Ohio (HB 47) Proponents Hearing
Testimony of Anastasia Fischer, M.D., FACSM, ACSM Immediate Past President

Chairman Huffman, Vice Chairman Johnson, Ranking Member Antonio, and members of the Senate Health Committee, my name is Dr. Anastasia Fischer. I am a Sports Medicine Physician in Columbus where I have provided care to middle school and high school aged athletes for over 18 years. I also serve as immediate past president of the American College of Sports Medicine and, on behalf of our 50,000 members and certified professionals, I thank you for allowing me to speak in favor of House Bill 47.

Sudden cardiac arrest is a devastating occurrence in a child. Unfortunately it is the most common cause of death in young athletes. Many of these arrests are noted to occur in presumably healthy kids, commonly athletes, but arrest can also be seen in non-athlete students. The goal is to prevent a cardiac arrest from becoming a cardiac death.

Once the heart rhythm arrests, and blood stops pumping, experts agree that you have 3 to 5 minutes to get blood pumping again, or permanent injury or death can occur. These minutes are critical. The injury must be recognized, witnesses must swing into action, and care must be delivered. Three minutes is an excruciatingly short period of time.   The single greatest factor in determining survival of these victims is the time from the onset of arrest to use of an AED. Fortunately, over 90% of cases of cardiac arrest in middle schoolers and high schoolers are witnessed. While overall, there is only about a 50% survival for sudden cardiac arrest, studies have shown that performance of CPR can improve survival to 63%, but application of an AED in the appropriate amount of time increases survival to a remarkable 89%.

But this takes practice. Knowing that sudden cardiac arrest can happen in otherwise healthy appearing children, knowing how to recognize signs and symptoms of sudden cardiac arrest, knowing where the AED is in your school or athletic venue, knowing how to use it, and practicing an emergency action plan will substantially decrease time to the first shock in an emergency. It will save lives.

Linsday's Law was an admirable piece of legislation that has increased awareness of the condition of sudden cardiac arrest in our Ohio communities. But unfortunately, just being aware of the condition has not always equaled the provision of care. Sudden cardiac arrests have happened in Ohio schools and the AED at the school was not used. Why? Because people didn't know where it was or didn't know how to use it.

When my eldest daughter was in the sixth grade, we did a project in her Girl Scout group on an emergency action plan to supplement their Health Class. They were learning about CPR, so we spent an afternoon practicing what the girls would do if they witnessed an arrest. A girl (tagged to be the victim), would slump on the playground. The girls would recognize that she was unresponsive and organize amongst themselves who would run to get a teacher, who would try to help call 911 and which two girls would run to get the AED out of the cafeteria. I had post-it notes on the AED box, and the girls would grab one, run back and put the sticker on the "victim's" shirt. We then practiced how to hit the button and place the pads. They could do it in less than 3 minutes and they were 11 years old. AEDs are increasingly less expensive to purchase, small and easy to

carry, have audible prompts to tell the users what to do, and will not provide a shock to a heart that does not need it.

As Dr. Naomi Kertesz, the director of electrophysiology at Nationwide Children's likes to teach: schools commonly do fire drills every month, despite the fact that a child has not died in a school fire in over 70 years. The last sudden cardiac arrest we had in an Ohio school was last year. This bill will provide AEDs where they are needed, education to those who can use them to recognize and provide care, and practice to ensure it can be done in time. This bill will save lives.

Anastasia Fischer, M.D., FACSM