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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2025

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A N A C T

RELATING TO EDUCATION – THE CHILDREN’S CARDIAC SAFETY ACT

Introduced By: Representatives Carson, Donovan, Cotter, Kazarian, Ackerman,
Cortvriend, Fogarty, Diaz, Boylan, and Speakman
Date Introduced: January 16, 2025

Referred To: House Education

It is enacted by the General Assembly as follows:

1 SECTION 1. Title 16 of the General Laws entitled "EDUCATION" is hereby amended by
2 adding thereto the following chapter:

3 CHAPTER 91.2

4 THE CHILDREN'S CARDIAC SAFETY ACT

5 **16-91.2-1. Title.**

6 This chapter shall be known and may be cited as the "The Children's Cardiac Safety Act".

7 **16-91.2-2. Definitions.**

8 As used in this chapter, the following words and phrases shall have the following meanings,
9 unless the context clearly indicates otherwise:

10 (1) "Commissioner" or "education commissioner" means the commissioner of elementary
11 and secondary education as described in §16-60-6.

12 (2) "Healthcare professional" means a physician, advanced practice nurse, or physician
13 assistant.

14 (3) "PPE" means a preparticipation physical examination for student athletes.

15 (4) "School district" includes all traditional public schools as well as charter public schools
16 and mayoral academies.

17 **16-91.2-3. Annual examinations.**

18 (a) A registered, licensed, and certified healthcare professional who performs an annual
19 physical examination of a child nineteen (19) years of age or younger shall include as part of that

1 examination questions that evaluate a child's family history related to cardiac conditions contained
2 in the "preparticipation physical evaluation" form developed jointly by the American Academy of
3 Family Physicians, American Academy of Pediatrics, American College of Sports Medicine,
4 American Medical Society for Sports Medicine, American Orthopaedic Society for Sports
5 Medicine, American Osteopathic Academy of Sports Medicine and the American Heart
6 Association's fourteen (14) point screening for heart disease in youth.

7 (b) The evaluation required by this section shall include:

8 (1) A question regarding the biologic heart health history of the child, including any history
9 of sperm or egg donors and biological parents; and

10 (2) Four (4) specific questions regarding biologic heart health history during cardiac
11 screening in well-child visits and in preparticipation physical examinations, including:

12 (i) "Have you ever fainted, passed out, or had an unexplained seizure suddenly and without
13 warning, especially during exercise or in response to sudden loud noises, such as doorbells, alarm
14 clocks, and ringing telephones?";

15 (ii) "Have you ever had exercise related chest pain or shortness of breath?";

16 (iii) "Has anyone in your immediate family (parents, grandparents, siblings) or other, more
17 distant relatives (aunts, uncles, cousins) died of heart problems or had an unexpected sudden death
18 before age fifty (50) years?" This question would include unexpected drownings, unexplained auto
19 crashes in which the relative was driving, or sudden infant death syndrome ("SIDS"); and

20 (iv) "Are you related to anyone with hypertrophic cardiomyopathy or hypertrophic
21 obstructive cardiomyopathy, Marfan syndrome, arrhythmogenic cardiomyopathy, long QT
22 syndrome, short QT syndrome, Brugada syndrome, catecholaminergic polymorphic ventricular
23 tachycardia, Wolff-Parkinson-White syndrome or anyone younger than fifty (50) years with a
24 pacemaker or implantable defibrillator?";

25 **16-91.2-4. Guidance provided.**

26 (a) The department of elementary and secondary education and the department of health
27 shall collaborate and work in conjunction and set forth guidance to both public and private schools
28 and require that prior to the participation of any student enrolled in grades kindergarten through
29 twelve (12) on a school or community organization sponsored interscholastic or intramural athletic
30 team or squad, the student shall have a physical examination using the "preparticipation physical
31 evaluation" form developed jointly by the American Academy of Family Physicians, American
32 Academy of Pediatrics, American College of Sports Medicine, American Medical Society for
33 Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic
34 Academy of Sports Medicine and the American Heart Association's fourteen (14) point screening

1 for heart disease in the young. The preparticipation physical evaluation form shall include the
2 history and physical examination components, and the additional questions required pursuant to
3 the provisions of this chapter. The preparticipation physical evaluation form shall also include a
4 certification statement, to be signed by the registered, licensed, and certified healthcare professional
5 who performed the physical examination, attesting to the completion of the current professional
6 development module established pursuant to this chapter.

7 (b) This physical examination shall be conducted within six (6) weeks prior to the first day
8 of official practice in an athletic season and shall be conducted by a registered, licensed, and
9 certified healthcare professional. A copy of the completed preparticipation physical evaluation
10 form shall be submitted to the school district of the school for which the student shall be
11 participating in athletics. All preparticipation physical evaluations shall be updated in accordance
12 with the PPE Monograph developed jointly by the American Academy of Family Physicians,
13 American Academy of Pediatrics, American College of Sports Medicine, American Medical
14 Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, the American
15 Osteopathic Academy of Sports Medicine and the American Heart Association's fourteen (14) point
16 screening for heart disease in the young and ask if the student has:

17 (1) Been advised by a registered, licensed, and certified healthcare professional defined as
18 physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) not to
19 participate in a sport;

20 (2) Sustained a concussion, been unconscious or lost memory from a blow to the head;

21 (3) Broken a bone or sprained, strained, or dislocated any muscles or joints;

22 (4) Fainted or blacked out;

23 (5) Experienced chest pains, shortness of breath, or heart racing;

24 (6) Had a recent history of fatigue and unusual tiredness;

25 (7) Been hospitalized, visited an emergency room, or had a significant medical illness;

26 (8) Started or stopped taking any over the counter or prescribed medication(s);

27 (9) Had a sudden death in the family, or whether any member of the student's family under
28 the age of fifty (50) years has had a heart attack or heart trouble; and

29 (10) Asked specifically the new four (4) questions listed in this section regarding the heart
30 health history during cardiac screening in a well-child visit and/or PPE.

31 (c) A school committee or board of education of a public school district and the governing
32 board or chief school administrator of a nonpublic school shall not permit a student enrolled in
33 grades kindergarten through twelve (12) to participate on a school or community based organization
34 sponsored interscholastic or intramural athletic team or squad unless the student has completed a

1 preparticipation physical evaluation form and, if applicable, a completed health history update
2 questionnaire as required under this chapter.

3 **16-91.2-5. Single form.**

4 The department of health shall create a single form, including the contents required by this
5 chapter, to be utilized in all preparticipation physical evaluations statewide.

6 **16-91.2-6. Screening module.**

7 (a) The state departments of elementary and secondary education and health shall establish
8 a childhood cardiac screening professional development module to increase the assessment skills
9 of those healthcare practitioners who perform well-child physical examinations and screenings.
10 The department shall either develop a module adhering to requirements in this chapter or adopt the
11 module created by the commissioner of elementary and secondary education and the director of the
12 department of health, in consultation with the Rhode Island chapter of the American Academy of
13 Pediatrics, the Rhode Island Academy of Family Physicians, the American Heart Association, and
14 the Rhode Island Chapter of the American College of Cardiology.

15 (b) If the commissioner of education and the director of the department of health choose to
16 develop a new module they shall, in consultation with the Rhode Island chapter of the American
17 Academy of Pediatrics, the Rhode Island chapter of the Academy of Family Physicians, the
18 American Heart Association, and the Rhode Island chapter of the American College of Cardiology,
19 develop, by the 2026-2027 school year, a childhood cardiac screening professional development
20 module to increase the assessment skills of those healthcare practitioners who perform well child
21 physical examinations and screenings. The module shall include, but need not be limited to, the
22 following:

23 (1) How to complete and review a detailed medical history with an emphasis on
24 cardiovascular family history and personal reports of symptoms;

25 (2) Identifying symptoms of sudden cardiac arrest that may require follow up with a
26 cardiologist;

27 (3) Recognizing normal structural changes of the athletic heart;

28 (4) Recognizing prodromal symptoms that precede sudden cardiac arrest;

29 (5) Performing the cardiovascular physical examination;

30 (6) Reviewing the major etiologies of sudden unexplained cardiac death with an emphasis
31 on structural abnormalities and acquired conditions;

32 (7) When to refer a student to a cardiologist for further assessment; and

33 (8) Incorporate current best practices.

34 (c) The module shall be posted on the websites of the state department of elementary and

1 secondary education and the department of health and links shall be made available to the American
2 Academy of Pediatrics, the Academy of Family Physicians, the American Heart Association, the
3 American College of Cardiology, the Rhode Island athletic trainers' association, the Rhode Island
4 board of medical licensure and discipline, the Rhode Island board of nursing, and the Rhode Island
5 academy of physician's assistants.

6 (d) Providers completing the childhood cardiac screening will be registered in a database
7 to ensure all providers have successfully completed the required modules. This data shall be held
8 and retained for ten (10) years.

9 (e) The department of health shall compile and publish on its website an annual report
10 containing the total number of exams that were completed and the number of referrals that were
11 made to a cardiologist. This report shall also analyze the outcomes of this data and include any
12 recommendations for changes.

13 **16-91.2-7. Pamphlet prepared.**

14 (a) The education commissioner, in consultation with the director of the department of
15 health, the American Heart Association, and the American Academy of Pediatrics, shall develop a
16 pamphlet that provides information about diseases that can cause sudden cardiac arrest to children
17 and their parents. The pamphlet shall include an explanation of sudden cardiac arrest, its incidence,
18 a description of early warning signs, and an overview of the options that are privately available to
19 screen for cardiac conditions that may lead to sudden cardiac arrest, including a statement about
20 the limitations of these options.

21 (b) The commissioner shall distribute the pamphlet, at no charge, to all school districts in
22 the state. The commissioner shall update the pamphlet as necessary, and shall make additional
23 copies available to nonpublic schools upon request.

24 (c) Beginning in the 2026-2027 school year, each school district shall annually distribute
25 this pamphlet to the parents or guardians of students participating in school sports as part of the
26 student's preparticipation physical examination and completion of athletic permission forms. A
27 student and their parent or guardian shall certify in writing that they received and reviewed the
28 pamphlet.

29 **16-91.2-8. Childhood cardiac screening.**

30 (a) A registered, licensed, and certified healthcare professional who performs annual
31 physical examinations of children nineteen (19) years of age or younger, including examinations
32 prior to the students participation in a school or community based organization sponsored
33 interscholastic or intramural athletic team or squad as required under this chapter, shall complete
34 the childhood cardiac screening professional development module established by the department

1 of health under this chapter and read the associated pamphlet every four (4) years.

2 (b) A contract between a school district and a school physician shall include a statement of
3 assurance that the school physician has completed the childhood cardiac screening professional
4 development module and associated pamphlet under this chapter within the past four (4) years.

5 (c) A registered, licensed, and certified healthcare professional who completes the
6 childhood cardiac screening professional development module as required pursuant to this chapter
7 shall retain on file at that person's professional office a hard copy of the certificate of completion
8 of the module. The hard copy of the certificate of completion of the module shall be made available
9 upon request.

10 **16-91.2-9. Consistency with other chapters.**

11 The provisions of this chapter are intended to support, expand upon, and be consistent with
12 the provisions of chapter 91.1 of title 16 ("the sudden cardiac arrest prevention act"). To the extent
13 there are any express conflicts between these chapters that cannot be resolved, the provisions of
14 this chapter 91.2 of title 16 shall supersede any conflicting provisions in chapter 91.1 of title 16.

15 **16-91.2-10. Rules and Regulations.**

16 The education commissioner and the director of the department of health shall
17 collaboratively promulgate rules and regulations to effectuate the provisions of this chapter,
18 pursuant to chapter 35 of title 42 ("administrative procedures").

19 SECTION 2. This act shall take effect on January 1, 2026.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO EDUCATION – THE CHILDREN’S CARDIAC SAFETY ACT

- 1 This act would establish "The Children's Cardiac Safety Act", and provide for childhood
- 2 cardiac screening based on modules that incorporate current best practices.
- 3 This act would take effect on January 1, 2026.

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