



WHO WE PLAY FOR

FREQUENTLY ASKED QUESTIONS

Your School cares about your child's heart health, so we are partnering with Who We Play For to screen athletes with an ECG (electrocardiogram). An ECG, also known as an EKG, can detect issues in the heart that can be missed in a standard physical. Please consider signing up your child for this very important screening.

Here are some Frequently Asked Questions (FAQ) on the program:

What is Sudden Cardiac Arrest (SCA)?

Sudden Cardiac Arrest (SCA) is the immediate loss of electrical function of the heart caused by an abnormal heart rhythm called ventricular fibrillation. SCA occurs suddenly, without warning, and causes the heart to stop pumping blood to the body. Sudden Cardiac Arrest is not the same as a heart attack.

Sudden Cardiac Arrest is:

- The **#1 Killer of Student Athletes** in the United States, accounting for 75% of all athlete related deaths
- The **#1 Killer of Students** while on school campuses, two-thirds occurring with exercise or activity
- The **#2 Medical Cause of Death** in all of our children
- The **First reported symptom** in half of all cases

Why should my child get a cardiac screening?

The human body, including the heart, changes during puberty in a variety of ways. In middle school, student athletes learn how to push their bodies to new levels as they mature and grow. Because of these physical changes and the increased stresses on a student athlete's heart, cardiac screening should be part of a physical at least once while in middle school and once in high school.

Electrocardiogram (ECG) screening can help detect problems before they become major medical issues. While we recommend all student athletes get an ECG, you should definitely be screened if you:

- Have a family history of heart disease or SCA
- Experience dizziness or fainting spells during or after exercise/activity
- Experience extreme fatigue or unusual shortness of breath during or after exercise
- Experience chest pain during exercise
- Experience racing or irregular heartbeats



How is the cardiac screening done?

Cardiac screening with an ECG can detect a variety of potentially fatal diseases that disturb a heart's normal electrical function such as Hypertrophic Cardiomyopathy (HCM), Long QT Syndrome, and Wolff-Parkinson-White Syndrome. An ECG records the electrical activity of the heart and measures the electrical signals the heart uses to contract and circulate blood through the body and lungs. An ECG involves placing electrodes on the chest around the heart to record those signals. Once the screening is complete, our team of cardiologists will review your child's ECG, alongside their personal and family health history, to make a determination on your child's heart health. The test is easy, painless, non-invasive, and takes less than 5 minutes to perform. It does not involve needles, blood work, radiation exposure or sedation.

How often do you find a problem?

Statistics show that **1 in 300 youth have an undetected heart condition** that puts them at risk for sudden cardiac arrest. Statistics also show that 1 in 500 youth have a heart condition called Hypertrophic Cardiomyopathy which is the most common cause of Sudden Cardiac Arrest/Death in people under the age of 30. If our cardiologists determine your child's ECG is abnormal their consultation will most often include a recommendation for an echocardiogram (Echo) to take a better look at the heart. The Echo is used to get a picture of the heart, similar to an ultrasound used to look at a baby during pregnancy. The Echo looks for heart valve and vein structure abnormalities, muscle thickness, and proper heart function.

Will I see the results of my child's ECG?

Yes. After the ECGs are interpreted they will be returned to the school within 3 business days with each identified as either low risk, follow-up or high risk. A copy of the ECG will be returned along with information about the potential abnormalities our cardiologists identified and how you should proceed with your child's medical care. **Once your child's ECG is returned, we encourage you to share it with your child's pediatrician so they can add it to your child's medical records.**

Who reads the ECG?

Who We Play For has a team of cardiologists that read every electrocardiogram WWPF performs. They have many years of experience and are uniquely qualified and trained to understand the student athlete population.

What if my child needs a follow-up?

An abnormal ECG flagged as follow-up means additional testing is needed to see what is causing the abnormality identified on the ECG – think of it as a yellow caution light. The consultation will include documentation on what the potential abnormalities may be as well as resources with cardiologists serving your community that you can connect with to continue your child's medical care. If your child is flagged as follow-up, typically he or she can continue participating in the school's sports program and their normal exercise/activity routine. However, per our cardiologist's medical direction your child needs to visit a cardiologist within 3 months to determine why their ECG was abnormal.



What if my child is considered high risk?

If your child is flagged as high risk, it is like a red traffic light. He or she should not participate in sports or exercise/activity in any way (practice, games, scrimmages, etc.) until he or she has seen a specialist and received clearance or treatment. WWPF will provide you resources with cardiologists serving your community that you can connect with to continue your child's medical care.

How much will this cost?

An ECG screening with WWPF is \$20 compared to a doctor's appointment with an ECG which may cost \$150 or more. It is our core belief that every child deserves to have their heart checked so we will continue to offer these screenings as affordable as possible.

Isn't this covered with the annual physical?

The cardiac exam of the annual sports physical is limited to family, and personal, health history questions, and requires a doctor to listen to the student's heart with a stethoscope. Studies have shown that this is just 1% effective at identifying abnormalities that may lead to SCA. The addition of an ECG screening can increase the effectiveness up to 85%. WWPF's cardiologists have special training and years of experience with student athlete ECGs, which results in more accurate exams.

Do we need to do this every year?

ECG screening should be part of a physical at least once while in middle school and once in high school due to the physical changes and the increased stresses on a student athlete's heart, which occur during that timeframe. However, encourage your children to be open and honest about how they physically feel and if at any time your child begins to experience any of the symptoms listed above, take immediate action with your child's physician.

Are boys and girls screened together?

No, boys and girls must be screened separately so arrangements are made for privacy. Boys and girls may need to remove their shirts. Girls, however, should wear a regular bra or sports bra, which will not need to be removed.

Where can I find out more information?

You can visit our website at: www.whoweplayfor.org

Email: stacey.sima@whoweplayfor.org OR evanernst@whoweplayfor.org