? Yes No
- c. Did the players share water bottles? Yes No

4) Did the trainer remain on the bench for the entire game? Yes No
If the trainer left to attend an injured player in the dressing room, was the two-deep rule used? Yes No

5) Was the trainer attentive? Yes No
Did he watch the game and the player activity on the ice during the game? Yes No

6) Was there a pre-game stretching and warm-up in the dressing room? Yes No

7) Did the trainer respond to all on-ice injuries? Yes No
If an injury occurred, did the coaching staff keep the other players away from the injured player? Yes No
Did the injured player resume play? Yes No
If not, did the trainer do up the correct paperwork for the injury? Yes No

8) Was there a Call Person and a Control Person during game? Yes No
Were these people watching the game? Yes No

9) Did the players keep their helmets on until they left the ice after the game ended? Yes No
Did they leave the ice at the end of game in a responsible manner? Yes No

10) Is the team equipment checks up to date? Yes No

11) Is the team replacing first aid supplies as needed? Yes No

12) Was the trainer dressed in a professional manner complete with non-slip footwear? Yes No

Notes of interest _____

This check was performed by _____ Certification No. -TK - _____