

# Lakeland Board of Education

Monitoring:  Review: <b>Annually, in May</b>	Descriptor Term:  <b>Prevention and Treatment of Sudden Cardiac Arrest</b>	Descriptor Code: <b>6.414</b>	Issued Date:
		Rescinds:	Issued:

1 The Board adopts the guidelines and other pertinent information and forms developed by the  
 2 Tennessee Department of Health (TDOH) to inform and educate coaches, school administrators,  
 3 student athletes, and parents and guardians of the nature, risk and symptoms of sudden cardiac arrest.  
 4 These guidelines and materials shall be made available to interested parties through the Central Office  
 5 and include, but are not limited to, the sudden cardiac arrest information sheet and medical clearance  
 6 forms approved by the TDOH and referenced in this policy.

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

## 12 **REQUIRED TRAINING<sup>1</sup>**

13 Each school’s athletic director and coaches, whether employed or volunteer, are required, annually, to  
 14 complete the *National Federal of State High School Associations Elective Course – Sudden Cardiac*  
 15 *Arrest* online course.

16 Prior to the annual initiation of practice or competition, the following persons must review and sign a  
 17 sudden cardiac arrest information sheet: each school athletic director, appointed licensed healthcare  
 18 professionals, and each coach, whether employed or volunteer.

19 Prior to the annual initiation of practice or competition, all student athletes and/or their parent(s) or  
 20 guardian(s) shall review and sign a sudden cardiac arrest information sheet. The form shall be signed  
 21 and returned by the student athlete if the athlete is eighteen (18) years of age or older; or by the student  
 22 athlete's parent(s) or guardian(s), for athletes younger than eighteen (18) years of age.

23 All documentation of the completion of a sudden cardiac arrest education course program and signed  
 24 sudden cardiac arrest information sheets shall be maintained for a period of three (3) years.

## 25 **Removal from Athletics<sup>1</sup>**

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

31 Student athletes who have been removed from an athletic activity or competition shall not return to any  
 32 supervised team activities involving physical exertion, including games, competitions, or practices,  
 33 until the student athlete has been evaluated by and received appropriate written clearance from a  
 34 licensed health care provider for a full or graduated return.

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Legal References

1. Public Acts of 2015, Chapter No. 325

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Cross References