C.S. MOTT CHILDREN'S HOSPITAL
UNIVERSITY OF MICHIGAN HEALTH

NATIONAL POLL ON CHILDREN'S HEALTH

Mott Poll Report

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Preventing Sudden Cardiac Death in Teens

Sudden cardiac arrest can occur in teens, and the key to survival is a prompt response. The C.S. Mott Children's Hospital National Poll on Children's Health asked a national sample of parents of teens 13-17 years about their views on cardiac screening for teens and preparation for cardiac emergencies at school.

About half of parents (48%) say they have heard of someone under 18 years old having a cardiac arrest. Overall, 38% of parents believe all teens should be evaluated for heart disease, while 55% think teens should be evaluated only if they have a risk factor, and 7% think heart health evaluation for teens is not necessary. However, only 14% of parents report their teen has been evaluated for heart disease, most often as part of a sports physical.

With regard to cardiac preparedness at their teen's school, 48% of parents say there is an automated external defibrillator (AED) onsite. Among this group, only 41% know where the device is located, and only 37% are very confident that school staff are trained and ready to use the AED if a child went into cardiac arrest. Among parents of teens whose school does not have an AED, 60% believe the school should have one onsite. While only 39% of parents have ever been trained to use an AED, most say they would be willing (59%) or possibly willing (30%) to receive AED training if it were offered for free. Once trained, 97% would be willing to use the AED in an emergency, although 18% say they would be willing only if nobody else was available.

Nearly two-thirds of parents (63%) say they have been certified in cardiopulmonary resuscitation (CPR). Most parents say they would be interested in free CPR training (68% yes, 25% possibly). If trained, nearly all (99%) say they would be willing to perform CPR in the event of an emergency, although 22% would do so only if nobody else was available.

Twenty percent of parents report their teen has been trained in CPR, and 7% say their teen has been trained to use an AED. Most parents (93%) say that if trained, they would want their teen to give CPR or use an AED in an emergency, although 34% would only want their teen to step in if nobody else was available. Parent concerns about their teen providing emergency services include the teen feeling guilty if the person died (63%), too much pressure on the teen (51%), legal liability (50%), or doing it wrong (39%).

Parent concerns about teens performing CPR or using an AED in an emergency

% of parents reporting the following concerns

Teen feeling guilty if person died	63%
Too much pressure on teen	51%
Legal liability	50%
Teen doing it wrong	39%

Source: C.S. Mott Children's Hospital National Poll on Children's Health, 2026

Report Highlights

1 in 7 parents say their teen has been evaluated for heart disease.

Half of parents say their teens' school has an AED onsite, but only 1 in 15 say their teen has been trained to use it.

1 in 5 parents say their teen has been trained in CPR, while 2 in 3 parents have received CPR training themselves.

9 in 10 parents would want their teen to use CPR and AED training in the event of an emergency.

Data Source & Methods

This report presents findings from a nationally representative household survey conducted exclusively by Ipsos Public Affairs, LLC (Ipsos) for C.S. Mott Children's Hospital. The survey was administered in August 2025 to a randomly selected, stratified group of adults who were parents of at least one child age 1-17 years living in their household (n=2,029). Adults were selected from Ipsos's web-enabled KnowledgePanel® that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 66% among panel members contacted to participate. This report is based on responses from 970 parents with at least one child age 13-17. The margin of error for results presented in this report is ±2 to 5 percentage points.

A publication from C.S. Mott Children's Hospital, the University of Michigan Department of Pediatrics, and the Susan B. Meister Child Health Evaluation and Research (CHEAR) Center.

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Implications

Every year, thousands of US children experience sudden cardiac arrest; most do not survive. Death from a sudden cardiac arrest is devastating to that child's family and community and often prompts consideration of what could have been done to prevent the cardiac death. The key to improving the chance of survival after sudden cardiac arrest is prompt initiation of cardiopulmonary resuscitation (CPR) and defibrillation with an automated external defibrillator (AED). Importantly, a timely and appropriate response does not happen by luck; it requires careful planning and implementation.

Many states have laws, or at least recommendations, for schools to have cardiac emergency preparedness plans. These plans include the purchase of AEDs, with careful consideration about where they should be placed and who should be trained to use them. In addition, preparedness plans often call for the designation of a specific cardiac response team comprised of school staff who receive AED and CPR training, along with drills to help the response team practice and refine their skills.

Schools are often hubs of activity, including in the evenings and on weekends, and sudden cardiac arrest can occur at any time. It is unlikely that a member of the school response team is always onsite. Therefore, it is important to inform the broader school community – including non-school groups who utilize the school for events and activities – about the location of AEDs and directions for their use.

When a teen experiences sudden cardiac arrest, there often are other students nearby. Preparing students to respond promptly will improve the likelihood of survival. However, even though most states have laws requiring CPR training for high school students, only 1 in 5 parents in this Mott Poll reported that their teen had received CPR training; even fewer reported their teen had AED training. Moreover, CPR training for students shouldn't be a one-time event; refresher trainings can help students to feel ready to use their life-saving skills.

In this Mott Poll, parents are very supportive of CPR and AED training for their teens and for themselves. However, an important finding is the common feeling among parents that they would prefer to utilize that training only if nobody else is available. This hesitance is to be expected; parents may worry that their teen, or they themselves, are not fully prepared to deal with such a stressful, high-stakes situation, and that their lack of preparation could lead to a bad outcome. However, waiting for a "better option" only delays the initiation of the emergency response. To address this concern, parents may want to learn more about the cardiac emergency training provided at their teen's school, including how the school will support students who witness a sudden cardiac arrest, as well as the availability of training for parents and community members.

Another aspect of preventing sudden cardiac death is identifying children with heart conditions. General cardiac screening happens at most well-child visits, where the pediatrician listens to the child's heart using a stethoscope, but some cardiac conditions can only be detected by electrocardiogram (ECG or EKG). However, less than half of parents think that all teens should have a cardiac evaluation; more often, parents think it should be based on risk factors. This requires several actions for parents. First, they should provide an accurate family history of cardiac problems. Second, they should ensure that teens have regular preventive care visits where the provider takes a blood pressure reading and listens to the heart.

Finaly, parents should ensure that teens understand what symptoms may indicate a possible cardiac condition – and thus need to be shared with parents, coaches, or another adult. These include heart palpitations (flutters), chest pain or pressure, shortness of breath, fainting, dizziness, or feeling like they're going to pass out – especially during exercise. A challenge is for teens to learn to distinguish between the fatigue that naturally comes from a challenging workout, and the symptoms that may indicate a problem.