

PRELIMINARY STAFF MEASURE SUMMARY**CARRIER:**

Senate Committee on Senate Health Care

REVENUE: No revenue impact**FISCAL: May have fiscal impact, statement not yet issued****Action:****Vote:****Yeas:****Nays:****Exc.:****Prepared By:** Zena Rockowitz, Administrator**Meeting Dates:** 4/1, 4/20

WHAT THE MEASURE DOES: Directs Oregon Health Authority (OHA) to provide training on adrenal insufficiency. Requires training to include how to identify people, types of medication, and administration of medication. Requires OHA to register people given the training and charge fee for training. Requires OHA and Emergency Medical Service Committee, to adopt rules requiring emergency medical services providers to attend training and ambulances to carry one or more medications. Requires OHA and Oregon State Board of Nursing to adopt rules to require registered nurses who work in hospital emergency department to attend training. Permits training to be available to other health care professionals or public. Creates operative date on January 1, 2016. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Codification of medical evaluation and treatment for a specific disease
- Physician and emergency medical technicians knowledge on how to provide proper patient treatment and care
- Risk of death if adrenal crisis occurs outside the home and areas without injection available
- Oregon Medical Board establishes scope of practice
- Low cost and effectiveness of injection
- Rarity of adrenal insufficiency disease

EFFECT OF COMMITTEE AMENDMENT: -2 Amendment: Directs Oregon Health Authority (OHA) to compile information on dangers associated with adrenal insufficiency, how to identify person suffering adrenal crisis, types of medications used to treat adrenal insufficiency. Requires OHA to disseminate to health care professionals. Directs OHA to consider most effective manner of providing information.

BACKGROUND: Adrenal insufficiency is an endocrine or hormonal disorder that occurs when adrenal glands (located above the kidneys) do not produce enough of certain hormones. Primary adrenal insufficiency, also known as Addison's disease, occurs when the adrenal glands are damaged and cannot produce enough cortisol. Secondary adrenal insufficiency occurs when the pituitary gland (located at the base of the brain) fails to produce enough adrenocorticotropin, a hormone that stimulates the adrenal glands to produce cortisol. This can lead to shrinkage of the adrenal glands. Typical causes of primary adrenal insufficiency are autoimmune disorders and tuberculosis. Secondary adrenal insufficiency is more common and is related to stoppage of corticosteroid medication and surgical removal of pituitary tumors.

Hormones have functions such as regulating blood pressure, metabolism, digestion, and stress. Common symptoms are chronic fatigue, loss of appetite, weight loss, abdominal pain, and muscle weakness. Other symptoms may include depression, vomiting, headache, sweating, craving salty foods, low blood pressure, and irregular or absent menstrual periods. A person is considered to be in adrenal crisis when they experience symptoms not limited to, sudden and severe

4/17/2015 2:55:00 PM *

This summary has not been adopted or officially endorsed by action of the committee.

pain, dehydration, and loss of consciousness. Corticosteroid injections or oral doses of a mineralocorticoid hormone are used as treatment to replace or substitute hormones that the adrenal glands fail to make.