2/9/2025

Dear Commissioner Robert Goldstein, MD, PhD and Members of the Public Health Council,

I am the parent of a 12 year child with Type 1 diabetes who requires constant monitoring of his blood glucose levels. I continue to be worried about the safety of my child under the current legal framework surrounding the administration of glucagon in public school settings. The American Diabetes Association (ADA’s) [2024 Standards of Care](https://diatribe.org/your-guide-2024-ada-standards-care) recommends that all people taking insulin or who are at high risk for hypoglycemia be prescribed glucagon, preferably [ready-to-use glucagon products](https://diabetesjournals.org/care/article/47/Supplement_1/S111/153951/6-Glycemic-Goals-and-Hypoglycemia-Standards-of) like Baqsimi, Gvoke, and Zegalogue. The Standards of Care also recommend that family members, caregivers, **school employees** and anyone else who cares for people with diabetes know where glucagon is located and how to use it. Just as school staff are yearly trained in the use of epinephrine, they should be equally trained in and adept at rescuing a student with diabetes.

There are significant gaps in the emergency protocols as they relate to life-threatening situations, such as severe hypoglycemia, when glucagon may need to be administered immediately. Given the nature of my son's condition, his blood glucose levels can fluctuate unexpectedly, and during certain emergencies, glucagon must be administered quickly to prevent severe health consequences, including seizures, brain damage, or even death. However, under current state law, only a licensed school nurse is authorized to administer glucagon, and if my son were in a lockdown situation or away from the nurse, no other staff member could legally step in to help, even in a life-threatening scenario.This presents a serious risk to the well-being of my child and others with similar medical conditions in the school system. In situations where immediate intervention is critical, waiting for the nurse to be physically available or attempting to secure assistance in a lockdown scenario could be the difference between life and death.

Within the proposed amendments, the definitions exclude **glucagon**, which is the “emergency rescue medication, for people with Type 1 Diabetes. I ask that you include **glucagon in the definition** as well as naming “**severe hypoglycemia, which can be evident through loss of consciousness, seizure, or disorientated behaviors to prevent imminent coma or death.**” By doing so, we can ensure that no child, including my own, is left without the critical care they need to save their lives. Thank you for your care and thought as it pertains to the safety of our most vulnerable students.

Sincerely,

Jessica Caverly

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