

GEORGIA INDEPENDENT ATHLETIC ASSOCIATION STUDENT / PARENT SUDDEN CARDIAC ARREST AWARENESS FORM

LEARN THE EARLY WARNING SIGNS

If you or your child has had one or more of these signs, see your primary care physician:

- Fainting suddenly and without warning, especially during exercise or in response to loud sounds like doorbells, alarm clocks, or ringing phones.
- Unusual chest pain or shortness of breath during exercise.
- Family members who had sudden, unexplained and unexpected death before age 50.
- Family members who have been diagnosed with a condition that can cause sudden cardiac death, such as hypertrophic cardiomyopathy (HCM) or Long QT syndrome.
- A seizure suddenly and without warning, especially during exercise or in response to loud sounds like doorbells, alarm clocks, or ringing phones.

LEARN TO RECOGNIZE SUDDEN CARDIAC ARREST

If you see someone collapse, assume they have experienced sudden cardiac arrest and respond quickly. This victim will be unresponsive, gasping or not breathing normally, and may have some jerking (seizure-like activity). Call for help and start CPR. You <u>cannot</u> hurt them.

LEARN HANDS-ON CPR

Effective CPR saves lives by circulating blood to the brain and other vital organs until rescue teams arrive. It is one of the most important life skills you can learn – and it is easier than ever.

- Call 911 (or ask bystanders to call 911 and get an AED).
- Push hard and fast in the center of the chest. Kneel at the victim's side, place your hands on the lower half of the breastbone, one on top of the other, elbows straight and locked.
 Push down 2 inches, then up 2 inches, at a rate of 100 times/minute, to the beat of the song "Stayin' Alive."
- If an Automated External Defibrillator (AED) is available, open it and follow the voice prompts. It will lead you step-by-step through the process, and will never shock a victim that does not need a shock.

By signing this Sudden Cardiac	Arrest Form, we give permission to the school to transfer this
Form to all sports that this chi	ld may play. We are aware of the dangers of sudden cardiac
arrest and this signed Sudden	Cardiac Arrest Form will represent myself and this child during
the current school year	This form will be stored with the Athlete's Physical Form
and any other accompanying fo	orms required by the Georgia Independent Athletic Association
(GIAA).	

WE HAVE READ THIS FORM AND UNDERSTAND THE FACTS REPRESENTED IN IT.

SCHOOL NAME:		
STUDENT'S NAME:	(PRINTED)	STUDENT'S SIGNATURE:
PARENT'S NAME:	(PRINTED)	PARENT'S SIGNATURE:
	DATE SIGNED:	