

## EXTREME HEAT POLICY

<b>Approving authority</b>	Board of Management
<b>Approval date</b>	30 October 2025
<b>Next scheduled review</b>	30 October 2027
<b>Description</b>	This policy has been developed to provide evidence-based guidance for protecting the health of those participating in sport and physical activity from the potentially ill effects of extreme heat in the summer, while ensuring that play is not unnecessarily interrupted.

### Related documents

#### External Links:

[Sports Medicine Australia Extreme Heat Risk and Response Guidelines and WebTool \(2025\)](#)  
[Sport Heat Tool](#)

## 1. BACKGROUND

- Assessment of heat stress risk is based on a fundamental heat balance model that determines the combination of temperature (measured in the shade) and humidity at which critical levels of heat stress risk to health are predicted to occur. These models are also adjusted for the effects of thermal radiation from the sun, and air flow from wind. Once a threshold is reached, a colour coding system recommends actions that can be taken to reduce health-risk.
- Baseball Queensland has adopted Sports Medicine Australia's Extreme Heat Policy incorporating use of their [Sport Heat Tool](#).
- Sports Medicine Australia splits sports into 5 "risk classification" groups according to the combined effects of exercise intensity and clothing/equipment worn. Baseball has a Sport Risk Classification of 4.

## 2. WHO SHOULD USE THIS POLICY

This policy applies to all training programs, competitions and events conducted by Baseball Queensland, its members and affiliates. Program partners are also governed by this policy.

## 3. USING THE SPORTS MEDICINE SPORT HEAT TOOL

To predict the heat risk associated with participation in a relevant sporting classification, the temperature and humidity for the location where competition or practice will be taking place needs to be acquired. Using the [Sport Heat Tool](#) simplifies this process. Simply select baseball as the sport, enter the location where the game/training will be occurring and a risk

rating will be provided along with key recommendations. A forecast for following days is also provided, allowing you to plan in advance.

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#### 4. MITIGATING HEAT STRESS RISK

Sports Medicine Australia's [Extreme Heat Risk and Response Guidelines](#) outlines practical strategies to reduce heat-related risk across more than 30 popular Australian sports. The guidelines are relevant to all Australians who are physically active, but they are particularly valuable for health professionals promoting physical activity, as well as coaches, fitness leaders and sports administrators.

Through the [Extreme Heat Risk and Response Guidelines](#) they provide advice on:

- Using the [Sport Heat Tool](#) to assess heat stress risk.
- Recommended actions for *Low*, *Moderate*, *High* and *Extreme* risk conditions
- Hydration, rest breaks and clothing modification
- Recognising and managing signs of heat-related illness

#### 5. PREPARING FOR EXERCISE IN THE HEAT

Evidence-based heat stress mitigation recommendations are provided in the Sports Medicine Australia [Extreme Heat Risk and Response Guidelines](#). All coaches, officials and club committee members should be aware of and follow these recommendations.

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#### 6. RECOGNISING SIGNS AND SYMPTOMS OF HEAT-RELATED ILLNESS

Whenever exercise or sport is being carried out in the heat, irrespective of the heat stress risk level, recognising the signs and symptoms of heat-related illness is essential for ensuring the safety and wellbeing of all participants.

Heat-related illnesses represent a spectrum of disorders, ranging from mild symptoms to a life-threatening illness. The health impacts of heat-related illness can be a direct result of an increase in core temperature or the result of the strain on the heart associated with defending the rise in body temperature.

Baseball has participants from a wide range of players; some people are especially vulnerable:

- Aged over 65 years, especially if unfit. Note that age effects on thermoregulation may become progressively worse with age, so risk is generally greater with more advanced age.
- Heart or kidney disorders/ disease presents a greater risk of cardiovascular or renal failure during or following exercise in the heat.
- Recently sick with a fever.
- Taking prescription medications that impair sweating.

- A reduced ability to behaviourally respond to heat, e.g. due to mental health challenges or substance abuse.
- Very high body fat.
- Recently (in the past week) arrived from a cold climate).
- It is currently unclear if heat stress risk is truly elevated in children. Similarly, some reports indicate that pregnant women exposed to extreme heat may be at elevated risk of negative birth outcomes, but no evidence links this with exercise, which is known to provide extensive benefits to mother and baby. Thermoregulatory capacity during pregnancy is also not compromised.

The symptoms and signs of heat related illness and the immediate management procedures are summarised below.

	HEAT EXHAUSTION/SYNCOPE	EXERTIONAL HEAT STROKE (EHS)
Symptoms (What the person might feel)	<ul style="list-style-type: none"> <li>- Headache</li> <li>- Dizziness</li> <li>- Weakness</li> <li>- Nausea</li> <li>- Vomitting</li> </ul>	<ul style="list-style-type: none"> <li>- Brain symptoms including confusion and agitation</li> <li>- Symptoms can develop rapidly</li> <li>- EHS is a medical emergency</li> </ul>
Signs (What you might see)	<ul style="list-style-type: none"> <li>- Fainting</li> <li>- Increased heart rate</li> <li>- Decreased blood pressure</li> <li>- Core temperature usually below 40°C</li> <li>- Absence of brain symptoms</li> </ul>	<ul style="list-style-type: none"> <li>- Brain symptoms including: <ul style="list-style-type: none"> <li>· Confusion</li> <li>· Unsteadiness</li> <li>· Aggressive or irrational behaviour</li> <li>· Altered level of consciousness, seizures, coma</li> </ul> </li> <li>- increase heat rate, increase breathing rate, decreased blood pressure</li> <li>- Core temperature usually below 40°C</li> </ul>
Immediate Management	<ul style="list-style-type: none"> <li>- Move to shade and cool</li> <li>- Remove as much clothing as possible</li> <li>- Remove protective equipment (eg. helmets, pads)</li> <li>- Apply lots of water to skin</li> <li>- Oral fluids</li> <li>- Lie on back with legs elevated</li> <li>- Watch for worsening</li> </ul>	<ul style="list-style-type: none"> <li>- ABC (airway, breathing and circulation)</li> <li>- Aggressively cool the body with ice and water (eg. ice or cold water bath)</li> <li>- Call an ambulance</li> <li>- Continue cooling while transfer to hospital – “Cool first, transfer second”</li> </ul>

## 7. DEVELOPMENT, REVIEW AND APPROVAL HISTORY

Version No	Developed/ Modified by	Content authorised by	Approving Officer	Date of Effect	Last Reviewed
1	Andrea Marshall	David Badke Alan Connors	Board of Management	18/09/2022	18/09/2022
2	Andrea Marshall	David Badke Andy Utting	Board of Management	03/12/2024	03/12/2024
3	Andrea Marshall	David Badke Brad Parsons	Board of Management	30/10/2025	30/10/2025