SUDDEN CARDIAC ARREST
A Fact Sheet for Student Athletes

FACTS
Sudden cardiac arrest can occur even in athletes who are in peak shape. Approximately 500 deaths are attributed to sudden cardiac arrest in athletes each year in the United States. Sudden cardiac arrest can affect all levels of athletes, in all sports, and in all age levels. The majority of cardiac arrests are due to congenital (inherited) heart defects. However, sudden cardiac arrest can also occur after a person experiences an illness which has caused an inflammation to the heart or after a direct blow to the chest. Once a cardiac arrest occurs, there is very little time to save the athlete, so identifying those at risk before the arrest occurs is a key factor in prevention.

WARNING SIGNS
There may not be any noticeable symptoms before a person experiences loss of consciousness and a full cardiac arrest (no pulse and no breathing).

Warning signs can include a complaint of:
- Chest Discomfort
- Unusual Shortness of Breath
- Racing or Irregular Heartbeat
- Fainting or Passing Out

EMERGENCY SIGNS – Call EMS (911)
If a person experiences any of the following signs, call EMS (911) immediately:
- If an athlete collapses suddenly during competition
- If a blow to the chest from a ball, puck or another player precedes an athlete’s complaints of any of the warning signs of sudden cardiac arrest
- If an athlete does not look or feel right and you are just not sure

How can I help prevent a sudden cardiac arrest?
Daily physical activity, proper nutrition, and adequate sleep are all important aspects of lifelong health. Additionally, you can assist by:
- Knowing if you have a family history of sudden cardiac arrest (onset of heart disease in a family member before the age of 50 or a sudden, unexplained death at an early age)
- Telling your health care provider during your pre-season physical about any unusual symptoms of chest discomfort, shortness of breath, racing or irregular heartbeat, or feeling faint, especially if you feel these symptoms with physical activity
- Taking only prescription drugs that are prescribed to you by your health care provider
- Being aware that the inappropriate use of prescription medications or energy drinks can increase your risk
- Being honest and reporting symptoms of chest discomfort, unusual shortness of breath, racing or irregular heartbeat, or feeling faint

What should I do if I think I am developing warning signs that may lead to sudden cardiac arrest?
1. Tell an adult – your parent or guardian, your coach, your athletic trainer or your school nurse
2. Get checked out by your health care provider
3. Take care of your heart
4. Remember that the most dangerous thing you can do is to do nothing

Developed and Reviewed by the Indiana Department of Education’s Sudden Cardiac Arrest Advisory Board (1-7-15)
CONCUSSION FACT SHEET FOR ATHLETES

CONCUSSION FACTS

- A concussion is a brain injury that affects how your brain works.
- A concussion is caused by a bump, blow, or jolt to the head or body.
- A concussion can happen even if you haven’t been knocked out.
- If you think you have a concussion, you should not return to play on the day of the injury and until a health care professional says you are OK to return to play.

CONCUSSION SIGNS AND SYMPTOMS

Concussion symptoms differ with each person and with each injury, and may not be noticeable for hours or days. Common symptoms include:

- Headache
- Confusion
- Difficulty remembering or paying attention
- Balance problems or dizziness
- Feeling sluggish, hazy, foggy, or groggy
- Feeling irritable, more emotional, or “down”
- Nausea or vomiting
- Bothered by light or noise
- Double or blurry vision
- Slowed reaction time
- Sleep problems
- Loss of consciousness

During recovery, exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse.

WHY SHOULD I REPORT MY SYMPTOMS?

- Unlike with some other injuries, playing or practicing with concussion symptoms is dangerous and can lead to a longer recovery and a delay in your return to play.
- While your brain is still healing, you are much more likely to have another concussion.
- A repeat concussion in a young athlete can result in permanent damage to your brain. They can even be fatal.
WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?

DON’T HIDE IT. REPORT IT.
Ignoring your symptoms and trying to “tough it out” often makes symptoms worse. Tell your coach, parent, and athletic trainer if you think you or one of your teammates may have a concussion. Don’t let anyone pressure you into continuing to practice or play with a concussion.

GET CHECKED OUT.
Only a health care professional can tell if you have a concussion and when it’s OK to return to play. Sports have injury timeouts and player substitutions so that you can get checked out and the team can perform at its best. The sooner you get checked out, the sooner you may be able to safely return to play.

TAKE CARE OF YOUR BRAIN.
A concussion can affect your ability to do schoolwork and other activities. Most athletes with a concussion get better and return to sports, but it is important to rest and give your brain time to heal. A repeat concussion that occurs while your brain is still healing can cause long-term problems that may change your life forever.

“IT’S BETTER TO MISS ONE GAME, THAN THE WHOLE SEASON.”

JOIN THE CONVERSATION AT www.facebook.com/CDCHeadsUp

TO LEARN MORE GO TO >> WWW.CDC.GOV/CONCUSSION

Content Source: CDC’s Heads Up Program. Created through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).
CONCUSSION and SUDDEN CARDIAC ARREST  
ACKNOWLEDGEMENT AND SIGNATURE FORM  
FOR PARENTS AND STUDENT ATHLETES  

Student Athlete’s Name (Please Print): _____________________________________________________  

Sport Participating In (If Known): _______________________________ Date: ________________  

IC 20-34-7 and IC 20-34-8 require schools to distribute information sheets to inform and educate  
student athletes and their parents on the nature and risk of concussion, head injury and sudden cardiac  
arrest to student athletes, including the risks of continuing to play after concussion or head injury.  
These laws require that each year, before beginning practice for an interscholastic or intramural sport, a  
student athlete and the student athlete’s parents must be given an information sheet, and both must  
sign and return a form acknowledging receipt of the information to the student athlete’s coach.  

IC 20-34-7 states that a high school athlete who is suspected of sustaining a concussion or head injury in  
a practice or game, shall be removed from play at the time of injury and may not return to play until the  
student athlete has received a written clearance from a licensed health care provider trained in the  
evaluation and management of concussions and head injuries.  

IC 20-34-8 states that a student athlete who is suspected of experiencing symptoms of sudden cardiac  
arrest shall be removed from play and may not return to play until the coach has received verbal  
permission from a parent or legal guardian of the student athlete to return to play. Within twenty-four  
hours, this verbal permission must be replaced by a written statement from the parent or guardian.  

Parent/Guardian - please read the attached fact sheets regarding concussion and sudden cardiac arrest  
and ensure that your student athlete has also received and read these fact sheets. After reading these  
fact sheets, please ensure that you and your student athlete sign this form, and have your student  
athlete return this form to his/her coach.  

As a student athlete, I have received and read both of the fact sheets regarding concussion and sudden  
cardiac arrest. I understand the nature and risk of concussion and head injury to student athletes,  
including the risks of continuing to play after concussion or head injury, and the symptoms of sudden  
cardiac arrest.  

_____________________________________________________________ ___________________  
(Signature of Student Athlete) (Date)  

I, as the parent or legal guardian of the above named student, have received and read both of the fact  
sheets regarding concussion and sudden cardiac arrest. I understand the nature and risk of concussion  
and head injury to student athletes, including the risks of continuing to play after concussion or head  
injury, and the symptoms of sudden cardiac arrest.  

_____________________________________________________________ ___________________  
(Signature of Parent or Guardian if under 18) (Date)  

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