

Date: March 9, 2026

To: Members of the Senate Education Committee

From: Shriya R. Perati, BA

Fourth-Year Medical Student, Warren Alpert Medical School of Brown University

My name is Shriya Perati, and I am a fourth-year medical student at the Warren Alpert Medical School of Brown University. Before medical school, I worked as an Emergency Medical Technician, where I saw firsthand how quickly uncontrolled bleeding can become life-threatening when immediate care is not available.

My heart breaks for the lives we have lost in recent acts of violence, and experiences like these have reinforced for me how important it is that communities have the tools to respond when emergencies occur.

This is now my fifth year living in Rhode Island, and over that time I have come to care deeply about the communities here. I grew up in California, where recent statewide legislation expanded access to bleeding control kits in schools and public buildings and introduced bleeding control training into school education programs. Seeing those policies implemented there has reinforced my belief that Rhode Island has the opportunity to take a similar step to strengthen preparedness for our communities.

I am writing in support of Senate Bill S 2210, the School Trauma Kit Act.

Severe bleeding is one of the most time-sensitive emergencies in medicine and remains a leading cause of preventable death after trauma. When it occurs, survival often depends on what happens in the critical minutes before emergency medical services arrive. Even in well-resourced communities, emergency responders may take several minutes to reach a patient. During that time, the people already present, including teachers, school staff, and other bystanders, may be the only individuals able to intervene.

Stop the Bleed is a national public health initiative that teaches people how to control life-threatening bleeding using simple techniques such as direct pressure and tourniquet application. These are straightforward interventions that can stabilize someone until professional medical care arrives.

Much of the national momentum for hemorrhage control training emerged following the Sandy Hook Elementary School shooting and the Boston Marathon bombing. Reviews of the medical response to these events highlighted how rapid bleeding control by bystanders and first responders saved lives. These findings led trauma surgeons and public health leaders to call for broader public access to bleeding control training and equipment, ultimately leading to the national Stop the Bleed initiative.

During my time at Brown, I helped lead a statewide initiative to expand Stop the Bleed training across Rhode Island schools. I also serve as the lead investigator of a research study evaluating this effort, examining how hemorrhage control training can be implemented across school districts and how it affects preparedness among school personnel. I dedicated a year of my studies to teaching Stop the Bleed in schools across Rhode Island because I felt it was important to bring these skills directly into our communities.

Working with trauma surgeons, school nurses, and fellow medical students, our team has trained over 250 educators and school staff members in bleeding control techniques across Rhode Island.

As part of this study, we evaluated outcomes from 247 school personnel across 21 Rhode Island school districts. The results demonstrated that training has a significant impact. After just a one-hour training session, willingness to apply a tourniquet increased from 69 percent to 91 percent.

However, our data also revealed an important limitation. Seventy-eight percent of participants reported concerns about not having the necessary supplies available to intervene in a bleeding emergency. While training improves confidence and willingness to act, an effective response ultimately depends on having bleeding control kits readily available when an emergency occurs.

During these trainings, I was struck by how engaged educators were in learning these skills. Many teachers asked thoughtful questions and wanted to know how they could access bleeding control kits for their schools. Their responses reflected a genuine desire to be prepared if an emergency were to occur.

We also found practical ways to integrate this training into existing school schedules. In several districts, Stop the Bleed sessions were incorporated into professional development days already built into the school calendar, allowing educators to receive training during scheduled work time.

Bleeding control kits contain simple tools such as tourniquets, gauze, and protective gloves that allow trained individuals to stabilize someone experiencing severe bleeding. These kits are relatively inexpensive, yet they are not consistently available across schools.

Without coordinated support, access to this lifesaving equipment may depend on whether a school has the resources to purchase kits independently. Ensuring that bleeding control kits are available across all schools helps ensure that every community has the same opportunity to respond effectively during an emergency.

Serious bleeding injuries can occur in many school settings, including during sports, on playgrounds, or in accidents near school grounds. In these situations, trained individuals with access to bleeding control supplies can make a meaningful difference in the critical minutes before emergency responders arrive.

Through this statewide initiative, I have seen how willing educators are to learn these skills when given the opportunity. With thoughtful implementation, accessible training, and appropriate equipment, schools can become better prepared to respond when emergencies occur.

For these reasons, I respectfully urge the committee to support Senate Bill S 2210 and help ensure that Rhode Island schools have the tools needed to respond when seconds matter.

Thank you for your time and consideration.

Sincerely,  
Shriya R. Perati, BA

A handwritten signature in black ink that reads "Shriya Perati". The signature is written in a cursive style with a large, stylized initial 'S'.

Fourth-Year Medical Student  
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