



Bill: HB 0935 Public High Schools – Venue Specific Emergency Action Plans – High School Football Games – Requirements

Date: March 27th, 2025

Position: Favorable with Amendments

Contact: Jane McClean, MATAGovernmentAffairs@gmail.com

Chair Feldman, Vice Chair Kagan, and the Education, Energy, and the Environment Committee,

As an athletic trainer, I have dedicated my life to sport safety. And as the Government Affairs Committee Chair for the Maryland Athletic Trainers' Association, I volunteer my time to make sure Athletic Trainers are properly represented and protected in Maryland legislation and regulations. I was very excited to see Delegate Roberts' initial version of this bill; however, as amended, we respectfully request amendments.

Athletic Trainers are uniquely qualified to be the healthcare provider for athletes. We have specialized knowledge in sports medicine including a deep understanding of sports-specific injuries, including concussions, sprains, strains, fractures, and overuse injuries. Athletic Trainers are trained to recognize these injuries early and provide immediate care, often preventing more serious outcomes.

Athletic Trainers have emergency care training that is essential in the fast-paced and high-impact environment of a football game, where injuries can occur unexpectedly and require rapid intervention. At schools with Athletic Trainers, Athletic Trainers are the ones writing the Emergency Action Plans (EAPs) and leading the coaches in required preseason rehearsals of the EAPs.

The MATA propose amendments to page 4: strike lines 18-21 and page 7: strike lines 15-18 which removes “2. AN INDIVIDUAL LICENSED OR CERTIFIED TO PROVIDE EMERGENCY MEDICAL SERVICES IN ACCORDANCE WITH § 13–516 OF THIS ARTICLE; 3. A NURSE LICENSED UNDER TITLE 8 OF THE HEALTH 18 OCCUPATIONS ARTICLE”.

AT's are those with specific education, including sports-specific injury training, on the field injury assessments, and “Coordination of care for other emergent injuries, including cervical spinal injury, concussion and closed head injury, major orthopedic injuries, and severe weather for outdoor facilities” as required on page 2 starting with line 5.

Additionally, COMAR already defines what “an individual licensed or certified emergency medical services” can provide. Volunteering to provide services are not allowed under



COMAR 30.02.03.01. “An individual licensed or certified emergency medical services” can only do so under “the oversight of an EMS operational program”.

The intent of HB 935 is to strengthen access to emergency treatment for football athletes in Maryland, but amendments are needed to ensure we achieve that goal. Thank you in advance for the time you will spend discussing how to improve youth safety in Maryland!

I am always happy to any questions that may arise.

Jane (Miraglia) McClean, MSHA LAT, ATC, CEIS
MATA Government Affairs Committee Chair

