BARTS Medical Support Requirements for Alpine Disciplines

MEDICAL ASSESSMENT FORM FOR BRITISH ARTIFICIAL SEEDING COMPETITIONS

Event Venue	**Suffolk Leisure Centre**	**CoR**	Ian Welsh
Event Dates	**312st May 2026**	**Event Status**	**Vikings Club National 2026**
Event Doctor *(if appropriate)*	**n/a**	**Phone: +44.....**	
First Aid provided by name:	**Dr Paul Venables and Adam Hunter**	**First aiders** **Dr Mark Roberts is a GP, Adam Hunter is a BLS trained First Aider**	
Local Surgery or NHS 'walk-in' centre ***(if appropriate)***	**Not Applicable as A&E Hospital is closer**		
Hospital	**Address: Ipswich Hospital, Heath Rd, Ipswich, Suffolk IP4 5PD** **Phone: 01473 712233 From Venue: 5 miles, 15 minutes with ambulance/car**	**Level of Care: Full A&E service** **Directions : Leave slope via A14 eastbound, take A12 northbound and then follow "Hospital A&E" signs**	
Pharmacy	**Address: Tesco, Copdock mill interchange, Ipswich IP8 3TS** **Phone: 0345 677 9383** **From Venue: 3.7 miles, < 10 minutes** **Directions: Exit A14 westbound Tesco is located at the next junction.**	**Level of Care: Pharmacy** **Also provision of other goods if required such as plasters, over the counter pain relief etc.**	

Slope patrol	**In contact by Ski Centre – 01473 602347 and radio.**	**Slope patrol on-site during racing**
Ambulance	**In contact by phone 999**	**Location** **From Venue: 15 minutes 5 miles** **The bottom of the slope is accessible by Ambulance**
Slope accident Protocol	**First aid are located at:** **Doctor located at: dedicated gazebo** **In contact by: radio/pa**	**1. First aid are dedicated to the event and are located in their own Gazebo at the foot of the slope.** **2. Vikings provide a stocked first aid kit, with stock agreed with doctors and first aiders who are on duty at the event.** **3. No medication is carried** **4. First Aiders advise whether an A&E visit or Ambulance is**

		required, 5 **(Advice based on acuity of injury and consultation with parent/coach.)** **7. Accident form or notes on report if required.**
Crowd / Public Protocol ***Only if different from above***	**First aid are located at:** **Doctor located at:** **In contact by:**	**All as above**
Back-up plan	**Slope staff are on duty as well and have basic first aid training, the centre also have a stretcher if required.**	
Defibrillator Equipment	**Is there a Defibrillator (AED) on site?** **Where is it located?** **Is there a person on site trained to use the equipment?** **If not on site, nearest Defibrillator located at:**	**Yes** **Reception at top of slope, another will be located in the medical tent at the bottom of the slope (races only)** **Yes** **n/a**

The Medical arrangements fully meet the criteria for BARTS competitions				**Yes/ No If no identify issue below**	
Description	**Yes/No**	**Complies fully with Rule 1? Y/N**	**Degree of compliance 1-5 (where 5 = fully in place)**	**If not fully complied, reason**	
Medical Cover	**Yes**	**No**	**3**	**Doctor in attendance but not necessary, technical race in a controlled environment. Hospital 15 mins away**	
Signed:		**Technical Delegate/Chief of Race/Chief of Champs** *Delete as appropriate*		**Date:**	

The plan should be discussed on setting up contract with venue and prior to publication of Acceptance Bulletin.

The document should be agreed and signed by Chief of Race/Medical Director/Chief of Championships plus TD (if applicable).

Please email completed forms to sponsoring constituent group.