

AN ACT concerning the health of student-athletes, amending P.L.2001, c.307 and P.L.2007, c.125, and supplementing Title 18A of the New Jersey Statutes and Title 45 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. Sections 2 through 4 of this act shall be known and may be cited as the “Scholastic Student-Athlete Safety Act.”

2. a. (New section) The board of education of a public school district and the governing board or chief school administrator of a nonpublic school shall require that prior to the participation of any student enrolled in grades six to 12 on a school-sponsored interscholastic or intramural athletic team or squad, the student shall have a medical examination using the “Preparticipation Physical Evaluation” form developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine. The Preparticipation Physical Evaluation form shall include the History and Physical Examination components.

b. The medical examination required by subsection a. of this section shall be conducted within 365 days prior to the first day of official practice in an athletic season and shall be conducted by a licensed physician, advanced practice nurse, or physician assistant. Each student whose medical examination was completed more than 90 days prior to the first day of official practice in an athletic season shall provide a health history update questionnaire, completed and signed by the student’s parent or guardian. The completed health history update questionnaire shall be reviewed by the school nurse and shall include information as to whether, in the time period since the date of the student’s last preparticipation medical examination, the student has:

- (1) been medically advised not to participate in a sport;
- (2) sustained a concussion, been unconscious or lost memory from a blow to the head;
- (3) broken a bone or sprained, strained, or dislocated any muscles or joints;
- (4) fainted or blacked out;
- (5) experienced chest pains, shortness of breath, or heart racing;
- (6) had a recent history of fatigue and unusual tiredness;
- (7) been hospitalized, visited an emergency room, or had a significant medical illness;
- (8) started or stopped taking any over the counter or prescribed medications; or

EXPLANATION – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

(9) had a sudden death in the family, or whether any member of the student's family under the age of 50 has had a heart attack or heart trouble.

c. A board of education of a public school district and the governing board or chief school administrator of a nonpublic school shall not permit a student enrolled in grades six to 12 to participate on a school-sponsored interscholastic or intramural athletic team or squad unless the student has a completed Preparticipation Physical Evaluation form and, if applicable, a completed health history update questionnaire as required by subsections a. and b. of this section.

3. a. (New section) The Commissioner of Education, in consultation with the New Jersey Chapter of the American Academy of Pediatrics, the New Jersey Academy of Family Physicians, the American Heart Association, and the New Jersey Chapter of the American College of Cardiology, shall develop, by the 2012-2013 school year, a Student-Athlete Cardiac Screening professional development module to increase the assessment skills of those medical professionals who perform student-athlete medical examinations and screenings. The module shall include, but need not be limited to, the following:

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

(2) identifying symptoms of sudden cardiac death that may require follow up with a cardiologist;

(3) recognizing normal structural changes of the athletic heart;

(4) recognizing prodromal symptoms that precede sudden cardiac death;

(5) performing the cardiovascular physical examination;

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

(7) when to refer a student to a cardiologist for further assessment.

b. The module developed pursuant to subsection a. of this section and the pamphlet developed pursuant to section 1 of P.L.2007, c.125(C.18A:40-41) shall be posted on the websites of the Department of Education, the American Academy of Pediatrics, the New Jersey Academy of Family Physicians, the American Heart Association, and the American College of Cardiology.

c. A physician, advanced practice nurse, or physician assistant who performs a student-athlete's annual medical examination prior to the student's participation in a school-sponsored interscholastic or intramural athletic team or squad shall complete the Student-Athlete Cardiac Screening professional development module developed pursuant to subsection a. of this section. Upon completion of the module, the physician, advanced practice nurse,

or physician assistant shall sign and submit a statement attesting to the completion of the module to the Commissioner of Education.

4. (New section) The New Jersey State Board of Nursing shall require that a person certified as an advanced practice nurse pursuant to P.L.1991, c.377 (C.45:11-45 et seq.) and who performs preparticipation medical examinations of student-athletes, as a condition of such continued certification, attest that he has completed the Student-Athlete Cardiac Screening professional development module developed pursuant to section 3 of P.L. , c. (C.) (pending before the Legislature as this bill) and has read the pamphlet developed pursuant to section 1 of P.L.2007, c.125(C.18A:40-41).

5. Section 1 of P.L.2007, c.125 (C.18A:40-41) is amended to read as follows:

1. a. The Commissioner of Education, in consultation with the Commissioner of Health and Senior Services, the American Heart Association, and the American Academy of Pediatrics, shall develop a pamphlet that provides information about sudden cardiac death to student-athletes and the parents or guardians of student athletes. The pamphlet shall include an explanation of sudden cardiac death, its incidence among student athletes, a description of early warning signs, and an overview of the options that are privately available to screen for cardiac conditions that may lead to sudden cardiac death, including a statement about the limitations of these options.

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

c. In the 2007-2008 through the 2011-2012 school ~~year~~ and in each school year thereafter years, each school district shall distribute the pamphlet to the parents or guardians of students participating in school sports.

d. In the 2012-2013 school year and in each subsequent school year, a school district shall distribute the pamphlet to each student-athlete and to the parents or guardians of student-athletes, as part of the student's preparticipation medical examination and completion of athletic permission forms. A student-athlete and the parent or guardian of the student-athlete shall certify in writing that they received and reviewed the pamphlet.

(cf: P.L.2007, c.125)

6. Section 10 of P.L.2001, c.307 (C.45:9-7.1) is amended to read as follows:

10. a. Except as provided in paragraph (2) of subsection d. of this section, the State Board of Medical Examiners shall require each person licensed as a physician, as a condition for biennial

registration pursuant to section 1 of P.L.1971, c.236 (C.45:9-6.1), or as a podiatrist, as a condition for biennial registration pursuant to R.S.45:5-9, to complete a requisite number of credits of continuing medical education, all of which shall be in Category I or Category II as defined in subsection **[i.] j.** of this section.

b. The board shall:

(1) Establish standards for continuing medical education, including the subject matter and content of courses of study;

(2) Accredite education programs offering credit toward continuing medical education requirements or recognize national or State organizations that may accredit education programs;

(3) Allow satisfaction of continuing medical education requirements through equivalent educational programs, such as participation in accredited graduate medical education programs, examinations, papers, publications, scientific presentations, teaching and research appointments and scientific exhibits, and establish procedures for the issuance of credit upon satisfactory proof of attainment of these equivalent educational programs;

(4) Create an advisory committee to be comprised of at least five members, including representatives of the Medical Society of New Jersey, the Academy of Medicine of New Jersey, the New Jersey Association of Osteopathic Physicians and Surgeons, the New Jersey Podiatric Medical Society and such other professional societies and associations as the board may identify, to provide guidance to the board in discharging its responsibilities pursuant to this section; and

(5) Establish, through the promulgation of regulations, any specific courses or topics which, on the recommendation of the advisory committee created pursuant to paragraph (4) of this subsection and in the discretion of the board, are to be required, and designate which are the core requirements for continuing medical education, including the number of required hours, subject matter and content of courses of study.

c. Each hour of an educational course or program shall be equivalent to one credit of continuing medical education.

d. (1) The board may, in its discretion, waive requirements for continuing medical education on an individual basis for reasons of hardship such as illness or disability, retirement of license, or other good cause. A waiver shall apply only to the current biennial renewal period at the time of board issuance.

(2) The board may offset up to 10 percent of the requisite number of credits for continuing medical education biennially by the number of hours of volunteer medical services rendered by licensees, at the rate of one half of one credit of continuing medical education for each hour of volunteer medical service rendered, provided that such licensees shall be required to complete at least the core requirements established pursuant to paragraph (5) of subsection b. of this section. The board may reduce, in part, an application by a licensee to offset credits of continuing medical

education pursuant to this paragraph if the board finds, in its discretion, that the applicant requires such continuing medical education in order to maintain or restore professional competence, or may deny all such applications if the board finds that continuing medical education above the core requirements is necessary because of developments in science or technology. The board may also, in its discretion, and for good cause, notify a licensee that the licensee is ineligible to offset credits of continuing medical education pursuant to this paragraph for any other reason established by regulation by the board.

e. The board shall not require completion of continuing medical education credits for any registration period commencing within 12 months of the effective date of this section.

f. The board shall require completion of medical education credits on a pro-rated basis for any registration period commencing more than 12 months but less than 24 months from the effective date of this section.

g. The board shall require new licensees to successfully complete, within 24 months of becoming licensed, an orientation course, in those topics identified by the board through regulation, conducted by an organization recognized by the board.

h. The board shall not require a new licensee to complete required continuing medical education credits, other than the orientation course described in subsection g. of this section, for any registration period commencing within 12 months of the licensee's participation in and completion of an accredited graduate medical education program.

i. The board shall require a physician who performs preparticipation medical examinations of student-athletes to attest that he has completed the Student-Athlete Cardiac Screening professional development module developed pursuant to section 3 of P.L. , c. (C.) (pending before the Legislature as this bill) and has read the pamphlet developed pursuant to section 1 of P.L.2007, c.125(C.18A:40-41).

[i.] j. As used in this section:

"Category I and Category II" means those categories of medical education courses recognized by the American Medical Association, the American Osteopathic Association, the American Podiatric Medical Association, the Accreditation Council for Continuing Medical Education or other comparable organizations recognized by the board;

"Core requirements" means the continuing medical education determined by the board to be necessary to maintain currency in professional knowledge and skills in order to deliver competent care to patients; and

"Volunteer medical services" means medical care provided without charge to low-income patients for health care services for which the patient is not covered by any public or private third party

payer, in accordance with such standards, procedures, requirements and limitations as are established by the board.
(cf: P.L.2010, c.89, s.1)

7. (New section) The State Board of Education shall promulgate regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), necessary to effectuate the provisions of this act.

8. This act shall take effect on the first day of the fourth month next following the date of enactment, but the State Board of Education may take such anticipatory administrative action in advance thereof as shall be necessary for the implementation of this act.

STATEMENT

This bill would require public and nonpublic schools to require that any student enrolled in grades six to 12 have a medical examination prior to participation on a school-sponsored interscholastic or intramural athletic team or squad. The bill would require that the medical examination be conducted using the "Preparticipation Physical Evaluation" form, developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine.

The medical examination required under the bill must be conducted within 365 days prior to the first day of official practice in an athletic season and must be conducted by a licensed physician, advanced practice nurse, or physician assistant. If the exam is conducted more than 90 days prior to the first practice, the student also must submit a health history update questionnaire for review by the school nurse, which includes certain medical history information with regard to the time period since the date of the student's last preparticipation medical examination. Under the bill, a public or nonpublic school may not permit a student in grades six to 12 to participate in school-sponsored athletics unless the student has a completed Preparticipation Physical Evaluation form and, if applicable, a completed health history update questionnaire.

Current State Board of Education regulations require school districts to ensure that students in grades six to 12 have a medical examination prior to participation in school-sponsored athletics, with the findings of the examination documented on a form approved by the Commissioner of Education. This bill would require a medical exam for students in both public and nonpublic schools who participate in athletics and would require schools to

use the "Preparticipation Physical Evaluation" form developed by six major American medical societies.

The bill also directs the Commissioner of Education, in consultation with the New Jersey Chapter of the American Academy of Pediatrics, the New Jersey Academy of Family Physicians, the American Heart Association, and the New Jersey Chapter of the American College of Cardiology to develop, by the 2012-2013 school year, a Student-Athlete Cardiac Screening professional development module to increase the assessment skills of those medical professionals who perform student-athlete assessments and screenings. The bill provides that the module and the pamphlet developed pursuant to P.L.2007, c.125(C.18A:40-41) be posted on the websites of the Department of Education, the American Academy of Pediatrics, the New Jersey Academy of Family Physicians, the American Heart Association, and the American College of Cardiology.

Under the bill, a physician, advanced practice nurse, or physician assistant who performs a student-athlete's annual medical examination prior to the student's participation in a school-sponsored interscholastic or intramural athletic team or squad must complete the Student-Athlete Cardiac Screening professional development module. Upon completion of the module, the physician, advanced practice nurse, or physician assistant must sign and submit a statement attesting to the module's completion to the Commissioner of Education.

The bill also requires the completion of the Student-Athlete Cardiac Screening professional development module as a condition of continued licensing or certification for any physician or advanced practice nurse who performs preparticipation examinations of student-athletes.

P.L.2007, c.125 (C.18A:40-41), which was approved on August 6, 2007, directed the Commissioner of Education to develop a pamphlet that provides information about sudden cardiac death, its early warning signs, and its incidence among student athletes. The commissioner was to make the pamphlet available at no charge to all school districts, and in each school year, a school district was to distribute the pamphlet to the parents or guardians of students participating in school sports. This bill amends P.L.2007, c.125 (C.18A:40-41) to provide that beginning in the 2012-2013 school year, a pamphlet providing information about sudden cardiac death will be distributed to a student athlete and to his parents or guardians at the time of the student's preparticipation medical examination and completion of athletic permission forms. Both the student and his parents or guardians will certify in writing that they received and reviewed the pamphlet.

“Scholastic Student-Athlete Safety Act,” establishes measures to ensure health of student-athletes.