



Frisco ISD cares about your child's heart health, so we are partnering with Who We Play For –Cypress ECG Project to screen athletes with an ECG (electrocardiogram). An ECG, also known as an EKG, can detect issues in the heart that can be missed in a standard physical. Please consider signing your child up for this very important screening.

Here are some Frequently Asked Questions (FAQ) on the program:

Why should my child get a cardiac screening?

The human body changes during puberty both externally and internally in a variety of ways. One of these internal changes is the structure of the heart. In middle school, student athletes learn how to push their bodies to new levels as they mature and get bigger and stronger. Because of these physical changes and the increased stresses on a student athlete's heart, cardiac screening should be part of a physical at least once while in middle school and once in high school.

A simple cardiac screening can help detect problems before they become major medical issues. While we recommend all student athletes get an ECG, you should definitely be screened if you:

- ✓ compete in high impact sports that increases your heart rate for long periods of time
- ✓ have a family history indicating that there is a heart disease risk
- ✓ get dizziness during athletics
- ✓ experience fainting spells or weakness while participating
- ✓ get shortness of breath that does not clear quickly
- ✓ get chest pain while participating

How is the cardiac screening done?

Cardiac screening can detect a variety of potentially catastrophic genetic diseases. The simplest level of testing is an ECG, which looks at the electrical signals that the heart uses to contract and circulate blood through the body and lungs. An ECG involves placing electrodes on the chest around the heart to record those signals. The test is easy, painless, non-invasive and takes less than 5 minutes. It does not involve needles, blood work, radiation exposure or sedation. Boys will remove their shirts. Girls should wear a regular bra or sports bra, which will not need to be removed.

A Cardiologist familiar with the student athlete heart will review the ECG, which can detect a large number of heart diseases such as Hypertrophic Cardiomyopathy (HCM) or thickening of the heart, Long QT Syndrome, Wolff-Parkinson-White Disease, Arrhythmia, and Abnormal Right Ventricular Disease, which are all electrical conduction issues, can be detected with an ECG.

How often do you find a problem?

On average 95.5% of all student athletes have a normal ECG and are considered at low risk for cardiac issues.

In about 4% of all athletes, results are inconclusive or suggest something that requires further testing. Most often an Echocardiogram (Echo) is recommended. The Echo is used to get a picture of the heart similar to an ultrasound to look at a baby during pregnancy. The Echo looks for valve and vein structure, muscle thickness, and proper operation of the heart.

For more information, visit www.whoweplayfor.org or call 214-603-4522.

Most rarely, but most importantly, statistics show that 1 in 2000 student athletes are at risk for sudden cardiac death (0.5% overall).

Will I see the results of my child's ECG?

Yes. The interpreted ECGs will be returned to the school within 2 business days with a diagnosis of low risk, follow-up or high risk. A copy of the ECG will be returned as well as information about a potential diagnosis in cases of follow up or high risk designation.



Who reads the ECG?

Who We Play For has trained Cardiologists on staff who have read more than 50,000 student athlete ECGs since 2000. They are uniquely qualified to read this particular population – the student athlete.

What if my child needs a follow-up?

An abnormal ECG will be flagged as follow up, which means additional testing is needed to see what is causing that abnormality – think of it as a yellow caution light. The diagnosis will include some documentation on what the potential problem might be. We will provide the names and phone numbers of some recommended Cardiologists to visit in your area. Even if your child is flagged for a follow-up, he or she can continue participating in the school's sports program. **You'll just need to have your child visit a Cardiologist within 3 months to determine why the ECG came back abnormal.**

What if my child is considered high risk?

If your child is flagged as *high risk*, it is like a red light. He or she should not participate in sports in any way (practice, games, scrimmages, etc) until he or she has seen a specialist and received clearance or treatment. If you don't have one already, we will offer the contact information of Cardiologists in your area.

How much will this cost?

It's just \$15 per student. A typical doctor's appointment with ECG normally costs \$100 and up, so Frisco ISD is happy to offer our families this important heart screening at a huge savings.

Isn't this covered with the annual physical?

The annual physical exam asks family history questions, and requires a doctor to listen to the student's heart with a stethoscope. Studies have shown that this is just 1% effective in catching heart issues. Adding ECG screening improves the effectiveness in catching heart issues up to 85%. WWPF's *Cardiologists have special training and years of experience with student athlete ECGs, which results in more accurate exams.*

Do we need to do this every year?

Cardiac screening should be part of a physical at least once while in middle school and once in high school due to the physical changes and the increased stresses on a student athlete's heart, which occur during that timeframe. If your child is considered low-risk then those are the only two times recommended to get an ECG before adulthood.

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Are boys and girls screened together?

No, arrangements are made for privacy.

Where can I find out more information?

You can visit www.whoisplayfor.org or call 214-603-4522 to find out more.

