**A Call to Action: Few States Prioritize Formal Health Evaluation Following Suspected Cardiac Arrest in Athletes**

Shannon Lyon DO (Fellow), Samantha Freeze MS (Genetic Counselor), Benjamin Helm MS (Genetic Counselor), Adam Kean MD (Attending), Mark Ayers MD (Attending)

**Background**

Sudden cardiac arrest (SCA) accounts for half of all exercise-related deaths. Evaluation is crucial to determine the etiology, recurrence risk, and treatment. Enactment of return-to-play laws for concussion has been a successful public health initiative throughout the country. The prioritization of laws to reduce the incidence of student athletes with sudden cardiac arrest among state legislatures is less clear.

**Objective**

To define the prevalence of laws regarding return-to-play and evaluation of student athletes at risk for SCA relative to similar laws pertaining to concussion.

**Methods**

We reviewed each state’s statutes regarding SCA and compared them to similar laws pertaining to concussion in student athletes.

**Results**

Laws addressing SCA in student athletes are present in 21/50 (42%) states and 12/21 (57%) of these require evaluation by an appropriate health care provider before returning to play. This is defined as a physician or nurse practitioner in 8/12 (67%) of these states, thus 8/50 (16%) states require this standard of care after a suspected SCA during a sporting event. The education of coaches regarding cardiac arrest is required in only 16/50 (32%) of states.

In contrast, 49/50 (98%) states require evaluation and permission to return to play by a licensed medical professional after a concussion. Parental education on the risk of concussion is required in 40/50 (80%) states before the child can play. Coaching education on the recognition of concussion and the consequences of premature return-to-play is required in 46/50 (92%) states.

**Conclusions**

Few states prioritize formal health evaluation following SCA in athletes. In contrast, concussion return-to-play laws define concussion, require education of coaches, students, and parents, and require evaluation by a licensed medical provider in nearly all states. Similar definitive legislation may yield improved diagnosis and treatment for those athletes at risk for sudden cardiac death.