

## Rosenberg Corey

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**From:** Doumit Matt  
**Sent:** Wednesday, April 05, 2017 11:16 AM  
**To:** SHS Exhibits  
**Subject:** FW: In support of SB 687

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**From:** Michael King [mailto:thekingsofeden@gmail.com]  
**Sent:** Wednesday, April 5, 2017 11:15 AM  
**To:** Doumit Matt <Matt.Doumit@oregonlegislature.gov>  
**Subject:** In support of SB 687

Testimony about SB 687 - bill designed to note that choosing not to vaccinate and/or delay vaccination is not abuse.\

Chairwoman Senator Gelser and Committee Members:

My name is Michael King; I am a Bachelors' Prepared Registered Nurse and I work in Trauma at a Level I Trauma Hospital in Portland. I am writing in support of SB 687 and I ask that you pass the bill out of committee as-is.

As an RN, I work around vaccines every day and I have to say what I see in our medical system today is extremely disappointing. There is no effort whatsoever given to educate staff on how to identify risk factors for those who are at greater risk for receiving vaccines. I see staff members trying to give flu shots to patients who are already sick with the flu and/or have another disease they are fighting. Anyone who has researched this subject whatsoever knows that vaccines are contraindicated in those situations. Likewise, when someone comes into the Emergency Department for a puncture wound we routinely vaccinate them with a Tetanus shot—no matter that the shot takes two weeks to reach effectiveness and the patient would have died from lockjaw a week and a half before the shot ever became effective . . . Instead of educating personnel and having an informed staff who promote patient health, we have automatons who don't question and inject everyone possible, no matter how detrimental it might be to that individual's health.

My point here is that our medical system is broken. Vaccines are a significant source of income for physicians in private practice, and one of the factors that influences how much medicare reimbursement hospitals receive is based on vaccination rates given by staff members. If you aren't hearing the sound of dollar signs going off, you should--because the medical industry is at least largely about profits. As much as I believe the many men and women who work tirelessly each day to care for our patients are here for good reasons, the system itself is a business and is designed to make money. At the end of the day, vaccine policies are not about patient

protection; they are about who gets paid. It is sad and disappointing because those of us who have eyes to see find our voices drowned out by the noise of cascading dollar signs.

What does all this have to do with a bill about non-vaccination or delayed vaccination not being abuse? I'll tell you. Dr. Paul Thomas, owner and head physician of Integrative Pediatrics in Beaverton uses a delayed schedule rather than the CDC recommended one, yet in the largest pediatric practice in the Portland area, he has had no new cases of Autism since switching to using his alternate schedule. This is a doctor who has chosen to place patient safety over profits—and having spoken with him personally, I can tell you that he does indeed lose a TON of money that he could be making if he were willing to simply follow the popular and well-worn path of everyone else. I thank God that people like him still work in this field because it is incredibly disheartening to watch patient outcomes get sacrificed for the Almighty Dollar. Under the current system, if a parent sees this Dartmouth-trained, board certified Pediatrician is getting safer results than the average MD, theoretically, someone could still say they are abusing their child when in fact the data shows their methodology is actually safer for their child. This MUST change.

Likewise, a parent of three children who fully vaccinated the first one, who observed their first child get successively sicker after each MMR shot, eventually demonstrating regressive behaviors and finally diagnosed with autism might choose to withhold vaccines, either some or all, from their future children. Given the other children possess all the same genetic risks as the first, it is actually wisdom that the parent is preventing their other children from receiving the vaccines that caused irreparable lifelong brain damage to their firstborn. However, under the current system it would seem that this parent can have someone call Child Protective Services on them for "failure" to vaccinate their child, and worse yet, someone from CPS might cite the situation as abusive. It has happened before, and without this law in place, there is nothing to say it won't happen again—when clinically speaking, given their genetic risk factors and family history, the parent is making the correct choice to withhold vaccination from their other children. All of these are decisions that are made between the parents and their primary care provider if they choose to have one.

As a Registered Nurse, I am personally tired of the highly prejudicial and one-sided treatment that many medical professionals, as well as the rest of the public, give non-vaccinating or reduced-vaccinating parents who use their rights as a parent to make medical decisions for their children. While the common medical mantra is "safe and effective," the data simply does not support that. On the yearly flu shot alone, the manufacturer's inserts that are never given to the general public clearly state that the vaccines have NEVER BEEN TESTED for safety OR efficacy in pregnant or nursing women. And they never will be—because human experimentation on babies and pregnant women is unethical. We literally DO NOT HAVE all the data we need to say that vaccines are safe and effective.

While I said above that we do not have all the data we need to say vaccines are safe and effective, that is actually incorrect. The science is actually quite clear--while not necessarily to everyone, there are some people to whom vaccines can and do prove quite dangerous--which is why the Vaccine Court has awarded over \$3 billion in damages to families to date--and if more people knew about the VAERS at the time of injury and were able to file, that figure would be much, much higher than it is already. If vaccines are not safe, at least not for everyone, then it would seem we should put some legal protections in place accordingly—and preventing unwarranted harassment from CPS seems like a good place to start.

I know that there are many men and women in CPS who, like many of us in the medical field, want to do a lot of good. Yet, the system there is also inherently flawed, and they lack the training and guidelines they need to consistently make good decisions regarding child safety. In a news article in the Oregonian on March 28, 2017, titled "Children left in unsafe homes by Oregon social workers nearly half the time," it reports, "Social workers incorrectly determined safety almost 50% of the time. In fact, one quarter of the time they literally did not consider safety threats at all, and another 20% of the time they incorrectly identified safety threats--meaning they were completely wrong as to what was an actual threat to the child."

(The URL to the actual report is here:

<https://olis.leg.state.or.us/liz/2017R1/Downloads/CommitteeMeetingDocument/111688>)

The significance of this is that we have documented proof that not only are CPS workers fallible, but there is clearly either a lack of training or guidance or SOMETHING that is causing them to fail at their job 50% of the time, and then the rest of the time to either misdiagnose or ignore threats entirely. My very real concern, given that it has happened many times before, is that CPS will overstep their bounds and remove a child from a perfectly healthy situation simply because a parent makes an educated decision to delay or withhold vaccination. The fact is that the majority of parents who do not vaccinate their kids have a Bachelors Degree education or higher, and some of them, like myself, have a medical background. We collectively are not people who are a menace to society—we are well-educated individuals who can see that when it comes to vaccines that the Emperor has no clothes and aren't afraid to say something about it. The problem is that when we do so, we are currently at risk for CPS kidnapping our children. This is unacceptable. SB 687 needs to be passed as-is so medical professionals like myself don't have to run interference for parents when overzealous and prejudiced nurses get a bee in their bonnet for no reason, CPS can have better guidelines to conduct safety assessments, and we can all move on. Thank you.

Michael C King, BSN  
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