Summary of Proposed Changes

Lifesaving Treatment Training Protocols

For each section summarized below:

- The summary highlights types of changes anticipated.
- Changes listed as "substantive" may create new meaning. This includes additions, deletions, and clarifications that may alter interpretation of prior wording.
- Changes listed as "non-substantive" do not change meaning. This includes formatting, grammar, and clarifications aligned with prior wording.

General Updates Summary

Updates to Training Protocol Manuals

Manuals - Substantive Changes

- Throughout document:
- Evidence-based recommendations: update to align with current science and best-practice guidance from experts in the field.
- Add content, modify messaging to reflect science while reducing stigma; emphasis on individual protocols; emphasis on social-emotional intersections and support.
- Add content related to foundational medication principles, including reading prescription labels, manufacturer guidelines.
- Internal document consistency: Ensure "Summary and Review" includes any added content, e.g. new dose delivery devices or medication routes.
- Resources and references: Ensure resources are up-to-date and from organizations that have professional expertise and verified use of evidence-based content.

- Rules alignment: Ensure current statute and rules are included in reference list.
- Certificate of Completion: Update description of "Statement of Completion" to "Certificate of Completion," with content aligned with Rule update

Manuals - Non-substantive Changes

- Throughout document:
- Document format: Update format (headings, font, etc.) to align with current standards and with the other Lifesaving Treatment Protocols.
- Accessibility: Review accessibility of images, tables, any non-standard text.
- Verify citations are current; standard is research within 10 years unless seminal work or referenced as historical example, with preference for systematic reviews and meta-analysis versus small studies.
- Trainee versus trainer content: determine whether to add spaces/page breaks throughout the manual to keep key information on single pages, for printing purposes; versus maintain text flow in manual and offer separate excerpts for printing e.g. "trainee summary pages."
- Use of terms: verify terms are used consistently and meanings are explained.
- Terms defined in rule: verify definitions do not contradict (training may expand but should align with rule)
- Document navigation: ensure table of contents links within doc; ensure page numbers are formatted correctly and consistently.
- External links: ensure links to resources, laws, and referenced citations are current and functional.

Updates to Training Protocol Slides

Slides - Substantive Changes

- Modify to align with substantive changes in Manual

Slides - Non-substantive Changes

- Throughout slides:
- Presentation format: Update format (headings, font, etc.) to align with current standards and with the other Lifesaving Treatment Protocols.

- Accessibility: Review accessibility of images, tables, any non-standard text on slides; include alt text for images.
- Images updated for clarity and accuracy
- Verify citations are current, reflect updates to Manual.
- Use of terms: verify terms are used consistently and meanings are explained in slides, aligned with updates to Manual.
- External links: ensure links to manufacturer guidelines, any other links are current and functional.

1. Severe Allergic Reaction / Epinephrine

Epinephrine Protocol Training Manual

Note: Proposed changes may impact multiple areas of the document. Line numbers give one example. See comments in doc for additional examples.

SAR/Epi Manual - Substantive Changes

- Line 117 / page 5: Modify wording related to "autoinjectors" to include additional routes and align with updated Rule language.
- Line 149 / page 6: Modify wording about trainers to include "physician associate" aligned with updated Rule language and existing statute.
- Page 2 and (new) Addendum: Determine whether to maintain the "Addendum for trainers of school personnel" in slides.
    - If yes, create parallel addendum in Manual.
    - If no, identify ways to note content throughout which overlaps/addresses school-required topics.
- Line 659 / page 22-23: Add content related to reading prescription labels, and related to more-than-just autoinjectors, e.g. step-by-step instructions for nasal route.
- Line 860 / page 29: Ensure "Summary and Review" includes any added content, e.g. nasal route.
- Line 1054 / page 35: Ensure resources are up-to-date and from organizations that have professional expertise and verified use of evidence-based content.

- Line 1072 / page 35: Ensure current statute and rules are included in reference list.
- Line 1101 / Page 36: Update description of "Statement of Completion" to "Certificate of Completion," with content aligned with Rule update

SAR/Epi Manual - Non-substantive Changes

- Throughout document:
  - Document format: Update format (headings, font, etc.) to align with current standards and with the other Lifesaving Treatment Protocols.
  - Accessibility: Review accessibility of images, tables, any non-standard text.
  - Verify citations are current; standard is research within 10 years unless seminal work or referenced as historical example, with preference for systematic reviews and meta-analysis versus small studies.
  - Trainee versus trainer content: determine whether to add spaces/page breaks throughout the manual to keep key information on single pages, for printing purposes; versus maintain text flow in manual and offer separate excerpts for printing e.g. "trainee summary pages."
  - Use of terms: verify terms are used consistently and meanings are explained, e.g. "reaction" versus "response" versus "anaphylaxis" and use/definition of "allergen."
  - Terms defined in rule: verify definitions do not contradict (training may expand but should align with rule)
  - Document navigation: ensure table of contents links within doc; ensure page numbers are formatted correctly and consistently.
  - External links: ensure links to resources, laws, and referenced citations are current and functional.

Epinephrine Protocol Slides

SAR/Epi Slides - Substantive Changes

- Slide 2: determine whether to maintain "Addendum" versus incorporating/identifying content that addresses school requirements
- Slide 7: consider reference to updated rule language (if changed): sources of epinephrine doses that may be used by trainees

- Slide 47: update wording to include routes beyond autoinjector, aligned with rule changes
- NEW slide 50: add steps for Epinephrine Nasal Spray
- Slide 60: "Key Points of Administration" edit to include more than just autoinjectors
- Slide 66: replace "autoinjectors" with "delivery devices" or "premeasured doses"
- Slide 73: "Demonstrations" ensure slide notes refer to more than just autoinjectors
- Slide 75: "Medication Administration Addendum for School Personnel": determine whether to keep or integrate content into main training (most overlaps)
    - School-specific content includes Slide 80, "student self-carry" and references to student plans/school personnel on slides 81 and 83
- Throughout slides:
    - Add slides aligned with additions to Manual, e.g. steps for administration of nasal route
    - Modify evaluation examples/questions to align with updated content
    - Add "note to trainer" slides to clarify "authority-approved equivalent" e.g. if any school-specific content is incorporated into main training.

SAR/Epi Slides - Non-substantive Changes

- Slide 44: references another slide number; verify after edits
- Slide 85: reference to "SBAR" reporting: remove
- Slide 88: "References" ensure citations align with updates to manual
- Throughout slides:
    - Presentation format: Update format (headings, font, etc.) to align with current standards and with the other Lifesaving Treatment Protocols.
    - Accessibility: Review accessibility of images, tables, any non-standard text on slides; include alt text for images.
    - Verify citations are current, reflect updates to Manual.
    - Use of terms: verify terms are used consistently and meanings are explained in slides, aligned with updates to Manual.

- External links: ensure links to manufacturer guidelines, any other links are current and functional.

2. Hypoglycemia / Glucagon

Glucagon Protocol Training Manual

Note: The Manual and Slides shared for RAC review have been fully updated since 2018; are not yet publicly posted as of 9/21/2026.

Proposed changes may impact multiple areas of the document. Line numbers give one example. See comments in doc for additional examples.

Hypo/Gluc Manual - Substantive Changes

- Line 78 / page 4: New "Note to Trainers" section clarifies instructions for use, options for trainer discretion
- Line 144 / page 6: New "Main ideas" highlight at the beginning of each section
- Line 175 / page 6: to align with rule update, include "physician associate"
- Line 202 / page 7: reference to "Certificate of Completion"; modify language and certificate itself per rules update
- Line 237 / page 8: reference to "Individual Healthcare Plans" - similar to 2018 content, updated terms used and increased emphasis on referring to individualized plans throughout Manual and Slides
- Line 272 / page 9: updated content, reference to new requirements established in OAR 581-021-0037
- Line 286 / page 9: "Overview of Diabetes" section is expanded and updated to reflect current science and best-practices from experts in the field.
- Line 328: "Supporting Students with Diabetes" messaging modified to reflect data in the literature, reduce stigma, emphasize support
- Line 341 / page 11: data update: "Types of Diabetes" updated and expanded
- Line 447 / page 15: "Hyperglycemia Signs & Symptoms" updated, linked to relative risks and actions (be aware versus DKA concern versus medical emergency).

- Line 552 / page 18: "Treating Mild to Moderate Hypoglycemia" updated to reflect current science and best-practice recommendations; increased emphasis on individualized plans e.g. "The 15 Minute Rule" (versus 15/15 rule)
- Line 637 / page 21: New information about types of glucagon delivery devices - formerly only syringe-and-vial kit; reflects manufacturer instructions and data
- Line 726 / page 24: "Treatment Protocol for Severe Hypoglycemia" now includes distinct steps. Updated to reflect standards of practice.
- Line 816 / page 27: Modifying messages to identify mandatory steps versus recommended and consider legal implications for school settings - i.e. step 5.2, medical follow-up, shift from "required" to "recommended"
- Line 869/page 28: "Glucagon Administration" section updated to reflect current FDA-approved medication devices - now includes 4 routes/delivery device types; ADDITION New content expands training on foundational steps e.g. medication "rights," manufacturer's instructions, prescription labels
- Line 893 / page 29: "Glucagon delivery devices" is a new section, reflects current FDA-approved glucagon delivery devices; has links & QR codes to manufacturer's instructions.
- Line 973 / page 32: "Summary" is updated to reflect updates throughout the Manual.
- Line 1015 / page 34: "Evaluation Tool" is updated to reflect updates throughout the Manual.
- Line 1111 / page 36: "Resources" and "Regulations" sections updated
- Page 44: "Certificate of Completion" updated -- will need further update after rules/RAC input

Hypo/Gluc Manual - Non-substantive Changes

- Line 26 / Page 2: Added new contributors
- Removed tables/updated for accessibility
- Line 299 / page 10 (and throughout): Clarified terms, ensured consistent use of "blood glucose" versus "blood sugar" throughout.

Hypoglycemia / Glucagon Protocol Slides

Shared slides have been fully updated compared to 2018 version.

Hypo/Gluc Slides - Substantive Changes

- Slide 2: "Note to Trainers" creates clarity about "Authority Approved Equivalent" i.e. options for trainer discretion and modifications.
- Slide 7: "Training Protocol Regulations" section includes new/updated content about laws e.g. new requirements per OAR 581-021-0037 updates.
- Slide 12: Each section now includes sample evaluation questions (optional at trainer discretion)
- Slide 16: Overview of diabetes is expanded and updated to reflect current scientific evidence and best-practice recommendations for communicating about diabetes from experts in the field
- Slide 21 & 23: messaging modified to reduce stigma, emphasize support
- Slide 25: Signs & Symptoms for hyperglycemia linked to actions (be aware versus DKA concern versus medical emergency).
- Slide 36: Updated per current guidance for diabetes management; "The 15 Minute Rule" (versus 15/15 rule) - no longer references 15 grams of carbs or snack afterwards; emphasis on following individual care plans increased throughout.
- Slide 49: New information about types of glucagon delivery devices (begins here, multiple new slides on this content) - formerly only syringe-and-vial kit
- Slide 60: "Treatment Protocol for Severe Hypoglycemia" now includes distinct steps. Updated to reflect standards of practice e.g. prioritize glucagon as long as the person is breathing.
- Slide 73: Modifying messages to identify mandatory steps versus recommended and consider legal implications for school settings - i.e. medical follow-up, shift from "required" to "recommended"
- Slide 82: "Glucagon Administration" update to reflect current FDA-approved medication devices - now includes 4 routes/delivery device types; includes general instructions and links to manufacturer guidelines for each device
- Slides 84, 85, 86: New content expands training on foundational steps e.g. medication "rights," manufacturer's instructions, prescription labels
- Slide 99: "Review and Demonstrate" section updated to reflect additions and updates throughout

Hypo-Gluc Slides: Non-substantive Changes

- Slide 31: Hypoglycemia is now a distinct section, separate from general diabetes and from steps of glucagon protocol.
- Throughout slides:
  - Presentation format: Update format (headings, font, etc.) to align with current standards and with the other Lifesaving Treatment Protocols.
  - Accessibility: Review accessibility of images, tables, any non-standard text on slides; include alt text for images.
  - Images updated for clarity and accuracy (e.g. slide 18, 19, 20)
  - Verify citations are current, reflect updates to Manual.
  - Use of terms: verify terms are used consistently and meanings are explained in slides, aligned with updates to Manual.
  - External links: ensure links to manufacturer guidelines, any other links are current and functional.

3. Adrenal Crisis / Medication to Treat Adrenal Crisis

Adrenal Crisis Protocol Manual

- This protocol is scheduled for revision 2026-27.
- Current (2018 version) is on the OHA Lifesaving Treatment Protocols page.

Adrenal Crisis Manual - Substantive Changes

- Throughout document:
  - Evidence-based recommendations: update to align with current science and best-practice guidance from experts in the field.
  - Add content, modify messaging to reflect science while reducing stigma; emphasis on individual protocols; emphasis on social-emotional intersections and support.
  - Add content related to foundational medication principles, including reading prescription labels, manufacturer guidelines.
  - Internal document consistency: Ensure "Summary and Review" includes any added content, e.g. nasal route.

- Resources and references: Ensure resources are up-to-date and from organizations that have professional expertise and verified use of evidence-based content.
- Rules alignment: Ensure current statute and rules are included in reference list.
- Certificate of Completion: Update description of "Statement of Completion" to "Certificate of Completion," with content aligned with Rule update
- ? Other types of changes that may be needed?

Adrenal Crisis Manual - Non-substantive Changes

- Throughout document:
  - Document format: Update format (headings, font, etc.) to align with current standards and with the other Lifesaving Treatment Protocols.
  - Accessibility: Review accessibility of images, tables, any non-standard text.
  - Verify citations are current; standard is research within 10 years unless seminal work or referenced as historical example, with preference for systematic reviews and meta-analysis versus small studies.
  - Trainee versus trainer content: determine whether to add spaces/page breaks throughout the manual to keep key information on single pages, for printing purposes; versus maintain text flow in manual and offer separate excerpts for printing e.g. "trainee summary pages."
  - Use of terms: verify terms are used consistently and meanings are explained.
  - Terms defined in rule: verify definitions do not contradict (training may expand but should align with rule)
  - Document navigation: ensure table of contents links within doc; ensure page numbers are formatted correctly and consistently.
  - External links: ensure links to resources, laws, and referenced citations are current and functional.

Adrenal Crisis Slides

- This protocol is scheduled for revision 2026-27.

- Current (2018 version) is on the OHA Lifesaving Treatment Protocols page.

Adrenal Crisis Slides - Substantive Changes

- Modify to align with substantive changes in Manual

Adrenal Crisis Slides - Non-substantive Changes

- Throughout slides:
  - Presentation format: Update format (headings, font, etc.) to align with current standards and with the other Lifesaving Treatment Protocols.
  - Accessibility: Review accessibility of images, tables, any non-standard text on slides; include alt text for images.
  - Images updated for clarity and accuracy
  - Verify citations are current, reflect updates to Manual.
  - Use of terms: verify terms are used consistently and meanings are explained in slides, aligned with updates to Manual.
  - External links: ensure links to manufacturer guidelines, any other links are current and functional.