

Department of Legislative Services  
Maryland General Assembly  
2018 Session

FISCAL AND POLICY NOTE  
Third Reader - Revised

House Bill 668

(Delegate M. Washington, *et al.*)

Health and Government Operations

Finance

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**Pediatric Stroke - Awareness, Training, and Resource Materials**

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This bill requires the Maryland State Department of Education (MSDE) with the Maryland Department of Health (MDH) to provide awareness and training for directors of student services in local school systems on pediatric stroke. MDH must provide to MSDE for distribution to local school supervisors of health, resource information on pediatric stroke, including information on the warning signs of pediatric stroke.

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**Fiscal Summary**

**State Effect:** None as explained below.

**Local Effect:** None.

**Small Business Effect:** None.

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**Analysis**

**Background:** Stroke is usually associated with the elderly; however, stroke can occur before birth, in infants, children, and young adults. The [American Heart Association](#) reports that stroke is one of the top 10 causes of death for children. According to the [Children's Hemiplegia and Stroke Association](#) (CHASA) the risk of stroke in children is highest in the first year of life and peaks during the perinatal period (a few weeks before and after birth). MDH advises that early recognition of stroke symptoms is key to a favorable outcome for the child.

The symptoms and clinical presentation of pediatric stroke are different for children than they are for adults and the symptoms can vary by age. The most common early sign of

pediatric stroke is seizures. Other warning signs in children are a drooping face, arm weakness, and speech difficulty. Additional warning signs in children include severe sudden headache especially with vomiting and sleepiness; sudden weakness or numbness on one side of the body (face, arm and/or leg); sudden confusion, difficulty speaking or understanding others; sudden trouble seeing to one side or loss of vision; sudden difficulty walking, dizziness, loss of balance or coordination; and new onset of seizures usually on one side of the body.

About half of all children who have a stroke had a previously identified risk factor. According to the [American Stroke Association](#), sickle cell anemia or acquired heart disease are the most common underlying risk factors. Other risk factors for stroke in children include:

- head and neck infections;
- systemic conditions, such as inflammatory bowel disease and autoimmune disorders;
- head trauma;
- dehydration;
- maternal history of infertility;
- maternal infection in the fluid surrounding an unborn baby;
- premature rupture of membranes during pregnancy; and
- maternal preeclampsia.

**State Fiscal Effect:** MDH must provide resource information to MSDE on pediatric stroke to be distributed to local school supervisors of health. MHD advises that a quarter-time contractual research analyst is required to research and verify information on pediatric stroke. The Department of Legislative Services advises that this can likely be done using existing MDH staff; however, staff resources may need to be temporarily diverted from other MHD responsibilities and priorities.

MSDE advises that the MSDE Student Services Branch meets with Directors of Student Services and Directors of School Health Services several times a year; thus, these local school system staff can receive the required information required using existing resources and processes.

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## Additional Information

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** Maryland State Department of Education; Maryland Department of Health; American Heart Association; American Stroke Association; Children's Hemiplegia and Stroke Association; Department of Legislative Services

**Fiscal Note History:** First Reader - March 13, 2018  
mm/rhh Third Reader - March 28, 2018  
Revised - Amendment(s) - March 28, 2018

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