

APPENDIX A: EVENT EQUIPMENT

Basic equipment must be purchased or borrowed in preparation for the Healthy Young Athletes event. The quantities of each piece of equipment will vary based on the size and configuration of the event. The following is a brief list of necessary equipment.

All of these can be purchased with SOI Capacity Grant Funds.

Monitoring and Reference Range Charts

All vitals stations should have the following charts available for use for each child or clearly printed to be used as a reference by the volunteers taking the vitals:

- Growth charts: Age and sex specific.
 - Also have specialty growth charts for specific genetic diagnoses, such as Downs syndrome, Fragile X syndrome, Prader Willis syndrome etc.
- Age specific heart rate reference range charts
- Age specific blood pressure reference range charts

Equipment for Medical Screening Station

Blood Pressure Cuffs Each station should have self-inflating blood pressure cuffs, which are meant to be placed around the upper arm and ankle. Manually inflated cuffs are acceptable; however, they can be very strenuous for the volunteer. Wrist blood pressure measurements are often inaccurate and such equipment should be avoided. Order child sized cuffs. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	
Pulse Oximeters Pulse oximeters, such as the one shown here, are preferred standard equipment for the pediatric screening. Other pulse oximetry devices are also acceptable. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	

Thermometers

Digital, contactless thermometers, such as the one shown, should be used to get a temperature reading. One may also use an armpit thermometer or an in-ear thermometer, depending on availability, but adequate cleaning and disinfection of the device should be done before using it on each child. *These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.*



Stadiometers and Flexible Measuring Tape

Children should have their height measured without their shoes on using a stadiometer or a tape measure with .1 centimeter (1/8 inch) increments and a 90 degree head board. Stadiometers that are built on scales should be avoided because they become more inaccurate the more the person weighs. For children in wheelchairs or with significant spasticity, height may be measured with the athlete lying on the exam table. Alternatively, height may also be measured using flexible measuring tape and adding the distances from the bottom of the heel to the center of the knee, the center of the knee to the center of the hip joint, and from the center of the hip to the top of the head.

One Stadiometer can be purchased with SOI Capacity Grant Funds. Local hospitals may be able to loan others. These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.

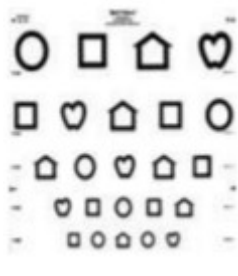


Weight Scales

A professional grade digital scale that measures in increments of .2 kg (1/4 lb) or less and can weigh up to 400lbs (182 kg.) is desired. Children using wheelchairs may have difficulty having their weight measured. If a child can be transferred out of the wheelchair, the wheelchair should be weighed with and without the child in it. The child's weight can be derived from these two numbers. A special type of scale is usually necessary to measure the weight of people in wheelchairs, it is therefore recommended that at least one scale be modified for such purposes.

One Professional Scale can be purchased with SOI Capacity Grant Funds. You should look to have local hospitals/clinics loan others. These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.



Vision Charts The Lea eye chart is the preferred method of measuring near and far vision in people with ID. Standard charts require a degree of literacy that may not be appropriate for all Special Olympics athletes. Instrument-based vision screener may also be used depending on availability. The recommended ones are PlusOptix and GoCheck Kids. Other advanced equipment for visual assessment and identification of pathology may be used, depending on availability of the equipment and the expertise to operate them and interpret the results. These include autorefractors and fundus cameras.	
Otoacoustic Emissions Machine (OAE) For the hearing screen, we recommend the use of a portable, handheld OAE machine that produces fast and accurate measurements in children. Programs are encouraged to use the OAE machines that are available to them and those that require minimal specialized skills to operate and interpret.	
Exam Tables & Stools Review of Systems & Surveillance stations should be conducted at an exam table. Adequate abdominal and cardiac examinations require that the patient be examined in the supine position. Padded, portable exam tables, often used by physical and massage therapists, are the easiest to use and set up. However, makeshift exam tables using a standard 3 x 6 (0.9m x 1.8 m) conference table and a tablecloth can also be effective. If makeshift tables are used, Special Olympics staff should test the weight capacity of the table prior to allowing any children to use them. Stools can also be used at this station.	
Tongue Depressors Though many clinicians are comfortable not using tongue depressors, some clinicians prefer using them. A supply should be kept on site for those clinicians wishing to use them. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	

Ophthalmoscopes Eye examination will be focused on assessing the external eye anatomy (cornea, iris, sclera, pupils), pupillary reflexes, red reflex, and extraocular muscle movement. Therefore, an ophthalmoscope is a “good to have” but not mandatory equipment. Portable, battery powered ophthalmoscopes may be made available to be used as needed.	
Otoscopes and Speculum Covers Otology is essential for a proper evaluation. Inexpensive, battery powered otoscopes are available and should be kept at each exam station. Each otoscope should be accompanied by an adequate supply of speculum covers. These covers must be changed after every athlete. So, the total supply of speculum covers should exceed the total number of athletes expected for the event. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	
Stethoscopes Physicians and other licensed practitioners should be encouraged to bring their own stethoscope. Each stethoscope transmits sounds differently. If a physician is used to performing a heart examination with a particular stethoscope, he or she is used to hearing certain tonal information associated with cardiac abnormalities. Upon changing stethoscopes, the quality of his or her exam could become compromised. For physicians who forget to bring their own stethoscope, it is recommended that a few high-quality stethoscopes be kept onsite for the event. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	
Non-Latex Gloves A supply of medium and large non-latex gloves should be kept onsite for physicians performing examinations. Non-latex gloves are preferred because of the possibility of latex allergies. These gloves will be changed after every examination. It is therefore recommended that an ample supply of gloves be kept on site during the event. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	

Masks In SONA US Programs, masks can be ordered directly free of charge. In regions outside the US, masks should be available for all volunteers, family members, and children participating. SO guidance on COVID-19 mitigation and mask use should be followed at pediatric screening events. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	
Hand Sanitizer Alcohol-based gel or foam hand sanitizer should be used by each clinician between patients. Each medical exam station should have its own dedicated supply of hand sanitizer. <i>These are available through Henry Schein for Programs in the US, Jamaica, Canada, and Germany.</i>	
Impressions Document, Referral Letter, and Educational Material A copy of the impressions document along with a referral letter and educational materials will be shared with families at the event. Copies will need to be made. The program should determine how to capture the impressions document information to be saved in data collection platform and shared with families	
Pipe and Drape Privacy for children and families is a necessity during the screening. Adequate pipe and draping must be supplied to create private rooms.	
Clip Boards and Pens Having a large number of clip boards and pens will help the check-in process to go smoothly. Arranging the athlete medical forms in either alphabetical order or scheduled arrival time will facilitate faster processing time at the check-in area.	
Technology iPads, laptops, and/or PDF Copies of Screening tool for data collection	

Incentives

Each local event can customize incentives for the children and families. It is suggested that the incentive tie directly to the screening. Suggestions include: providing the children with a “passport” at check in where they can collect stamps, stickers, and or pretend play doctor kit items as they participate in the event.



Suggested Cleaning Supplies

- Paper Towels
- Garbage bags
- Kleenex
- Ziploc bags
- Alcohol prep pads
- Tool kit
- Clorox Wipes

Suggested Event Supplies

- Name badges
- Pencils and Pencil sharpener
- Pens
- Sharpies
- Duct tape
- Clear packing tape
- Blue painters tape
- Rope
- Post-it notes
- Binder clips
- Paper clips
- Scissors
- Stapler
- Box of staples
- Zip ties
- First aid kit
- Young Athletes equipment kits

