

From: [Sunset Advisory Commission](#)
To: [Dawn Roberson](#)
Subject: FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)
Date: Tuesday, July 01, 2014 7:56:31 AM

-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]
Sent: Monday, June 30, 2014 10:52 PM
To: Sunset Advisory Commission
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Monday, June 30, 2014 - 22:52

Agency: UNIVERSITY INTERSCHOLASTIC LEAGUE UIL

First Name: Katie

Last Name: Stephens

Title:

Organization you are affiliated with: Cody Stephens Go Big or Go Home Memorial Foundation

City: Crosby

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or Opposed: In support of my dads testimony to add ecg's to sports physicals

Any Alternative or New Recommendations on This Agency:
Submitted by Katie Stephens on the UIL
On behalf of the Cody Stephens Foundation June 30, 2014

I submit these comments regarding the UIL for consideration by the Sunset Commission in honor of my late brother Cody Stephens, and on behalf of the "Cody Stephens Foundation". We are asking for support of changes in UIL policy regarding the physical examination that is currently given to all student athletes that participate in UIL sporting activities.

We recognize and respect that the UIL relies heavily on the American Heart Association's (AHA) 2012 policy paper on this issue, which does not recommend that ECGs or electrocardiograms be mandatory as part of pre-participation screening programs for student athletics. The paper notes:

"Instead, these tests should be used as follow up if an initial screening raises suspicions about the presence of a cardiovascular disease."

The AHA paper also cites a study that indicates a policy concern that some doctors may not be conducting student physicals to the standards they believe optimum. The paper reads: "Unfortunately, most physicians do not know or currently follow AHA's screening guidelines. According to a survey of pediatricians, family doctors, and high school athletic directors in Washington State, less than 6% of doctors follow national sudden cardiac death screening guidelines when performing physicals on high school athletes."

This is just one of many reasons we hope you encourage UIL policy changes that would enhance and update the student physicals that are currently required in Texas for all athletes participating in UIL sports. There are many others reasons that our physicals are outdated and should include an ECG. 80% of students that die never have a symptom. A system that relies on self-reporting is broken. ECG's can catch most heart issues. Harvard University conducted a study where an ECG Submitted by Katie Stephens on the UIL On behalf of the Cody Stephens Foundation June 30, 2014

caught 86% of the heart issues and the current pre-participation history and physical caught 3%.

We think it is important to point out that in the 30,000 ECG's that have funded and conducted through the "Cody Stephens Foundation", we have found 9 students who needed surgery. Again, we urge you to enhance student physicals to utilize the modern technology that is available today and affordable to implement.

Some of the arguments made against enhancing the already required physical examinations for student athletes can be described as making the perfect the enemy of the good. Summarized below are some of these arguments, along with a perspective that we believe is weighted more closely with the health interests of student athletes.

Arguments made against enhanced testing:

- We need more data. Sometimes there are false positives. The research is not clear and not all studies show the same results.
- Some students can't afford the test, so we can't require it.
- We can't require enhanced physicals for UIL athletic participants unless we are able to establish this requirement for all students in public schools.

Much of the "data" we are looking for comes with the cost of a funeral. The "data" has names such as Cody Stephens, Jason Mouton, Jacob Simmons, Cody Jones, Brandon Goyne, Falobi Akanbi, Mikey Pratt, Dustin Chan, Desmond Pollard, Amy Gonzales, and Mario Miranda. These student athletes are some of the "data" that we have known of in the past 2 years. We can do better if we screen our student athletes to catch them before a fatal event.

We would point out also that there is research that shows student athletes are 3.5 times greater risk that the general population. There is also research cited in the AMA policy paper that shows that hypertrophic cardiomyopathy (HCM) represents a "common cause of sudden death in young and previously undiagnosed African American male athletes, in sharp contrast with the infrequent clinical identification of HCM in a hospital-based population (i.e., by seven-fold). This discrepancy suggests that many HCM cases go unrecognized in the African American community, underscoring the need for enhanced clinical recognition of HCM to create the opportunity for preventive measures to be employed in high-risk patients with this complex disease."

The AED program we currently require in schools doesn't help the students not at school, and even then not all students are or can be revived in time. Current sports physicals being conducted should be enhanced to include an ECG at least twice in an athletes sports career.

Funding for students who can't afford the \$15 test could be made available from the steroid testing program revenues that is recommended for abolishment. Also, it is possible that funds could be made available from UIL proceeds that could be identified through more thorough review of the UIL budget, constitution, and rules that is included in Sunset staff recommendation #1.

To that end, we recommend the members of the Sunset Advisory Commission support the following modifications to Sunset staff recommendations:

Regarding Issue 1: UIL Lacks a Statutory Basis for Its Programs, and Its Governing Documents Do Not Ensure Open and Accountable Operations.

We recommend that modifications be made to this recommendation to ensure that proceeds and allocations from UIL sporting events are structurally reviewed, and transparent to the public, to determine possible program support for enhanced physicals for our student athletes.

We further recommend that this issue be modified to ensure that members of the Medical Advisory Committee or other advisory committees should be appointed with term limits, and that some structural accountability be put in place for parents who want to formally raise issues for consideration before an advisory committee. For example, currently appointees to the Medical Advisory Committee are appointed with no term limits. With only one doctor from a field, if that doctor has an opinion that is contrary to public opinion or others in his field, there is no one to debate that opinion and he is allowed to serve and express his opinion for as long as he or she likes. Term limits for any advisory board or member is an important part of public accountability, and we recommend that all such boards and appointees of UIL be structured to ensure accountability to stakeholders, parents and students.

Regarding Issue 4: Limited Funding and Changing Attitudes Have Reduced the Need For and Effectiveness of the State's Steroid Testing Program

We recommend that this issue be modified to transform the steroid testing and funding program into a program that supports enhanced physicals for student athletes participating in UIL programs.

In closing, we urge the UIL to fight against doing nothing. We urge the Legislature to fight against letting the perfect be the enemy of the good.

We urge all involved to give our student athletes and their families the assurance that all precautions have been taken to identify health issues that could be exacerbated to the point of being fatal. This can easily be done with the \$15 ECG test that is available today.

It's just not that much money. We urge the Legislature to consider the unintended consequences of ill-considered frugality. Our kids are worth the extra expense.

We believe the perspective of those families whose children might be alive today if enhanced physical exams had been conducted should be considered by policy makers as they address the future structure of the UIL, and that the highest regard for the health, safety, and welfare of student athletes should be reflected in all policies of the University Scholastic League.

Sincerely,

Katie Stephens
On Behalf of "The Cody Stephens Foundation"
Go Big or Go Home
<http://www.codystephensfoundation.org>

My Comment Will Be Made Public: I agree