

**House Committee on Public Education**  
**Written Testimony on House Bill 2605 by Rep. Jon Rosenthal**  
**Texas Medical Association**  
*March 30, 2021*

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Honorable Chair Dutton and esteemed members:

Thank you for the opportunity to testify on behalf of the more than 55,000 physician and medical student members of the Texas Medical Association, Texas Pediatric Society, and Texas Chapter of the American College of Cardiology. Our testimony today speaks **on** House Bill 2605 by Rep. Jon Rosenthal, as we want to share a few considerations on the potential public health implications of the bill.

Our organizations appreciate the intent of this legislation aimed at addressing a serious concern about sudden cardiac arrest (SCA) among student athletes. In the United States, an estimated 2,000 patients younger than age 25 die each year of SCA.<sup>1</sup> At times, patients have displayed no symptoms of heart disease or may have overlooked symptoms before their death. For young adults who have underlying cardiovascular conditions, physical activity can increase the likelihood of SCA. We are reassured that the University Interscholastic League (UIL) already provides information regarding SCA to parents of students wishing to play sports in Texas. UIL also has videos on its website in English and Spanish that educate parents and students about the major warning signs of underlying heart disease that could increase the risk of SCA. Moreover, legislation passed during the previous legislative session supports the UIL position that parents also be notified of the availability of some medical tests, such as an electrocardiogram, which they can discuss with their physician to determine if the risks and benefits are appropriate for their child.

Considering the importance of this issue, we ask the committee to consider three major concerns about the bill:

1. We ask that the language ensure that Texas' scope of licensure laws are not improperly expanded. As drafted, we are concerned the bill does not properly qualify what health care professionals are legally authorized to do within their state-issued license or other certification. This can result in confusion and ultimately put student health and safety at risk.

For example, a Texas physician should make the determination of whether a student is able to safely return to an athletic activity after being removed for loss of consciousness, a warning sign for SCA. As drafted, a nonphysician would be allowed to determine whether a student is experiencing SCA after loss of consciousness for the purpose of releasing the student back into an athletic activity. First, this is impermissible under scope of licensure laws in Texas without proper delegation. Second, the proposal goes against national organization recommendations, such as those of the American Heart Association and the American Academy of Pediatrics, which call for a licensed physician to perform a thorough physical exam, including a medical history of the student, as the most efficient way to identify potential health problems. Therefore, to comply with Texas law and to

protect Texas' student athletes, the responsibility of clearing the student for play after exhibiting warning signs or symptoms of SCA or experiencing an episode of loss of consciousness should also reside with the student's physician. This is also consistent with how a student is permitted to return to an activity after being removed from play due to a suspected concussion.

2. Regarding information sessions, it is important that students, their coaches, and parents are empowered and feel comfortable identifying the associated warning signs and symptoms of SCA, including loss of consciousness. To the extent the school invites an expert to speak on this topic, we ask that it be a licensed physician with experience in youth sudden cardiac arrest, such as a pediatric cardiologist. We also strongly suggest that any information sessions be devoid of conflict of interest. Therefore any individual delivering an information session should NOT work for a company that provides athletic screenings for a price.
3. Any materials developed under this bill to distribute to students and caregivers on identifying warning signs of SCA and the availability of an electrocardiogram should be (1) based on peer-reviewed evidence, (2) developed in collaboration with the Texas Department of State Health Services to ensure input by an agency focused on public health, and (3) be correctly identified as "informational" and not "guidelines" to avoid inappropriately creating any standard of care.

Our organizations thank you for your passion for ensuring the health and safety of our young athletes, and we are ready to work with you on science-based solutions. Thank you very much for the opportunity to comment. Should you have any questions, please do not hesitate to contact Troy Alexander, director, TMA Legislative Affairs, at [Troy.Alexander@texmed.org](mailto:Troy.Alexander@texmed.org).

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<sup>1</sup> Policy statement: Pediatric sudden cardiac arrest. *Pediatrics*. 2012. 129: e1094-e1102.