Prevention and Treatment of Exertional Heat Illness

Presentation to the House PreK-12 Innovation Subcommittee

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Overview

OPPAGA’s research on the prevention and treatment of exertional heat illness included the following topics

1. Background Information
2. Florida’s High School Requirements
3. Florida’s Preparedness Practices
4. Florida Athletic Directors Survey Results
Background Information
Exertional heat illness is associated with sustained high body temperature, resulting from dehydration, strenuous exercise, and environmental heat exposure.

According to the Centers for Disease Control and Prevention, between 2005 and 2009, 9,237 high school athletes annually suffered time-loss heat illness nationwide.

**EHI Symptoms**
- Heat syncope – fainting or dizziness
- Inability to exercise in the heat
- Muscle cramps
- Heavy sweating
Exertional Heat Stroke

EHS is the most severe form of heat illness and occurs when the body’s natural cooling system becomes overwhelmed.

EHS can be diagnosed based on:
- Central nervous system dysfunction
- High core body temperature greater than 104°F

EHS can progress to multi-organ system failure and death unless promptly recognized and treated.

EHS Symptoms

- Dehydration
- Headache
- Dizziness
- Confusion
- Irritability
- Dry mouth
- Quick breathing
- Decreasing performance
- Weakness
- Low blood pressure
- Rapid pulse
- Muscle cramps
- Loss of balance
- Collapse
- Diarrhea
- Nausea or vomiting
- Profuse sweating or decreased sweating
# Best Practices for EHS Prevention

## Preparation

- Conduct an athlete physician-supervised, pre-participation medical screening assessment before the start of the season

- Follow a heat acclimatization schedule; gradually acclimate athletes to heat over a 7 to 14-day preseason practice schedule

- Measure environmental heat-stress conditions using the WetBulb Globe Temperature (WBGT) thermometer

## Continual Cooling

- Remove helmets during breaks

- Incorporate rest breaks

- Provide shade/cool areas

- Encourage fluid consumption

- Continue checking temperature
Best Practices for Treatment of EHS

Quickly cool the whole body to a temperature of 102 °F or below

- Remove excess clothing and equipment
- Assess rectal temperature at least once every 5-10 minutes
- Immerse individual in a pool or tub of cold water and stir water while cooling, commonly called cold water immersion
- After cooling, transport the individual to a medical facility
Florida’s High School Requirements
Florida High School Athletic Association (FHSAA) Requirements

The FHSAA has EHI/EHS prevention requirements for member schools, which self-report adherence to the requirements

Coaches and athletes must annually review the National Federation of State High School Association’s free education course on heat illness prevention

Schools must follow a heat acclimatization schedule for preseason practice

Schools must develop an Emergency Action Plan for managing serious and/or potentially life threatening injuries

Students must undergo a preseason pre-participation physical evaluation

The FHSAA does not regulate the athletic activities of member schools held with their own students during the summer with the exception of football. However, some sports may practice outside of the academic school year
Florida’s Preparedness Practices
2018 Evaluation of States’ EHS Preparedness Practices

The Korey Stringer Institute evaluated states’ high schools’ use of best practices for preventing and treating EHS in five areas

- Heat acclimatization practices (7 points)
- Environmental-based activity modifications (5 points)
- Preparation physical evaluation form (3 points)
- If EHS is suspected, use of cold water immersion tub before hospital transport (2 points)
- Cold water immersion tubs for onsite cooling (3 points)

Total: 20 Points
Florida High Schools EHS Preparedness

**Areas in Which Florida Scored Highest**

- **Heat acclimatization practices**: 7 points
- **Preparation physical evaluation screening**: 2 points

**Areas in Which Florida Scored Lowest**

- **Environmental-based activity modifications**: 5 points
- **Possession of cold water immersion tub(s)**: 3 points
- **Use of cold water immersion tub before hospital transport if EHS is suspected**: 3 points
Florida Athletic Directors Survey Results
Safety Protocols

Most schools reported that they have protocols that address preventing and treating EHI

86% of schools reported that they have written protocols for the prevention of EHI

86% of schools reported that they have written protocols for the treatment of EHI
Most schools reported that sports-related staff received training on EHI during the 2017-18 school year.

- 7% No EHI Training
- 93% EHI Training

Of the schools that reported that they received training, 95% said that they used the National Federation of State High School Associations’ (NFSHA) video on heat illness prevention.

Groups Trained:
- All coaches: 97%
- Student athletes: 86%
- Athletic trainers: 76%
- Parents: 6%
- Other: 4%
- Specific coaches: 1%
Training Topics Covered

While almost all schools reported that their training covered EHI and EHS warning signs, fewer reported that their training covered treatment of heat stroke and cold immersion administration.

<table>
<thead>
<tr>
<th>Training Topic</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>EHI warning signs</td>
<td>98%</td>
</tr>
<tr>
<td>EHS warning signs</td>
<td>95%</td>
</tr>
<tr>
<td>EHI prevention training</td>
<td>95%</td>
</tr>
<tr>
<td>Treating EHI</td>
<td>90%</td>
</tr>
<tr>
<td>Treating EHS</td>
<td>84%</td>
</tr>
<tr>
<td>Cold immersion administration</td>
<td>72%</td>
</tr>
</tbody>
</table>

28% of schools reported their training did not cover cold water immersion.
Cold Water Immersion Tubs

- EHS has a **100% survival rate** when **immediate cooling** is initiated within 10 minutes of collapse
- 100 gallon or more CWI tubs allow for whole body ice water immersion
- This technique involves placing the athlete's trunk and limbs in cold water (35 °F to 59 °F)
- The purpose is to lower the athlete's core body temperature to less than 102 °F

Our survey asked a series of questions related to the availability and use of CWIs at schools
CWI Tub Availability

The vast majority of schools had one or more CWI tubs; others most often reported that they were not sure of the reason they did not have tubs.

- 80% Had CWI tub(s)
- 20% No CWI tub

**Average number of tubs at schools=2**

**Maximum number of tubs at a school=8**

**Reason(s) for Not Having CWI Tubs**

- Not sure: 52%
- Adequate alternatives: 16%
- Stringent prevention measures: 16%
- No ice or water: 12%
- No trained staff: 8%
- Costly equipment: 8%
- Administrative burden: 4%
- Other: 4%

Average number of tubs at schools=2

Maximum number of tubs at a school=8
Approximately one-quarter (26%) of surveyed schools with a CWI tub reported using CWI tubs for EHI/EHS treatment during the 2017-18 school year.

- 74% Did not use CWI tub
- 26% Used CWI tub

CWI Tub Uses for EHI or EHS Treatment

- Average number of CWI tub uses per school: 3
- Maximum number of CWI tub uses at a school: 50
- Schools used a CWI tub more than once: 28
### Other Equipment and Supplies

Several other types of equipment and supplies have been recognized as important to prevent and treat exertional heat illness:

<table>
<thead>
<tr>
<th>Item</th>
<th>Function</th>
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</thead>
<tbody>
<tr>
<td>WetBulb Globe Thermometer</td>
<td>Measures multiple metrics (ambient temperature, humidity, sun angle, wind, and cloud cover) and determines environmental heat levels for athletes</td>
</tr>
<tr>
<td>Tents</td>
<td>Shelters athletes from radiant heat</td>
</tr>
<tr>
<td>Rectal thermometer with lubricating gel</td>
<td>Assesses the core body temperature of athlete</td>
</tr>
<tr>
<td>Ice and water</td>
<td>Used with tub, lowers the athlete’s core body temperature</td>
</tr>
<tr>
<td>Ice coolers</td>
<td>Stores ice during practice and games</td>
</tr>
<tr>
<td>Towels/Sponges</td>
<td>Cools surface temperature of athletes</td>
</tr>
</tbody>
</table>

Our survey asked a series of questions related to the availability of this equipment at schools.
Overall Availability of Supplies and Materials

Most schools reported that, overall, they believed their supplies were sufficient to prevent and treat exertional heat illness.

Supplies and Materials Available

- Ice: 99%
- Water: 99%
- Ice coolers: 95%
- Towels and sponges: 86%
- WetBulb Globe Thermometer: 32%
- Rectal thermometer: 21%
- Lubrication for rectal thermometer: 19%

Given the importance of WBGT in the literature that we reviewed, we asked the reason why schools did not have them. Most often (47%) they reported using some other item instead, but 51% said that they were unsure or unaware of WBGTs. Few schools (8%) cited cost.
Heat Acclimatization Schedules

Although the FHSAA requires all member schools to use a 14-day, graduated heat acclimatization schedule, nearly one-third of schools reported that they did not meet this requirement, and 14% did not know if they had a schedule.

- Schedule was more than 14 days: 5%
- 14-day schedule: 52%
- Schedule was fewer than 14 days: 24%
- No schedule: 5%
- Not aware if school had schedule: 14%

43% of athletic directors reported acclimatization schedules that did not meet FHSAA requirements or they were not aware of their schedules.
Prevalence of EHI and EHS for the 2017-2018 School Year

Over one-third (95 of 258) of schools that responded to our survey reported treating students for EHI during 2017-18 school year; no school reported student fatalities resulting from EHS

Schools are not required to report incidents of exertional heat illness or exertional heat stroke

461 students from 95 schools were treated for EHI

85% of students were treated by school staff

18 students from 10 schools were treated for EHS

0 student fatalities from EHS
Questions?
Contact Information

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Summary of Findings

Best Practices

- **Florida ranks 14th** among states based on an independent assessment of its use of **nationally recognized best practices** for the prevention and treatment of EHS.
- National experts recommend that schools take proactive steps to prevent exertional heat illness, including:
  - following a heat acclimatization schedule;
  - frequently measuring student athletes’ temperatures;
  - incorporating rest breaks; and
  - encouraging fluid consumption.

Survey Results

- **Over 80%** of Florida schools that responded to OPPAGA’s survey **have protocols** that address prevention and treatment of EHI and provide training to sports-related staff regarding the protocols.
- **Eighty percent** of schools had one or more **cold water immersion tubs or substitute tubs** and believed that their schools had sufficient supplies and materials needed to prevent and treat EHI.
- Of the 206 schools that reported having at least one cold tub, **53 (26%)** reported **not receiving cold water immersion training**.
- **Forty-three percent** of athletic directors reported use of heat acclimatization schedules that did not meet state requirements. Of those, **14%** did not know the length of their schools’ schedules.
- Athletic directors from about one-third (95 of 258) of schools that responded to our survey reported treating students for EHI during the 2017-18 school year; **no school reported student fatalities resulting from EHS**.

National experts explain that **cold water immersion** is **necessary** for EHS treatment.