Purpose: This athletic factsheet is designed to be useful as a guide to student athletes and parents. The intent is to condense information that is necessary to effectively understand and participate in the athletic program in Allegany County. **Athletic participation is a privilege, not a right.**

The guide includes a collection of information pertaining to state and county procedures and regulations. Additional references on the administration of interscholastic athletics will be found in the Maryland Public Secondary Schools Athletic Association Handbook. Copies of these documents are available online at [www.MPSSAA.org](http://www.MPSSAA.org) and [www.acpsmd.org](http://www.acpsmd.org).

There may be questions that arise that may not be covered. Remember, this factsheet is only a guide. Only open communications between coaching staff, athletic director, parents, students, and school administrators will ensure an effective athletic program.

**GENERAL ELIGIBILITY**

Enrollment: Students shall be officially registered as required by Maryland school laws and attending a member MPSSAA school. They may represent only the school in which they are registered and at which it is anticipated they will complete their graduation requirements.

Age: Students who are 19 years or older as of August 31st are ineligible to participate in interscholastic athletics for the school year ahead.

Seasons of Competition: Students may participate in interscholastic athletic contests a maximum of four (4) seasons in any one sport in grades 9-12.

Physical Examination: A student shall be examined and certified as being physically fit to participate in any tryout or practice. A qualified physician within the current calendar year shall perform this examination.

Athletic Insurance and Parental Permission: Every candidate for and participant on an interscholastic team must provide proof of parental permission and have insurance covering possible accident or injury in school-sponsored games, practice sessions and travel to and from athletic contests.

Sports Insurance: ACPS may obtain supplemental insurance to cover injuries that occur which are not covered by the regular Student Accident Insurance policy. This insurance may provide additional coverage for an injured athlete. Claims for reimbursement under this insurance should be filed by the parent through the school office. The Board’s insurance office should be advised of all claims filed on this policy. This should be done by completing a school accident form as well as completing the insurance claim forms. This insurance may not guarantee 100% coverage of claims.

Squad Membership: The coach of each sport is responsible for the determination of squad membership. Seniors are not eligible for junior varsity competition in any sport.
Outside Team Membership: The outside participation shall not conflict with the practice or contest schedule of the school, including district, regional and state championship play. A principal may authorize in advance an absence from a school-scheduled practice for competition.

Transfer: A student attending a high school without the benefit of residing within the school's attendance area and/or without special permission of the Office of Pupil Services is subject to disciplinary action, which will result in the loss of athletic eligibility, and other penalties as may seem justified in the particular case.

Recruiting Statement: No coach or school personnel may discuss or otherwise promote transfers or changes in residence or residence arrangements with any student, parent, or other person of influence, or knowingly permit such activity to take place for the purpose of facilitating athletic participation.

Amateur Status: Any student, who has not or is not using his athletic skill as a player for financial gain or has not competed under an assumed name as a player, shall be considered an amateur. Employment as an instructor, counselor, or official may not be considered a violation. Students may not apply for reinstatement until at least 60 days after the date of violation.

ACADEMICS
Academic Eligibility: Student extracurricular activities are an integral part of school life and are used as a means of developing wholesome attitudes and good human relations; as well as knowledge and skills. These activities often require as much careful planning and supervision as student experiences in the academic subject area; however, care must be taken that these activities do not take precedence over subject matter areas, but remain as supplemental activities to the basic courses of study.

While it is desirable that students participate in such activities to the extent that the further their educational development, it is of paramount importance that such participation shall not jeopardize pupils' academic achievement nor exploit their time and talents.

Eligibility for a marking period shall be determined by the student's grades for the most recently completed marking period. Students much achieve a minimum grade point average of 2.0. All new 9th grade students are eligible to participate in the first quarter of the 9th grade.

Grades used to determine eligibility will be those recorded on the report card earned while attending a county school or as a result of transferring from a non-county school. The student will become eligible or ineligible on the day of distribution of report cards.

The student may not practice with the team during the ineligible period.

Eligibility shall be determined by the previous marking period grades except that for the first marking period. Eligibility prior to the first marking period is determined by the fourth nine week's grades of the preceding year.

Eligibility Reinstatement: If a student becomes eligible during a sports season, he or she may try out for a team provided that he or she practices as indicated in ACPS rules and meets all other eligibility criteria (e.g. insurance, passes the physical exam, etc.). No other member of the team may be cut as a result of this regulation.
A reinstated athlete shall not participate in a regular scheduled game/contest until at least seven (7) calendar days following distribution of report cards.

**ATTENDANCE**
Each athlete is expected to attend school and all classes regularly and on time. Unless there is a lawful absence or tardy, students who are members of any school team/activity should attend all classes on time each day.

**CONDUCT OF STUDENT ATHLETES**

**Student Conduct:** Refer to the agreement governing participation in athletics.

**Ejection:** Students ejected from a scheduled athletic contest by an official of the contest may not participate on the next playing date of that same activity. This includes post-season play of that activity.

**Substance Abuse:** Alcohol, drug and tobacco use are extremely serious offenses. Not only is the quality of life of the student athlete in jeopardy, but the quality of life of innocent bystanders may be in jeopardy as well. Individuals participating in athletics depend on one another to be mentally and physically prepared to give their best effort each day. This cannot happen if the student athlete is using alcohol, tobacco or drugs that are not prescribed by a physician. Athletes using, possessing or distributing drugs, alcohol or tobacco on school premises or at a school-sponsored event shall be subject to discipline. Discipline may exclude student participation up to as much as the remainder of the season.

**Serious Acts by Student Leaders:** Students holding leadership positions or representing the school through academics, athletics and/or activities such as a club or organization, who commit an offense classified as a serious, unlawful act in the community or a serious suspendable offense may be removed from the position. Arrest, conviction, or legal judgment is not required.

**Hazing/Bullying:** Hazing/bullying will not be tolerated to any degree and may result in disciplinary action including suspension and expulsion. Any action taken or situation created that causes or is reasonably likely to cause harassment, physical harm, serious mental or emotional harm, extreme embarrassment, ridicule, or loss of dignity to another student for purposes or initiation into a student organization or activity will not be tolerated.

**TITLE IX**
ACPS supports the provisions of title IX and believes the implementation of the athletic program should reflect equity in funding, scheduling, and access to programs and facilities. The supervisor of athletics in cooperation with the athletic director and building principal will annually evaluate the following areas to ensure equity in athletic programs at all ACPS high schools.

**PRACTICE**

**Starting Dates for Practice:** Fall sports, August 12th; Winter sports, November 15th; Spring sports, March 1st. If the first day of practice falls on a Sunday, practice can begin on the preceding Saturday.
EQUIPMENT
Equipment Responsibility: It is the responsibility of the student athlete to maintain and return all equipment and uniforms issued to them. Parents will be financially responsible for any equipment or uniforms that are lost, stolen or misplaced during the time the student athlete is responsible for them.

AWARDS
The minimum criteria for awarding a school athletic letter or other similar award must include: 1) The participant must complete the season in good standing; 2) The participant must fulfill all team-related obligations; and 3) The coach may establish more specific requirements with the approval of the athletic director and principal.

LIMITS OF PARTICIPATION
A student who participates in both varsity and junior varsity teams may not play in a number of games that exceeds the maximum number allowed in a sport in a week or season for the varsity team. A student may not compete on both a varsity and junior varsity team on the same day.

All-Star Games: Student athletes may participate in the maximum number of all-star games per sport, upon the completion of their eligibility in the sport in which the participation occurs as determined by MPSSAA.

Graduates: Graduates of high schools are not eligible to practice on interscholastic sports teams. However, they may participate in the remaining athletic contests of that sport season. MPSSAA member schools shall practice with or play against only high school teams.

INCLEMENT WEATHER
When schools are dismissed early or do not open due to inclement weather, all athletic activities, scheduled games and/or practices are cancelled.

SPORTSMANSHIP
Admission to interscholastic athletic events in Allegany County entitles spectators to enjoy a competitive exhibition of skills in an education setting. We ask that spectators give student athletes positive encouragement and support. Booing, taunting or intimidating the officials and opponents is unfriendly and unacceptable.

To assure a positive and safe atmosphere, only uniformed cheerleaders will lead cheers. Noisemakers are not permitted and we request that spectators not pound or stomp on bleachers. We encourage support for allowing all athletes the opportunity to compete in a sportsmanlike atmosphere.

CONDUCT OF SPECTATORS
The supervising personnel at an athletic function are required to maintain and enforce appropriate conduct of the spectators.

- Spectators represent their schools, as do athletes.
- Spectators are expected to demonstrate the highest standards of sportsmanship.
- Booing, taunting, yelling profanities, inappropriate cheers or attempts to intimidate athletes, coaching staffs, event personnel, administrators, officials and opponents are unacceptable behaviors.
- Spectators should support and cheer for their teams in a positive manner.
• Spectators who exhibit unacceptable behavior will be asked to leave the contest without reimbursement of game fees and will not be permitted to re-enter that contest. The school principal may impose further disciplinary action.
• Spectators will not be permitted to leave and re-enter without paying a second admission.
• Spectators must comply with the ACPS alcohol, drug and tobacco policies.
• Spectators must stay in the bleachers or stands. For spectator safety, there is no jumping on the bleachers or stands.
• Only authorized coaches for the designated activity and/or authorized school supervisory personnel so designated by the school are permitted on the sidelines.
• School dress code extends to athletic contests.
• During contest, spectators may not play catch or pickup games inside the stadium or gymnasium.
• Noisemakers are prohibited at athletic events.
Sexual Harassment and Hazing:
Your Actions Make a Difference!

This brochure addresses the legal rights of high school students, coaches/activity personnel and officials to enjoy an appropriate environment in athletics and other activities. All forms of harassment should be reported to school authorities.

Key Elements of a Good Reporting System
A clearly worded and well-publicized policy is essential in order to inform students and employees that sexual harassment or other forms of hazing will not be tolerated; ensure that they know how to report complaints, and assure them that harassment may be reported without fear of repercussions.

Key Elements of a Good Reporting System:
1. Communicate to your students, coaches/activity personnel, officials and parents that you have a policy against hazing, sexual misconduct and other forms of harassment.
2. Make the process of reporting allegations simple and direct.
3. Make the principal as the highest administrative official in the building, directly responsible for directing the investigation of any allegation of misconduct, hazing or harassment.
4. Document, in writing, any allegation of misconduct, hazing or harassment, and the results of the investigation.
5. Promptly take such remedial action as is necessary and appropriate.
Factors Used to Evaluate Sexual Harassment

- The degree to which the conduct affects one or more students' education.
- The degree to which the conduct affects the coaching or work environment.
- The type, frequency and duration of the conduct.
- The identity of and relationship between the alleged harasser and the subject or subjects of the harassment.
- The number of individuals involved.
- The age and gender of the alleged harasser and the subject or subjects of the harassment.
- The size of the school, location of the incidents and context in which they occurred.
- Other incidents of sexual harassment at the school.
- Incidents of gender-based, but non-sexual harassment.
- Consensual behaviors.

(Source: Federal Register Vol 65, No. 212, November 2, 2000)

Establishing Boundaries

Sexual Misconduct

Sexual Misconduct covers a wide spectrum of inappropriate behavior. Individuals who engage in sexual misconduct may be subject to disciplinary actions at school or in a court of law.

Sexual Harassment

Sexual Harassment is a form of gender discrimination that consists of unwelcome verbal, electronic, or physical interaction between two or more people. Harassment can happen between people of the same gender or people of different genders.

Hazing

Hazing is any action or activity which inflicts physical or mental harm or anxiety, or which demean, degrades or disgraces a person regardless of location, intent or consent of participants.

(Enable Practice Group 2006, RI)

Ten Recommendations for Preventing Sexual Harassment in Schools and Athletics Programs

1. Teachers and athletics personnel should never use sexually explicit language or tell sexually explicit/off color jokes in the presence of students or student-athletes.
2. Teachers and athletics personnel should never display sexually explicit or pornographic pictures/materials on school property and should never show such materials to students or student-athletes under any circumstances.
3. Teachers and athletics personnel should avoid engaging in excessively personal conversations, both in person and on the phone, with students or student-athletes.
4. Teachers and athletics personnel should avoid sending excessively personal letters, cards, e-mails, or gifts to students or student-athletes.
5. Teachers and athletics personnel should avoid commenting on the physical appearance, including manner of dress and specific physical attributes, of students or student-athletes.
6. Teachers and athletics personnel should avoid the greatest extent possible physical contact with or touching of students or student-athletes.
7. Teachers and athletics personnel should avoid giving students or student-athletes rides home alone or even in groups where eventually only one student will remain in the car alone with the adult.
8. Teachers and athletics personnel should avoid off-school-property one-on-one meetings alone with students or student-athletes, especially in the home of the student or the adult.
9. Teachers and athletics personnel should never plan or take unchaperoned overnight school or athletics trips with students or student-athletes and, on properly chaperoned trips, should exercise the highest degree of caution and propriety regarding interaction with students or student-athletes.
10. Teachers and athletics personnel should never date students or student-athletes under any circumstances. Issues of power differential, consent and credibility make such relationships untenable within any level of educational institution.

(DataSource: Dr. Lee Greer, Baker University Sports/Institutional Policies, Institutional Policies)

Sexual Harassment and Hazing:

Your Actions Make a Difference!

(Source: High School Hazing: When Rites Become Wrong, by Hank Avera)
CONCUSSION Information Sheet

This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children’s or teens’ games and practices to learn how to spot a concussion and what to do if a concussion occurs.

What Is a Concussion?
A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

How Can I Help Keep My Children or Teens Safe?
Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children’s or teens’ chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
  - Work with their coach to teach ways to lower the chances of getting a concussion.
  - Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
  - Ensure that they follow their coach’s rules for safety and the rules of the sport.
  - Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no “concussion-proof” helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.

Plan ahead. What do you want your child or teen to know about concussion?

How Can I Spot a Possible Concussion?
Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just “don’t feel right” after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

Signs Observed by Parents or Coaches
- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows mood, behavior, or personality changes.
- Can’t recall events prior to or after a hit or fall.

Symptoms Reported by Children and Teens
- Headache or “pressure” in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not “feeling right,” or “feeling down.”

Talk with your children and teens about concussion. Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren’t serious or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that it’s better to miss one game than the whole season.

To learn more, go to www.cdc.gov/HEADSUP
Concussions affect each child and teen differently. While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children’s or teens’ health care provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.

What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

What Should I Do If My Child or Teen Has a Possible Concussion?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child’s or teen’s health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child’s or teen’s school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days. The brain needs time to heal after a concussion. A child’s or teen’s return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.

Children and teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious and can affect a child or teen for a lifetime. It can even be fatal.

Discuss the risks of concussion and other serious brain injury with your child or teen and have each person sign below. Detach the section below and keep this information sheet to use at your children’s or teens’ games and practices to help protect them from concussion or other serious brain injury.

☐ I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

Athlete Name Printed: ___________________________ Date: ___________________________

Athlete Signature: ___________________________

☐ I have read this fact sheet for parents on concussion with my child or teen and talked about what to do if they have a concussion or other serious brain injury.

Parent or Legal Guardian Name Printed: ___________________________ Date: ___________________________

Parent or Legal Guardian Signature: ___________________________
WHAT IS A CONCUSSION?
A concussion is a brain injury that:
- Is caused by a bump or blow to the head
- Can change the way your brain normally works
- Can occur during practices or games in any sport
- Can happen even if you haven’t been knocked out
- Can be serious even if you’ve just been “dinged”

WHAT ARE THE SYMPTOMS OF A CONCUSSION?
- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light
- Bothered by noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion
- Does not “feel right”

WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?
- Tell your coaches and your parents. Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach if one of your teammates might have a concussion.

- Get a medical check up. A doctor or health care professional can tell you if you have a concussion and when you are OK to return to play.

- Give yourself time to get better. If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a second concussion. Second or later concussions can cause damage to your brain. It is important to rest until you get approval from a doctor or health care professional to return to play.

HOW CAN I PREVENT A CONCUSSION?
Every sport is different, but there are steps you can take to protect yourself.
- Follow your coach’s rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.
- Use the proper sports equipment, including personal protective equipment (such as helmets, padding, shin guards, and eye and mouth guards). In order for equipment to protect you, it must be:
  - The right equipment for the game, position, or activity
  - Worn correctly and fit well
  - Used every time you play

It’s better to miss one game than the whole season.

For more information and to order additional materials free-of-charge, visit:
www.cdc.gov/ConcussionInYouthSports

For more detailed information on concussion and traumatic brain injury, visit:
www.cdc.gov/injury
WHAT IS A CONCUSSION?
A concussion is a brain injury. Concussions are caused by a bump or blow to the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

WHAT ARE THE SIGNS AND SYMPTOMS OF A CONCUSSION?

Signs Observed by Parents or Guardians
If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs and symptoms of a concussion:
- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Can’t recall events prior to hit or fall
- Can’t recall events after hit or fall

Symptoms Reported by Athlete
- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Does not “feel right”

HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION?
Every sport is different, but there are steps your children can take to protect themselves from concussion.
- Ensure that they follow their coach’s rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity (such as helmets, padding, shin guards, and eye and mouth guards). Protective equipment should fit properly, be well maintained, and be worn consistently and correctly.
- Learn the signs and symptoms of a concussion.

WHAT SHOULD YOU DO IF YOU THINK YOUR CHILD HAS A CONCUSSION?

1. Seek medical attention right away. A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to sports.

2. Keep your child out of play. Concussions take time to heal. Don’t let your child return to play until a health care professional says it’s OK. Children who return to play too soon—while the brain is still healing—risk a greater chance of having a second concussion. Second or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

3. Tell your child’s coach about any recent concussion. Coaches should know if your child had a recent concussion in ANY sport. Your child’s coach may not know about a concussion your child received in another sport or activity unless you tell the coach.
Sudden Cardiac Arrest (SCA)

**Definition:** Sudden Cardiac Arrest (SCA) is a potentially fatal condition in which the heart suddenly and unexpectedly stops beating. When this happens, blood stops flowing to the brain and other vital organs. SCA in student-athletes is rare; the chance of SCA occurring to any individual student athlete is about one in 100,000. However, student athletes’ risk of SCA is nearly four times that of non-athletes due to the increased demands on the heart during exercise.

**Causes:** SCA is caused by several structural and electrical diseases of the heart. These conditions predispose an individual to have an abnormal rhythm that can be fatal if not treated within a few minutes. Most conditions responsible for SCA in children are inherited, which means the tendency to have these conditions is passed from parents to children through the genes. Other possible causes of SCA are a sudden blunt non-penetrating blow to the chest and the use of recreational or performance-enhancing drugs and/or energy drinks.

**Warning signs of potential heart issues:** The following need to be further evaluated by your primary care provider.

- Family history of heart disease/cardiac arrest
- Fainting, a seizure, or convulsions during physical activity
- Fainting or a seizure from emotional excitement, emotional distress, or being startled
- Dizziness or lightheadedness, especially during exertion
- Exercise-induced chest pain
- Palpitations: awareness of the heart beating, especially if associated with other symptoms such as dizziness
- Extreme tiredness or shortness of breath associated with exercise
- History of high blood pressure

**Risk of Inaction:** Ignoring such symptoms and continuing to play could be catastrophic and result in sudden cardiac death. Taking these warning symptoms seriously and seeking timely appropriate medical care can prevent serious and possibly fatal consequences.

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**EMERGENCY RESPONSE TO SCA**

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**CALL 911**

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**ADMINISTER CPR**

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**USE AN AUTOMATIC EXTERNAL DEFIBRILLATOR (AED)**

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**Act Immediately; time is most critical to increase survival rates!**

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**WARNING SIGNS OF SCA**

- SCA strikes immediately
- SCA should be suspected in any athlete who has collapsed and is unresponsive
- No response to tapping on shoulders
- Does nothing when asked if he/she is OK
- No pulse
Frequently Asked Questions about Sudden Cardiac Arrest (SCA)

What are the most common causes of Sudden Cardiac Arrest (SCA) in a student athlete?
SCA is caused by several structural and electrical diseases of the heart. These conditions predispose an individual to have an abnormal rhythm that can be fatal if not treated within a few minutes. Most conditions responsible for SCA in children are inherited, which means the tendency to have these conditions is passed from parents to children through the genes. Some of these conditions are listed below.

1. *Hypertrophic cardiomyopathy* (HCM): HCM involves an abnormal thickening of the heart muscle and it is the most common cause of SCA in an athlete.

2. Coronary artery anomalies: The second most common cause is congenital (present at birth) abnormalities of coronary arteries, the blood vessels that supply blood to the heart.

3. Other possible causes of SCA are:
   a. *Myocarditis*: an acute inflammation of the heart muscle (usually due to a virus).
   b. Disorders of heart electrical activity such as:
      i. *Long QT syndrome*.
      iii. *Catecholaminergic Polymorphic Ventricular Tachycardia* (CPVT).
   c. *Marfan syndrome*: a condition that affects heart valves, walls of major arteries, eyes, and the skeleton.
   d. Congenital aortic valve abnormalities.

4. *Commotio Cordis*: concussion of the heart from sudden blunt non-penetrating blow to the chest.

5. Use of recreational, performance-enhancing drugs, and energy drinks can also bring on SCA.

How can we minimize the risk of SCA and improve outcomes?
The risk of SCA in student athletes can be minimized by providing appropriate prevention, recognition, and treatment strategies. One important strategy is the requirement for a yearly pre-participation screening evaluation, often called a sports physical, performed by the athlete’s medical provider.

1. It is very important that you carefully and accurately complete the personal history and family history section of the “Pre-Participation Physical Evaluation Form”.

2. Since the majority of these conditions are inherited, be aware of your family history, especially if any close family member:
   a. had sudden unexplained and unexpected death before the age of 50.
   b. was diagnosed with any of the heart conditions listed above.
   c. died suddenly/unexpectedly during physical activity, during a seizure, from Sudden Infant Death Syndrome (SIDS) or from drowning.

3. Take seriously the warning signs and symptoms of SCA. Athletes should notify their parents, coaches, or school nurses if they experience any of these warning signs or symptoms.

4. Schools in Maryland have AED policies and emergency preparedness plans to address SCA and other emergencies in schools. Be aware of your school’s various preventive measures.

5. If a cardiovascular disorder is suspected or diagnosed based on the comprehensive pre-participation screening evaluation, a referral to a child heart specialist or pediatric cardiologist is crucial. Such athletes will be excluded from sports pending further evaluation and clearance by their medical providers.
Heat Related Illness
What You Should Know!

Heat Exhaustion
If your body is becoming overheated, you may experience heat exhaustion.

**Symptoms:**
- Heavy sweating
- Muscle cramps
- Tiredness
- Weakness
- Dizziness or fainting
- Headache
- Nausea or vomiting

Stop activity and seek a cool place (shade or air-conditioning) and drink water or sports beverage.

Heat Stroke
Heat stroke is the most serious heat-related illness. It occurs when the body becomes unable to control its temperature.

- the body's temperature rises rapidly, and
- the body is unable to cool down.

Body temperature may rise to 106°F or higher within 10 to 15 minutes. Heat stroke can cause death or permanent disability if emergency treatment is not provided.

*Temperature taken rectally is the most accurate method.

Heat Cramps
If your body is dehydrated you might experience heat cramps.

**Symptoms:**
- Muscle pains or spasms, usually in the legs, abdomen, or arms.

Staying out of the heat and drinking water are key!