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

My daughter's name is Sydnie Frye, she is 16 years old and was diagnosed with Type One Diabetes in 2021. Every day with diabetes presents unique hurdles; some days are manageable, while others are incredibly difficult. The unpredictable nature of Sydnie's condition has an emotional impact on her and our family, as we constantly worry about potential complications and strive to provide her with the necessary support and effective management.

While Sydnie is at school, we should feel reassured that she is in a safe environment where she will receive appropriate care when needed.

During school hours, we rely on the school nurses to assess and treat Sydnie's low blood sugar in case of an emergency. However, the time it takes for them to reach her, evaluate her symptoms, and administer the necessary treatment, such as glucagon or Basqimi, can be critical. These delays can have serious consequences for her health and well-being. If Sydnie experiences a low blood sugar and loses consciousness she cannot treat herself - she needs help. Would it be more acceptable to let her classmates and teachers watch as she dies from not being able to be properly treated? From having the staff member have to choose between a mindless regulation and their job or saving a life. In the event of a lockdown - what would happen then? We already have to be worried that Sydnies’ sounding alerts would give her hiding spot away or other classmates that were trying to find somewhere to hide from a shooter. Now we have to additionally worry that if her blood sugar dropped she would be left to die?

It’s unthinkable.

Sydnie is an active teenager who participates in sports every day after school, from 2:30 pm to 6:00 pm. During these hours, there is often no medical professional on-site to respond to a diabetic emergency. This lack of immediate medical attention is a constant source of anxiety for our family. My husband and I often have to attend her practices to ensure that one of us is available to respond in case of an emergency. It would be the same if someone were having an allergic reaction, and required use of an epipen that they carry in preparation for these emergencies. Would a teacher or staff member just call emergency services and wait for them to take action. Even though the treatment is right there with the student? That would be insane!

The situation is both unsettling and frustrating.

The current system is failing students with diabetes and putting them in unnecessary danger. If schools can administer other life saving medications, then they should be able to administer all of them. Students' lives are at risk; there should be no exceptions when it comes to Type One Diabetes emergency medical care.

It is imperative that changes are made to ensure that they receive the necessary care and support to manage their condition safely and effectively, both during and after school hours.

Signed, Tammie & Christopher Frye 95 Nicholson Dr Brockton, Ma 02302