

Greene County Board of Education

Monitoring: Review: Annually, in June	Descriptor Term: <h2 style="text-align: center;">Prevention and Treatment of Sudden Cardiac Arrest</h2>	Descriptor Code: 6.414	Issued Date: 02/23/17
		Rescinds:	Issued:

1 Sudden cardiac arrest (SCA) is a condition in which the heartbeat stops abruptly and unexpectedly,
 2 preventing blood flow to the brain, the heart, and the rest of the body. In order to ensure the safety of
 3 students that participate in interscholastic athletics, it is imperative that student athletes, coaches, and
 4 parents are educated about the nature and treatment of sudden cardiac arrest. The board recognizes that
 5 sudden cardiac arrest is a serious health issue and should be treated as such.

6 The board adopts the guidelines and other pertinent information and forms developed by the Tennessee
 7 Department of Health to inform and educate coaches, school administrators, student athletes, and
 8 parent(s) / guardian(s) of the nature, risk and symptoms of sudden cardiac arrest. These guidelines and
 9 materials may be viewed on the Department of Health's website and shall be made available to
 10 interested parties through the Central Office.

11 This policy shall govern all activities and those individuals involved in those activities which constitute
 12 an organized athletic game or competition against another team or in practice or preparation for an
 13 organized game or competition. It does not govern those activities or individuals involved in those
 14 activities which are entered into for instructional purposes only or those that are incidental to a
 15 nonathletic program or lesson.

16 **REQUIRED TRAINING¹**

17 The director of schools shall ensure that each school's athletic director and coaches, employed or
 18 volunteer, annually complete the *National Federation of State High School Associations Elective*
 19 *Course – Sudden Cardiac Arrest* online course. This course may be accessed online at
 20 www.nfhslearn.com.

21 Prior to the annual initiation of practice or competition, the following persons must review and sign a
 22 sudden cardiac arrest information sheet approved by the Tennessee Department of Health: each school
 23 athletic director, licensed healthcare professionals (if appointed), and each coach, employed or
 24 volunteer.

25 In addition, prior to the annual initiation of practice or competition, all student athletes and their
 26 parent(s) / guardian(s) shall review the sudden cardiac arrest information sheet approved by the
 27 Tennessee Department of Health. A form confirming this review shall be signed and returned by the
 28 student athlete, if the athlete is eighteen (18) years of age or older; or by the student athlete's parent(s) /
 29 guardian(s), for athletes younger than eighteen (18) years of age.

1 All documentation of the completion of a sudden cardiac arrest education course program and signed
2 sudden cardiac arrest information sheets shall be maintained by the director of schools or his/her
3 designee for a period of three (3) years.

4 **Removal from Athletics¹**

5 Any student athlete who shows signs, symptoms and/or behaviors consistent with sudden cardiac arrest
6 during or after an athletic activity or competition shall be immediately removed for evaluation by a
7 licensed healthcare professional, if available, and if not, by a coach or other designated individuals.
8 Signs, symptoms and/or behaviors include, but are not limited to: passing out; fainting; unexplained
9 shortness of breath; chest pains; dizziness; racing heart rate; and extreme fatigue.

10 Student athletes who have been removed from an athletic activity or competition shall not return to any
11 supervised team activities involving physical exertion, including games, competitions, or practices,
12 until the student athlete has been evaluated by and received written clearance on forms approved by the
13 Department of Health from a licensed health care provider for a full or graduated return.

Legal References

1. Public Acts of 2015, Chapter No. 325

Procedure References

- Sudden Cardiac Arrest Information and Signature Form for Coaches 6.414 Exhibit A
- Sudden Cardiac Arrest Athlete/Parent/Guardian Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet and Acknowledgement of Receipt and Review Form 6.414 Exhibit B
- Sudden Cardiac Arrest Athlete/Parent/Guardian Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet and Acknowledgement of Receipt and Review Form-Spanish Version 6.414 Exhibit C (Paro Cardíaco Subito Hoja de Información y Reconocimiento de Recibo y Formulario de Revisión de las Señales de Aviso y Síntomas de Paro Cardíaco Repentino Para los Representantes/Padres/Atletas 6.414 Exhibit C)