AGENDA
National Collegiate Athletic Association
Cardiac Task Force Meeting

NCAA national office
Wooden Summit Room

September 23-24, 2014

Day One

1. Welcome. (Brian Hainline)

2. Task force overview. (John Parsons)
   a. Purpose.
   b. Guiding questions.

3. Incidence of sudden cardiac death in NCAA student-athletes. (Kim Harmon)

4. Etiology of sudden cardiac death in NCAA student-athletes. (Joe Maleszewski)

5. Cardiac Screening:
      (1) NCAA guidance. (Parsons)
      (2) AHA recommendations. (Eduardo Sanchez)
   b. Cardiovascular screening research in college student-athletes.
      (1) Screening by hx & physical: benefits and limitations. (Paul Thompson)
      (2) The Harvard experience. (Aaron Baggish)
      (3) The NCAA ECG Study. (Jon Drezner)
   c. Presentation of clinical screening programs and outcomes.
      (1) Jon Drezner.
      (2) Joe Rogowski.
      (3) Michael Emery.
      (4) Ron Courson.
      (5) Andy Smith.
      (6) Others. (General discussion)

   Group One: A review of current NCAA legislation and guidance regarding
cardiac care of student-athletes. What are avenues to improve
detection of cardiac abnormalities under existing legislation and
guidance? Guidance on history? Guidance on physical examination?
Group Two: A discussion of whether to add ECG to history and physical examination recommendations based on available studies, medical consensus, and resource information.

Group Three: What are the resource (financial, personnel, equipment) considerations and estimates for the implementation of cardiovascular screening models in NCAA student athletes? Identification of ways that institutions across the three divisions could implement screening models.

7. Break-out group presentations and integration. (Jim Whitehead)

Day Two

8. When screening fails: management of cardiac emergencies in NCAA student-athletes.
   a. Emergency action plans. (Courson)
   b. The role of AEDs. (Smith)

9. Post-screening decision-making:
   a. Guidelines for physical activity recommendations in athletes with identified cardiovascular abnormalities. (Emery)
   b. Playing with an ICD: rational or reckless. (Silvana Molossi)
   c. Considerations in the long-term management of cardiovascular health in Athletes. (David Shipon)

10. Research and information needs - OPEN DISCUSSION.
    a. Incidence - mandatory reporting. (Discussion leader: Drezner)
    b. Etiology - standardized cardiac autopsy and genetic testing. (Discussion leaders: Harmon and Parsons)
    c. Managing screening outcomes. (Discussion leader: TBD)

11. Education and training needs. (Hainline)

12. Next step(s). (Hainline and Parsons)