

118TH CONGRESS
1ST SESSION

S. 2081

To amend section 485 of the Higher Education Act of 1965 to require venue-specific heat illness emergency action plans for any institution of higher education that is a member of an athletic association or athletic conference, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JUNE 21, 2023

Mr. CARDIN (for himself and Mr. VAN HOLLEN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend section 485 of the Higher Education Act of 1965 to require venue-specific heat illness emergency action plans for any institution of higher education that is a member of an athletic association or athletic conference, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Jordan McNair Stu-
5 dent Athlete Heat Fatality Prevention Act”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

1 (1) Heat-related illnesses are a serious medical
2 condition that result from the body's inability to cool
3 itself down in extremely hot environments. Heat-re-
4 lated illnesses include exertional heatstroke, heat ex-
5 haustion, heat cramps, heat syncope, heat rash, and
6 muscle breakdown. When experiencing heat illness,
7 patients may exhibit an array of symptoms, includ-
8 ing, but not limited to, confusion, slurred speech,
9 unconsciousness, vomiting, seizures, fatigue, elevated
10 body temperature, fainting, dizziness, or muscle
11 pain.

12 (2) The Centers for Disease Control and Pre-
13 vention reported more than 700 heat-related deaths
14 in the United States from 2004 to 2018. Heat is the
15 leading climate-related cause of deaths, and rising
16 temperatures pose a serious risk to student athletes
17 participating in outdoor sports.

18 (3) Jordan McNair, a highly accomplished high
19 school football player from Maryland, received schol-
20 arship offers from many competitive university foot-
21 ball programs. He chose to continue his athletic and
22 academic career at the University of Maryland.

23 (4) On May 29, 2018, Jordan McNair collapsed
24 during a workout on the University of Maryland's
25 football field in the 81 degrees Fahrenheit heat.

1 McNair was suffering from exertional heatstroke
2 and was unable to remain in an upright position
3 without assistance from his teammates, medical
4 staff, or coaching staff.

5 (5) Despite being a student athlete at a well-
6 funded division I university, Jordan McNair received
7 inadequate heat-related illness treatment once he
8 was escorted off the field and into the athletic train-
9 ing room. Because medical staff were unable to re-
10 verse McNair's core body temperature, the illness es-
11 calated to a seizure and respiratory distress.

12 (6) Most medical professionals advise patients
13 to receive treatment within 30 minutes of initial heat
14 illness symptoms. More than 90 minutes passed
15 from the time McNair displayed initial symptoms of
16 exertional heatstroke to the time he finally received
17 adequate care from the nearest hospital.

18 (7) By the time Jordan McNair arrived at the
19 hospital, his core body temperature had reached a
20 life-threatening temperature of 106 degrees Fahr-
21 enheit.

22 (8) On June 13, 2018, two weeks after col-
23 lapsing on the football field at practice, Jordan
24 McNair died from symptoms of exertional heat-
25 stroke.

1 (9) Two extensive external investigations of the
2 University of Maryland’s football program concluded
3 that the program’s medical staff failed to promptly
4 intervene, diagnose, and treat Jordan McNair’s exer-
5 tional heatstroke symptoms.

6 (10) According to an independent medical re-
7 port, University staff failed to assess Jordan
8 McNair’s vitals, recognize and monitor heat-related
9 illness symptoms, provide adequate cooling devices
10 and respiratory aids, and generate an emergency
11 plan to coordinate with emergency responders.

12 (11) The University of Maryland has taken sig-
13 nificant steps to prevent and treat heat-related inju-
14 ries among their student athletes, making cold water
15 immersion tubs available at every practice and game,
16 installing and maintaining readily accessible auto-
17 matic defibrillators in every venue, increasing the
18 number of doctors and trainers at practices and
19 games, providing more recovery breaks, and increas-
20 ing the training and reporting structure of athletic
21 trainers, among other reforms in line with the prior-
22 ities of this legislation.

23 (12) The McNair family is devoted to honoring
24 Jordan’s legacy and founded the Jordan McNair
25 Foundation, which provides an educational tool to

1 help coaches, student athletes, and parents identify
2 symptoms of exertional heatstroke and heat-related
3 illnesses.

4 (13) Heat-related illnesses and fatalities are
5 preventable if caught early. Medical staff, coaches,
6 and athletes must be knowledgeable of the warning
7 signs for heat-related illness in order to protect stu-
8 dent athletes from injury, and even death.

9 **SEC. 3. VENUE-SPECIFIC HEAT ILLNESS EMERGENCY AC-**
10 **TION PLAN REQUIREMENTS.**

11 Section 485 of the Higher Education Act of 1965 (20
12 U.S.C. 1092) is amended by inserting at the end the fol-
13 lowing new subsection:

14 “(n) VENUE-SPECIFIC HEAT ILLNESS EMERGENCY
15 ACTION PLAN REQUIREMENT.—

16 “(1) IN GENERAL.—Each institution of higher
17 education that is participating in any program under
18 this title and that is a member of an athletic asso-
19 ciation or athletic conference, shall—

20 “(A) not later than 1 year after the date
21 of the enactment of this subsection and in con-
22 sultation with local emergency responders, de-
23 velop and implement a venue-specific heat ill-
24 ness emergency action plan, which shall include
25 a plan for the operation and use of automatic

1 external defibrillators and cold water immersion
2 equipment; and

3 “(B) not later than 1 year after the date
4 that such a plan is first implemented, and on
5 an annual basis thereafter, submit to the Sec-
6 retary and authorizing committees a report that
7 demonstrates compliance with the requirements
8 of this subsection with respect to the preceding
9 year.

10 “(2) REQUIREMENTS.—A venue-specific heat
11 illness emergency action plan developed and imple-
12 mented under paragraph (1), with respect to an in-
13 stitution of higher education, shall—

14 “(A) include a symptom identification
15 structure and a coordination of care plan for
16 student athletes exhibiting signs of heat illness,
17 and be visibly posted in each—

18 “(i) locker room;

19 “(ii) athletic training facility;

20 “(iii) weight room; and

21 “(iv) outdoor sports complex and sta-
22 dium;

23 “(B) be made available on the athletic pro-
24 gram website or public website of the institution

1 of higher education at the beginning of each
2 academic year;

3 “(C) before the start of in-person training
4 for each academic year, be distributed to, and
5 rehearsed in person by all student athletes, cer-
6 tified athletic trainers, team physicians, athletic
7 training students, athletic administrators,
8 coaches, institutional safety personnel, and legal
9 counsel at the institution; and

10 “(D) be distributed to local emergency re-
11 sponders.

12 “(3) RECOMMENDATIONS.—In developing a
13 venue-specific heat illness emergency action plan
14 under paragraph (1), an institution of higher edu-
15 cation shall consider—

16 “(A) including guidelines formulated by
17 the Wet-Bulb Globe Temperature index to as-
18 sess environmental conditions and heat stress
19 prevention for student athletes;

20 “(B) locating a readily accessible and
21 properly maintained automatic external
22 defibrillator within three minutes of each sport-
23 ing venue; and

1 “(C) including the location of each auto-
2 matic external defibrillator in the heat illness
3 emergency action plan.

4 “(4) AUTHORIZED ADJUSTMENTS.—In the case
5 of a facility described in paragraph (2)(A) that is
6 undergoing a major physical alteration that would
7 affect the implementation of a requirement of para-
8 graph (2), such requirement may be adjusted with
9 respect to the facility.”.

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