February 22, 2026

Testimony of Laura Hale
American Heart Association
Favorable Sb 593 Education – Student Athletic Activities – Physical Examinations and Cardiovascular Prescreening

Dear Chair Feldman, Vice Chair Kagan and Honorable Members of the Education, Energy, and the Environment Committee,

Thank you for your time and consideration on this important legislation for heart health. My name is Laura Hale and I am the Director of Government Relations for the American Heart Association. The American Heart Association extends its support Senate Bill 593.

Parents, coaches, and teachers are the support system that allows student athletes to play safely and confidently. They know how important it is to check for heart problems early, detect potential issues, and protect every student before they step onto the field.

The heart is a complex organ, and there's no single test that can detect all indicators of heart conditions. That's why the American Heart Association, the American College of Cardiology and the Hypertrophic Cardiomyopathy Association support an evidence-based, layered approach (includes the assessment, any follow-up testing deemed necessary by a health care professional and cardiac emergency response plans). This surrounds student athletes with protection, checking for problems so they can be monitored and treated early, while also ensuring schools are prepared for emergencies if they occur.

This starts at a student's regular sports physical, with a full assessment that includes a physical exam and a review of personal and family history. This assessment is the best way for their health care professionals to identify serious conditions that may need additional testing.

These include heart failure (when the heart can't pump enough blood to meet the body's needs), hypertrophic cardiomyopathy (a genetic condition where the heart muscle becomes abnormally thick, which can interfere with normal blood flow), and coronary artery anomalies (when the arteries supplying blood to the heart are positioned or shaped differently than normal, which can restrict blood flow during exercise).

Since student athletes routinely undergo sports physicals, these visits create an efficient and cost-effective opportunity to conduct a heart assessment that can reveal conditions requiring further evaluation.

Even with careful evaluation, however, emergencies can still happen. This bill expands upon prior legislation (The Bailey Bullock Act) for cardiac emergency response plans, reinforcing an evidence-based layered approach to protecting young hearts.

Sudden cardiac arrest is the leading cause of death among student athletes, and nearly 38% of cardiac arrests in people under 18 happen during sports.

This reality makes school preparation critically important. Every environment where competitive athletes train or compete needs a cardiac emergency response plan that includes training in high-quality CPR, prompt access to an AED device, and a clear plan to get advanced medical care quickly in an emergency.

The research is clear. Performing CPR and using automated external defibrillators (AEDs) within 10 minutes significantly increases survival rates if someone experiences cardiac arrest outside a hospital. Every minute without intervention significantly decreases the chance of survival.

Preventing sudden cardiac arrest begins with early identification of heart conditions, improved education, CPR and AED readiness in schools, and stronger systems to protect the health and safety of our students.

Thank you for your attention and commitment to protecting young hearts. This legislation's evidence-based approach empowers families and health care professionals to decide together what's best, and help every student athlete stay healthy, safe, and in the game—from preseason to playoffs.

Together, we can empower families, coaches, teachers, and health care professionals to make informed decisions and provide safer school environments for Maryland's student athletes.

The American Heart Association urges a favorable report on SB 593.