

From: [Kinsey Bond](#)
To: [JWMHS Exhibits](#)
Subject: Please vote NO on HB 3063
Date: Monday, April 22, 2019 12:44:47 PM

I am a resident of Hillsboro, Oregon and my husband and I are small business owners. We have 2 children, one is in school.

I am asking you to please vote no on HB 3063 because I feel that it is unconstitutional to force people to vaccinate. Americans have the right to make up their own minds. Our ancestors fought for that right.

I believe the "measles outbreak" is just a scare tactic that has been exaggerated by the media. If you look at the truth you can see that only 2 people in the US have died from the measles in the last 15 years, however, 127 people have died because of the MMR Vaccine, according to VAERS.

I am not against vaccinating, it's a great idea to eradicate disease, but I am against the ingredients they put in those vaccines that are harmful to humans. If they could fix that issue, I'm sure there would be no debate. If there were no risk of injury or death by vaccinating then more parents would be willing to vaccinate their children.

This is personal to me. My sister died 2 weeks after she was vaccinated. She was 6 months old. My mother never fully recovered and I don't want any mother to have to feel that. My family has suffered because of this. I basically grew up without a mom, she was always depressed, in bed. My dad left, he couldn't take it. I was raised by my older sisters until they went to college and I was on my own. My entire life could have been different if those nasty ingredients hadn't taken my sister's life. Her tiny body couldn't handle it. I can't risk that for my children. We will be forced to leave Oregon if this bill passes.

Thank you for your time. Please vote NO on HB 3063 in memory of my baby sister Kara Lee Adams.

Thank you,
Kinsey Bond

From: [Kira Belan](#)
To: [JWMHS Exhibits](#)
Subject: No on HB3036
Date: Tuesday, April 23, 2019 9:31:15 PM

Hello, my name is Kira and I am a mother of two. I am asking you to please vote no on HB 3036 and any amendments.

Our schools are already underfunded. Mandating Vaccination for ALL students in Oregon for school attendance will impact 31,521 students that have filed a non-medical exemption. The financial impact on schools/daycare/preschool would be astronomical and must likely teachers would be laid off.

Please consider ALL of the factors and consequences of this bill! This would be the most restrictive and invasive bill ever to pass in the United States. Our country was founded on freedom and choice and this bill is the opposite of that. It is discriminating against religions and personal beliefs.

I understand that people who want this bill believe that they are "protecting" children but I'm asking you to look deep in yourself and ask if that's really true. Why is it more important to protect a certain population than it is another? This bill would not protect my children, it would harm them and drastically change their lives. I'm asking you again to please really consider the ramifications of this bill on ALL the people that you represent. Please vote no on HB3036. Thank you for your time.

Sincerely,
Kira

From: [Kirsten Choate](#)
To: [JWMHS Exhibits](#)
Subject: No on HB3063
Date: Tuesday, April 23, 2019 8:32:49 AM

Good morning,

I am a mother of two living in Portland, Oregon, and I am writing to ask you to vote NO on HB3063. This bill will negatively impact my family and force us into homeschooling, moving out-of-state, or putting my youngest child at risk of further medical complications. He has had uncontrolled epilepsy for the last four years and it has put a huge strain on our life, to say the least. I spend my time caring for his needs, researching his options, advocating for his needs, and protecting his body from anything that might trigger further seizures or cognitive setbacks. I cannot in good conscience inject him with 72 vaccines right now - vaccines that come with a risk of seizures and acute and chronic damages. I know his body cannot handle it. My son does not qualify for a medical exemption under Oregon's strict guidelines. Please vote NO and protect vulnerable children. And know that there is a whole other side to the story when it comes to vaccines - please do your research!

Thank you,
Kirsten Choate
Portland, OR

From: [Kristen Locati](#)
To: [JWMHS Exhibits](#)
Subject: HB3063 Testimony
Date: Monday, April 22, 2019 11:19:48 PM
Attachments: [CDC-excipient-table-2-2.pdf](#)

Good afternoon committee members.

My name is Kristen Locati and I'm a mother from Hillsboro Oregon.

I am writing to urge a no vote on HB3063.

My son is 3 and when he received 2 vaccines together at 12 months, even on a spaced out schedule, he had a horrible and terrifying reaction. He got the most sick I've ever seen him, 105 fever, lethargic, wouldn't move, slept so deep I couldn't wake him. My very active little boy would not get off the couch to play for a couple days. Took him to urgent care where they said 'oh that's normal he's fine' and sent us on our way. Looking back I realize he had a reaction to a vaccine. Since then his Dr has reported this event to VAERS (<https://vaers.hhs.gov/>) and along with 2 other Doctor's agreed that my son is not a good candidate for vaccines. However, according to OHA guidelines he wouldn't qualify for a medical exemption.

Added to an already awful bill now that these amendments were added today that would put doctor's and homeschoolers under even more scrutiny. This is so concerning.

In addition to these issues, our church is held in a school so should this bill pass, we would be ostracized from our religious freedom to attend a place of worship. So not only is this bill forcibly injecting or removing children from school, but it's going against our constitutional right to practice our religion. Also, most families like mine have religious objections to some of the ingredients in vaccines including aborted fetal cells (harvested in most inhumane ways) and animal product/blood. I've attached a table of all the ingredients.

Vaccines aren't safe. They aren't one size fits all. This is why VAERS has awarded over \$4 billion to vaccine injury families. We all want the same thing - healthy kids. This bill only works for SOME children, not ALL. Over 31,000 children are set to be removed from school and that doesn't even include younger kids who aren't enrolled yet. If a parent has researched and made the tough decision to decline one or vaccines, they aren't going to change their mind just because they mandate it. Some of us absolutely won't risk our child's health to inject them again. And more than anything, any medical decision should be made in the privacy of a Doctor's office between patient and Doctor.

I beg you, please vote NO on HB3063. Save ALL our children, not just some.

Sincerely,

Kristen Locati
Hillsboro, Oregon

Vaccine Excipient & Media Summary

Excipients Included in U.S. Vaccines, by Vaccine

In addition to weakened or killed disease antigens (viruses or bacteria), vaccines contain very small amounts of other ingredients – excipients or media.

Some excipients are added to a vaccine for a specific purpose. These include:

Preservatives, to prevent contamination. For example, thimerosal.

Adjuvants, to help stimulate a stronger immune response. For example, aluminum salts.

Stabilizers, to keep the vaccine potent during transportation and storage. For example, sugars or gelatin.

Others are residual trace amounts of materials that were used during the manufacturing process and removed. These include:

Cell culture materials, used to grow the vaccine antigens. For example, egg protein, various culture media.

Inactivating ingredients, used to kill viruses or inactivate toxins. For example, formaldehyde.

Antibiotics, used to prevent contamination by bacteria. For example, neomycin.

The following table lists all components, other than antigens, shown in the manufacturers’ package insert (PI) for each vaccine. Each of these PIs, which can be found on the FDA’s website (see below) contains a description of that vaccine’s manufacturing process, including the amount and purpose of each substance. In most PIs, this information is found in Section 11: “Description.”

All information was extracted from manufacturers’ package inserts.

If in doubt about whether a PI has been updated since this table was prepared, check the FDA’s website at:

<http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm093833.htm>

Vaccine	Contains
Adenovirus	human-diploid fibroblast cell cultures (strain WI-38), Dulbecco’s Modified Eagle’s Medium, fetal bovine serum, sodium bicarbonate, monosodium glutamate, sucrose, D-mannose, D-fructose, dextrose, human serum albumin, potassium phosphate, pladone C, anhydrous lactose, microcrystalline cellulose, polyacrylamide potassium, magnesium stearate, cellulose acetate phthalate, alcohol, acetone, castor oil, FD&C Yellow #6 aluminum lake dye
Anthrax (Biothrax)	amino acids, vitamins, inorganic salts, sugars, aluminum hydroxide, sodium chloride, benzethonium chloride, formaldehyde
BCG (Tice)	glycerin, asparagine, citric acid, potassium phosphate, magnesium sulfate, iron ammonium citrate, lactose
Cholera (Vaxchora)	casamino acids, yeast extract, mineral salts, anti-foaming agent, ascorbic acid, hydrolyzed casein, sodium chloride, sucrose, dried lactose, sodium bicarbonate, sodium carbonate
DT (Sanofi)	aluminum phosphate, isotonic sodium chloride, formaldehyde, casein, cystine, maltose, uracil, inorganic salts, vitamins, dextrose
DTaP (Daptacel)	aluminum phosphate, formaldehyde, glutaraldehyde, 2-phenoxyethanol, Stainer-Scholte medium, casamino acids, dimethyl-beta-cyclodextrin, Mueller’s growth medium, ammonium sulfate, modified Mueller-Miller casamino acid medium without beef heart infusion
DTaP (Infanrix)	Fenton medium containing a bovine extract, modified Latham medium derived from bovine casein, formaldehyde, modified Stainer-Scholte liquid medium, glutaraldehyde, aluminum hydroxide, sodium chloride, polysorbate 80 (Tween 80)
DTaP-IPV (Kinrix)	Fenton medium containing a bovine extract, modified Latham medium derived from bovine casein, formaldehyde, modified Stainer-Scholte liquid medium, glutaraldehyde, aluminum hydroxide, VERO cells, a continuous line of monkey kidney cells, Calf serum, lactalbumin hydrolysate, sodium chloride, polysorbate 80 (Tween 80), neomycin sulfate, polymyxin B
DTaP-IPV (Quadracel)	modified Mueller’s growth medium, ammonium sulfate, modified Mueller-Miller casamino acid medium without beef heart infusion, formaldehyde, aluminum phosphate, Stainer-Scholte medium, casamino acids, dimethyl-beta-cyclodextrin, MRC-5 cells, normal human diploid cells, CMRL 1969 medium supplemented with calf serum, Medium 199 without calf serum, 2-phenoxyethanol, polysorbate 80, glutaraldehyde, neomycin, polymyxin B sulfate

Vaccine	Contains
DTaP-HepB-IPV (Pediatrix)	Fenton medium containing a bovine extract, modified Latham medium derived from bovine casein, formaldehyde, glutaraldehyde, modified Stainer-Scholte liquid medium, VERO cells, a continuous line of monkey kidney cells, calf serum and lactalbumin hydrolysate, aluminum hydroxide, aluminum phosphate, aluminum salts, sodium chloride, polysorbate 80 (Tween 80), neomycin sulfate, polymyxin B, yeast protein.
DTaP-IPV/Hib (Pentacel)	aluminum phosphate, polysorbate 80, sucrose, formaldehyde, glutaraldehyde, bovine serum albumin, 2-phenoxyethanol, neomycin, polymyxin B sulfate, modified Mueller's growth medium, ammonium sulfate, modified Mueller-Miller casamino acid medium without beef heart infusion, Stainer-Scholte medium, casamino acids, dimethyl-beta-cyclodextrin, MRC-5 cells (a line of normal human diploid cells), CMRL 1969 medium supplemented with calf serum, Medium 199 without calf serum, modified Mueller and Miller medium
Hib (ActHIB)	sodium chloride, modified Mueller and Miller medium (the culture medium contains milk-derived raw materials [casein derivatives]), formaldehyde, sucrose
Hib (Hiberix)	saline, synthetic medium, formaldehyde, sodium chloride, lactose
Hib (PedvaxHIB)	complex fermentation media, amorphous aluminum hydroxyphosphate sulfate, sodium chloride
Hep A (Havrix)	MRC-5 human diploid cells, formalin, aluminum hydroxide, amino acid supplement, phosphate-buffered saline solution, polysorbate 20, neomycin sulfate, aminoglycoside antibiotic
Hep A (Vaqta)	MRC-5 diploid fibroblasts, amorphous aluminum hydroxyphosphate sulfate, non-viral protein, DNA, bovine albumin, formaldehyde, neomycin, sodium borate, sodium chloride
Hep B (Engerix-B)	aluminum hydroxide, yeast protein, sodium chloride, disodium phosphate dihydrate, sodium dihydrogen phosphate dihydrate
Hep B (Recombivax)	soy peptone, dextrose, amino acids, mineral salts, phosphate buffer, formaldehyde, potassium aluminum sulfate, amorphous aluminum hydroxyphosphate sulfate, yeast protein
Hep B (Hepelisav-B)	vitamins and mineral salts, yeast protein, yeast DNA, deoxycholate, phosphorothioate linked oligodeoxynucleotide, phosphate buffered saline, sodium phosphate, dibasic dodecahydrate, monobasic dehydrate, polysorbate 80
Hep A/Hep B (Twinrix)	MRC-5 human diploid cells, formalin, aluminum phosphate, aluminum hydroxide, amino acids, sodium chloride, phosphate buffer, polysorbate 20, neomycin sulfate, yeast protein
Human Papillomavirus (HPV) (Gardasil 9)	vitamins, amino acids, mineral salts, carbohydrates, amorphous aluminum hydroxyphosphate sulfate, sodium chloride, L-histidine, polysorbate 80, sodium borate, yeast protein
Influenza (Afluria) Trivalent & Quadrivalent	sodium chloride, monobasic sodium phosphate, dibasic sodium phosphate, monobasic potassium phosphate, potassium chloride, calcium chloride, sodium taurodeoxycholate, ovalbumin, sucrose, neomycin sulfate, polymyxin B, beta-propiolactone, thimerosal (multi-dose vials)
Influenza (Fluad)	squalene, polysorbate 80, sorbitan trioleate, sodium citrate dehydrate, citric acid monohydrate, neomycin, kanamycin, barium, egg proteins, cetyltrimethylammonium bromide (CTAB), formaldehyde
Influenza (Fluarix) Quadrivalent	octoxynol-10 (TRITON X-100), α -tocopheryl hydrogen succinate, polysorbate 80 (Tween 80), hydrocortisone, gentamicin sulfate, ovalbumin, formaldehyde, sodium deoxycholate, sodium phosphate-buffered isotonic sodium chloride
Influenza (Flublok) Quadrivalent	sodium chloride, monobasic sodium phosphate, dibasic sodium phosphate, polysorbate 20 (Tween 20), baculovirus and <i>Spodoptera frugiperda</i> cell proteins, baculovirus and cellular DNA, Triton X-100, lipids, vitamins, amino acids, mineral salts
Influenza (Flucelvax) Quadrivalent	Madin Darby Canine Kidney (MDCK) cell protein, phosphate buffered saline, protein other than HA, MDCK cell DNA, polysorbate 80, cetyltrimethylammonium bromide, and β -propiolactone, Thimerosal (multi-dose vials)
Influenza (Flulaval) Quadrivalent	ovalbumin, formaldehyde, sodium deoxycholate, α -tocopheryl hydrogen succinate, polysorbate 80, thimerosal (multi-dose vials), phosphate-buffered saline solution
Influenza (Fluzone) Quadrivalent	formaldehyde, egg protein, octylphenol ethoxylate (Triton X-100), sodium phosphate-buffered isotonic sodium chloride solution, thimerosal (multi-dose vials)

Vaccine	Contains
Influenza (Fluzone) High Dose	egg protein, octylphenol ethoxylate (Triton X-100), sodium phosphate-buffered isotonic sodium chloride solution, formaldehyde
Influenza (FluMist) Quadrivalent	monosodium glutamate, hydrolyzed porcine gelatin, arginine, sucrose, dibasic potassium phosphate, monobasic potassium phosphate, ovalbumin, gentamicin sulfate, ethylenediaminetetraacetic acid (EDTA)
Japanese Encephalitis (Ixiaro)	aluminum hydroxide, protamine sulfate, formaldehyde, bovine serum albumin, host cell DNA, sodium metabisulphite, host cell protein
Meningococcal (MenACWY-Menactra)	Watson Scherp media containing casamino acid, modified culture medium containing hydrolyzed casein, ammonium sulfate, sodium phosphate, formaldehyde, sodium chloride
Meningococcal (MenACWY-Menveo)	formaldehyde, amino acids, yeast extract, Franz complete medium, CY medium
Meningococcal (MenB – Bexsero)	aluminum hydroxide, <i>E. coli</i> , histidine, sucrose, deoxycholate, kanamycin
Meningococcal (MenB – Trumenba)	defined fermentation growth media, polysorbate 80, aluminum phosphate, histidine buffered saline
MMR (MMR-II)	chick embryo cell culture, WI-38 human diploid lung fibroblasts, vitamins, amino acids, fetal bovine serum, sucrose, glutamate, recombinant human albumin, neomycin, sorbitol, hydrolyzed gelatin, sodium phosphate, sodium chloride
MMRV (ProQuad) (Frozen)	chick embryo cell culture, WI-38 human diploid lung fibroblasts, MRC-5 cells, sucrose, hydrolyzed gelatin, sodium chloride, sorbitol, monosodium L-glutamate, sodium phosphate dibasic, human albumin, sodium bicarbonate, potassium phosphate monobasic, potassium chloride; potassium phosphate dibasic, neomycin, bovine calf serum
MMRV (ProQuad) (Refrigerator Stable)	chick embryo cell culture, WI-38 human diploid lung fibroblasts, MRC-5 cells, sucrose, hydrolyzed gelatin, urea, sodium chloride, sorbitol, monosodium L-glutamate, sodium phosphate, recombinant human albumin, sodium bicarbonate, potassium phosphate, potassium chloride, neomycin, bovine serum albumin
Pneumococcal (PCV13 – Prevnar 13)	soy peptone broth, casamino acids and yeast extract-based medium, CRM197 carrier protein, polysorbate 80, succinate buffer, aluminum phosphate
Pneumococcal (PPSV-23 – Pneumovax)	phenol
Polio (IPV – Ipol)	Eagle MEM modified medium, calf bovine serum, M-199 without calf bovine serum, vero cells (a continuous line of monkey kidney cells), phenoxyethanol, formaldehyde, neomycin, streptomycin, polymyxin B
Rabies (Imovax)	human albumin, neomycin sulfate, phenol red indicator, MRC-5 human diploid cells, beta-propiolactone
Rabies (RabAvert)	chicken fibroblasts, β-propiolactone, polygeline (processed bovine gelatin), human serum albumin, bovine serum, potassium glutamate, sodium EDTA, ovalbumin, neomycin, chlortetracycline, amphotericin B
Rotavirus (RotaTeq)	sucrose, sodium citrate, sodium phosphate monobasic monohydrate, sodium hydroxide, polysorbate 80, cell culture media, fetal bovine serum, vero cells [DNA from porcine circoviruses (PCV) 1 and 2 has been detected in RotaTeq. PCV-1 and PCV-2 are not known to cause disease in humans.]
Rotavirus (Rotarix)	Vero cells, dextran, Dulbecco's Modified Eagle Medium (sodium chloride, potassium chloride, magnesium sulfate, ferric (III) nitrate, sodium phosphate, sodium pyruvate, D-glucose, concentrated vitamin solution, L-cystine, L-tyrosine, amino acids solution, L-glutamine, calcium chloride, sodium hydrogenocarbonate, and phenol red), sorbitol, sucrose, calcium carbonate, sterile water, xanthan [Porcine circovirus type 1 (PCV-1) is present in Rotarix. PCV-1 is not known to cause disease in humans.]
Smallpox (Vaccinia) (ACAM2000)	African Green Monkey kidney (Vero) cells, HEPES, 2% human serum albumin, 0.7% sodium chloride USP, 5% Mannitol USP, neomycin, polymyxin B, 50% Glycerin USP, 0.25% phenol USP
Td (Tenivac)	aluminum phosphate, formaldehyde, modified Mueller-Miller casamino acid medium without beef heart infusion, ammonium sulfate, sodium chloride, water

Vaccine	Contains
Td (Mass Biologics)	aluminum phosphate, formaldehyde, thimerosal, modified Mueller's media which contains bovine extracts, ammonium sulfate
Tdap (Adacel)	aluminum phosphate, formaldehyde, 2-phenoxyethanol, Stainer-Scholte medium, casamino acids, dimethyl-beta-cyclodextrin, glutaraldehyde, modified Mueller-Miller casamino acid medium without beef heart infusion, ammonium sulfate, modified Mueller's growth medium
Tdap (Boostrix)	modified Latham medium derived from bovine casein, Fenton medium containing a bovine extract, formaldehyde, modified Stainer-Scholte liquid medium, glutaraldehyde, aluminum hydroxide, sodium chloride, polysorbate 80
Typhoid (Typhim Vi)	hexadecyltrimethylammonium bromide, formaldehyde, phenol, polydimethylsiloxane, disodium phosphate, monosodium phosphate, semi-synthetic medium, sodium chloride, sterile water
Typhoid (Vivotif Ty21a)	yeast extract, casein, dextrose, galactose, sucrose, ascorbic acid, amino acids, lactose, magnesium stearate, gelatin
Varicella (Varivax) <i>Frozen</i>	MRC-5 human diploid cells, including DNA & protein, sucrose, hydrolyzed gelatin, sodium chloride, monosodium L-glutamate, sodium phosphate dibasic, sodium phosphate monobasic, potassium phosphate monobasic, potassium chloride, EDTA, neomycin, fetal bovine serum
Varicella (Varivax) <i>Refrigerator Stable</i>	MRC-5 human diploid cells, including DNA & protein, sucrose, hydrolyzed gelatin, sodium chloride, monosodium L-glutamate, urea, sodium phosphate dibasic, potassium phosphate monobasic, potassium chloride, neomycin, bovine calf serum
Yellow Fever (YF-Vax)	sorbitol, gelatin, sodium chloride, egg protein
Zoster (Shingles) <i>(Zostavax) Frozen</i>	MRC-5 human diploid cells, including DNA & protein, sucrose, hydrolyzed porcine gelatin, sodium chloride, monosodium L-glutamate, sodium phosphate dibasic, potassium phosphate monobasic, potassium chloride; neomycin, bovine calf serum
Zoster (Shingles) <i>(Zostavax) Refrigerator Stable</i>	MRC-5 human diploid cells, including DNA & protein, sucrose, hydrolyzed porcine gelatin, urea, sodium chloride, monosodium L-glutamate, sodium phosphate dibasic, potassium phosphate monobasic, potassium chloride, neomycin, bovine calf serum
Zoster (Shingles) <i>(Shingrix)</i>	sucrose, sodium chloride, dioleoyl phosphatidylcholine (DOPC), 3-O-desacetyl-4' monophosphoryl lipid A (MPL), QS-21 (a saponin purified from plant extract <i>Quillaja saponaria</i> Molina), potassium dihydrogen phosphate, cholesterol, sodium dihydrogen phosphate dihydrate, disodium phosphate anhydrous, dipotassium phosphate, polysorbate 80

A table listing vaccine excipients and media by excipient is published by the Institute for Vaccine Safety at Johns Hopkins University, and can be found at <http://www.vaccinesafety.edu/components-Excipients.htm>.

Updates:

Trumenba: (added Aluminum phosphate)
RotaTeq: PI dated 2/2017
Rotarix: 6/11/18 (PI dated xx/xxxx)
Smallpox: 3/2018
Td (Tenivac): April 2013
Td (Mass Biologics): April 2009 (no change)
Tdap (Adacel): xxx/2017 (no change)
Tdap (Boostrix): 6/12/2018 (PI dated xx/xxxx) (no change)
Typhim Vi: March 2014 (added sodium chloride & buffered saline)
Ty21a: September 2013
Varicella Frozen: 2/2017
Varicella Refrigerator Stable: 2/2017
YF Vax: June 2016
Zostivax Frozen: xx/2018
Zostivax Refrigerator Stable: xx/2018
Shingrix: 10/2017

From: [kleinwerks](#)
To: [JWMHS Exhibits](#); [Sen Beyer](#); [Rep Nosse](#); [Sen Heard](#); [Sen Wagner](#); [Rep Hayden](#); [Rep Salinas](#); [Rep Schouten](#); [Rep Stark](#)
Subject: Testimony: Oppose SB 3063.
Date: Tuesday, April 23, 2019 2:23:58 PM

Dear Committee Members,

You must oppose SB 3063.

The existing exemption process is fine.

There is no reason to further limit, force and require potentially dangerous pharmaceutical products which have no liability. Especially not when safe, effective alternatives and non-toxic alternatives such as homeopathic based products are known and available for the contagious diseases of concern. Although vaccines produce and force an immune response, it does not actually prevent the host from getting the disease or from spreading germs!

There are many modes of health and many forms of healthcare. Those choices should remain private and left to individuals. Scaring and manipulating people with requirements for school, or exclusion, threats and coercion or by preventing exemptions is not healthcare and is not protecting public health.

Hosts can still catch and spread what they are vaccinated for!

Safety concerns and moral objections are incredibly valid as outlined by the open letter from Dr. Deisher that I have included below. And simple questions of their true efficacy remain despite the common rhetoric.

What is most important here is that above all, informed consent and body autonomy, and private choices should be protected, preserved, honored and upheld.

Oppose SB 3063.

Best regards,

Mrs. Guyll
Oregon resident

Open Letter from Dr. Deisher of Sound Choice Pharmaceutical Institute:

“My name is Dr. Theresa Deisher. I am Founder and Lead Scientist at Sound Choice Pharmaceutical Institute, whose mission is to educate the public about vaccine safety, as well as to pressure manufacturers to provide better and safer vaccines for the public. I obtained my doctorate from Stanford University in Molecular and Cellular Physiology in 1990 and completed my post-doctoral work at the University of Washington. My career has been spent in the commercial biotechnology industry, and I have done work from basic biological and drug discovery through clinical development.

I am writing regarding unrefuted scientific facts about fetal DNA contaminants in the Measles-Mumps- Rubella vaccine, which must be made known to lawmakers and the public.

Merck’s MMR II vaccine (as well as the chickenpox, Pentacel, and all Hep-A containing vaccines) is manufactured using human fetal cell lines and is heavily contaminated with human fetal DNA from the production process. Levels in our children can reach up to 5 ng/ml after vaccination, depending on the age, weight and blood volume of the child. That level is known to activate Toll-like receptor 9 (TLR9), which can cause autoimmune attacks.

To illustrate the autoimmune capability of very small amounts of fetal DNA, consider this: labor is triggered by fetal DNA from the baby that builds up in the mother’s bloodstream, triggering a massive immune rejection of the baby. This is labor.

It works like this: fetal DNA fragments from a baby with about 300 base pairs in length are found in a pregnant mother’s serum. When they reach between 0.46– 5.08 ng/mL in serum, they trigger labor via the TLR9 mechanism. The corresponding blood levels are 0.22 ng/ml and 3.12 ng/ml. The fetal DNA levels in a child after being injected with fetal-manufactured vaccines reach the same level that triggers autoimmune rejection of baby by mother.

Anyone who says that the fetal DNA contaminating our vaccines is harmless either does not know anything about immunity and Toll- like receptors or they are not telling the truth."

This open letter can be found at the website for Informed Choice Washington. Thank you.

From: [KoraLynn Hollyman](#)
To: [JWMHS Exhibits](#)
Subject: Oppose HB3063
Date: Tuesday, April 23, 2019 5:37:12 PM

I am writing to you to express my disgust towards proposed House Bill 3063. Based on religious beliefs I strongly oppose vaccinations that contain aborted fetal cells and my children WILL NOT receive them - passing of this bill would violate my 1st amendment right to religious beliefs. It is my philosophical belief that as a parent I should be able to make decisions about vaccinations and any/all other pharmaceutical drugs after careful discussion and informed consent with my doctor - and I should be able to do so free from government overreach and mandates that force unnecessary medical harm to my children. Where there is RISK there must be CHOICE and as the US Supreme Court ruled in 2011 *Bruesewitz v. Wyeth LLC*, that vaccines are "unavoidably unsafe". It is my sacred duty as a mother and parent to make informed choices and act in the best interest of my children - there is no room for government mandates between parental choice and medical decisions for a child who is healthy, loved, and cared for. This belief is protected by the 14th amendment which reserves my right to parent my children INCLUDING medical decisions without state intervention.

If HB3063 were to become law you are effectively discriminating against the vulnerable population of more than 31,000 children currently enrolled in Oregon public education that would no longer be allowed to attend school without immediately catching up on all the required vaccines that even the CDC recommends spacing out over years. Are you then going to take liability for any injuries that happen because families who are financially unable to homeschool would now be forced to have their children vaccinated against their wishes? Did you know that in 1986 Congress passed the "National childhood vaccine injury Act" which removed financial liability from vaccine manufacturers and placed it on taxpayers with a \$ 0.75 tax on every vaccine given? Did you know that money goes into a fund called the National Vaccine Injury Compensation Program and they have paid out a total of more than \$4 BILLION (\$4,061,322,557.08) to families of children who were permanently damaged or died directly because of VACCINE INJURY? Did you know that in 2019 ALONE the NVICP have already paid out \$131,485,775.00 to compensate for vaccine injury? This is almost \$1.16 million dollars per day so far in 2019. (Please see the monthly report for NVICP here: <https://www.hrsa.gov/sites/default/files/hrsa/vaccine-compensation/data/monthly-stats-april-2019.pdf>) Another glaring statistic to add to that is that these daunting numbers only account for approximately 5% of the vaccine injuries reported to VAERS (Vaccine Adverse Event Reporting System).

As lawmakers, you cannot ignore these statistics as they represent the HUGE RISK you are imposing on the citizens of our state. Instead of mandating things that are UNSAFE and HARMFUL on our CHILDREN you should be pushing and advocating for VACCINE SAFETY, INFORMED CONSENT, and supporting Oregonian families who have suffered tragedies at the hands of The FDA, The CDC, and Pharmaceutical companies that *some* of you are endorsed by. Who do you work for? The people of Oregon, or the pharmaceutical

companies that pad your pockets? Because if you work for THE PEOPLE and you have our best interests at heart, you will vote NO on HB3063.

I sincerely hope that you are able to see both sides of this issue and not just dismiss testimonies from countless vaccine injured families as "crazy anti-vaxxers". Please do your due diligence before you vote on this bill and vote in a way that best represents the health and interest of ALL Oregonian children - not just those who have bought into the scam of childhood vaccinations. My hope is that before you vote or make a decision on this bill you have taken the initiative to look into vaccine safety and efficacy as I have and found that the faulty science and blanket statements we are get are simply not enough to back up a state wide mandate on unsafe pharmaceutical products.

In closing I would ask that you please consider and accept Senator Thatcher's 29 amendments to HB3063. If we must work towards legislation addressing vaccination, let's approach it with common sense and high regard for the health of the children you're wishing to mandate these vaccinations to.

Sincerely,

KoraLynn Hollyman

Member of House District 59

From: [Kori Curry](#)
To: [JWMHS Exhibits](#)
Subject: Vote no on HB3063
Date: Monday, April 22, 2019 7:13:15 PM

Dear Sir,

I am greatly concerned about HB3063 and the ramifications this will have. I work at a private school here in Oregon. There are approximately 604,000 students enrolled in schools in our state. Of those children 31,500 families have a non medical exemption on file with OHA. Within that group it is reported by OHA that 15,700 are fully un-vaccinated while the rest are roughly 50% vaccinated.

In the private school sector should this bill get passed it is estimated that private schools in particular will be hit the hardest with an estimated \$255 million dollars loss in revenue per year. This will put many private schools out of business. I know that my own school will be hugely affected by this, potentially losing an estimated 25% of our students and many of our valuable staff as well.

Oregon has fought long and hard to protect our private schools. Governor Brown proclaimed February 7 Private Schools Appreciation Day just 3 weeks ago. As the proclamation states, 'The strength of Oregon private schools is rooted in the democratic ideal of freedom of choice.' Please look at the grave effects this bill will have on our schools and vote no on HB3063.

Thank you,
Kori Curry

From: [Kostanty Knurowski](#)
To: [JWMHS Exhibits](#)
Subject: NO on HB 3063
Date: Tuesday, April 23, 2019 9:35:34 AM

Where there is risk, there must be a choice. Please vote No on HB 3063. Thank you.

Sincerely,

Kostanty Knurowski

From: [Krintin reiswaig](#)
To: [JWMHS Exhibits](#)
Subject: Oppose HB3063
Date: Tuesday, April 23, 2019 8:02:24 PM

To whom it may concern ,

My name is Krintin, and I am a resident of Central Point, Oregon. I oppose HB 3063 and ask that you vote no and stand up for medical freedom.

My heart aches as I heard that Oregon was wanting to take away non medical exemptions for vaccinations. As a parent and US citizen this scares me! This is a slippery slope on what could also be mandated and forced in our future.

I feel that taking away our religious and philosophical exemptions is against our human rights, and choice as parents. Every parent makes decisions for their children based on what they feel is best. After several years of researching vaccinations, I found that the benefit did not outweigh the risk for my children.

Taking away exemptions will not force parents who have a strong stance on the subject to vaccinate. Instead, parents will flee to other states or countries, or turn to home schooling. I am unable to homeschool my children, as we need both my husbands and my income. As a result, we would move, leaving the place we love and call home.

There is not one medication that is a one size fits all. Some people are allergic to penicillin, sulfa drugs, ibuprofen, etc. whereas some people can take those medications without harm. Yet, the government treats vaccines to be safe for everyone. Some children are fine after vaccinations, yet some have adverse reactions. I'm not willing to find out if my child will be that one that has a major adverse reaction. I feel genetic testing needs to be done prior to vaccination before determining if a vaccine should be administered. I feel as though ingredients in vaccines need to be looked at and determined if they effect the body negatively. I also feel like the CDC schedule needs to be looked at for safety, they currently are trying to add even more vaccines to the schedule. At what point will we say enough is enough? When will we

wonder how this effects our bodies when introduced to toxic ingredients so frequently?

The safety studies of vaccines are just not there. Medications go through double blind placebo testing to test safety, but vaccines safety studies are tested against another vaccine or against an adjuvant like aluminum. Vaccine inserts state they have not been tested against mutagenic, carcinogenic, or fertility concerns. So how with confidence can they say vaccines are safe? Vaccine manufactures are not held liable for adverse reactions and are immune to being sued, thus resulting in no drive to make vaccines safer.

I want to point out that California passed SB 277 starting school year 2016-2017. This bill eliminated non medical exemptions. Even with mandating vaccinations, we currently see a pertussis outbreak with all the cases being vaccinated. This proves that despite mandatory vaccinations we will still continue to see disease outbreaks. This also proves that the product is not effective. Pertussis can lay dormant in the throat of a recently vaccinated individual for up to 21 days, therefore vaccinated children can spread pertussis!

There is so many questions when it comes to vaccines. We need answers, not taking away our medical freedom. I encourage you to focus your desire to protect our children in a different way, demand proper safety studies, and make manufacturers liable on their product.

Thank you,

Krintin Villarreal

Sent from my iPhone

From: [Kristen](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063 Testimony
Date: Tuesday, April 23, 2019 11:46:07 AM

Dear Human Services Committee,

My name is Kristen Baugher and I am a parent of a child with a rare genetic disorder called Alagille Syndrome. I have served on the board for the Alagille Syndrome Alliance and currently am employed as a Parent Partner at [Salem Health](#) through grant funding to support families who are navigating many different diagnosis. Thank you for allowing me to provide my testimony.

I am writing to share my strong opposition against House Bill 3063. This bill is a violation to my rights as a parent, specifically to my rights as a parent to a child with a rare genetic disorder. This bill would require that I provide my child with immunizations that have not been researched for their safety and efficacy in children with Alagille Syndrome or any other rare diseases. According to Global Genes, a global non-profit advocacy organization for individuals and families fighting rare and genetic diseases, 1 in 10 people are affected by rare disease or disorder. 1 in 2 of these patients are children. 1 in 2 of every rare disease does not have a foundation or research support group. This data is important because this represents the amount of people that do not have the proper research and data in order to know the outcome of how an immunization may affect their child. Including a medical exemption into this bill does not cover these thousands of disorders. Many do not qualify for an exemption. There are over 7000 types of rare diseases and disorders that take on average 8 years to diagnose.

As a parent of a child with a rare disorder I have personally had to learn how to navigate through the medical community with little to no information on my child's condition. I have repeatedly been met with conflicting medical recommendations and have learned that I will need to be the expert of my child and her disorder. I will need to advocate for research, for data, and for treatments. Every local health professional I have met has never heard of my child's condition. Many have looked at me and said "Kristen, you will need to teach me about her disorder and what she needs." They do not know the outcome of her health or what factors can influence her health to improve or decline. The only information I have is the feedback from fellow families through the use of social media and conference gatherings. We are essentially walking blindly and doing our best to make the right decisions. We are currently enrolled in the only drug trial available for Alagille Syndrome in order to continue to get information and hope for relief for other children.

This bill would force all of these rare families into a medical decision that may not be right for their child. Parents of rare children quickly learn that they will have to be the advocate for medical decisions because that is all that they have. Until there is adequate information and research for each and every rare disorder, there is no reason for a medical decision to be forced onto anyone. This bill would take our medical freedom rights away as advocates and that is unacceptable. Please consider opposing House Bill 3063 for the sake of my child.

Thank you for your time,
Kristen Baugher
ekbaugher@aol.com
[503-409-5703](tel:503-409-5703)

From: [Krista L](#)
To: [JWMHS Exhibits](#)
Subject: Vote no on hb3063
Date: Tuesday, April 23, 2019 11:42:56 PM

Dear Senator,

I am writing to request that you vote no on house bill 3063, it is a direct infringement on our rights as parents, as homeschoolers and as citizens.

It is out of great concern that I write to you tonight. I am horrified to think that our state is working to remove more rights and freedoms from its citizens. As a mother of 2 children who have attended public, private, and charter schools before we decided that homeschooling would be the best fit for our children's schooling needs, this bill would negatively effect my children.

Since removing them from the school system my children have thrived, excelled in all of their courses, athletics, extra curricular activities, friendships, traveled and learned through many hands on activities not available in the school system. We chose homeschooling because it is the best option for our children and our family. This bill will infringe on our rights as a homeschooling family and what our options are as homeschoolers.

My children were vaccinated, but after learning all the negative effects of vaccines and suffering from a few of them we have changed our view of vaccines. Many of our friends and family members have had children suffer major negatives from vaccines. A close friends son had a major reaction from a vaccine and is now severely autistic and reverted back to a baby like mental state, where he can no longer talk or communicate, he is no longer potty trained, no longer shows affection or remembers things he knew before the vaccine. He used to be a happy, outgoing, thriving, talkative 3 year old until 3 days after his vaccination. One of my cousins children has major health issues caused by a vaccine injury and multiple others that I know personally have similar stories.

How can our government insist that vaccines are safe when there have not been any tests on the effectiveness of each vaccine in over 30 years? Who moderates and tests the vaccines and the companies who make them? How are they moderated and when? The companies who make vaccines have not been held accountable for the many many deaths and injuries incurred by vaccines, why?!!!!! There are countless risks created by enforcing them on children who do not have strong immune systems or are born with chromosome deformities and yet this bill will enforce that they are required to have almost 60 vaccines in their young lives?!!! It has been scientifically proven, countless doctors, nurses, health advisers agree that vaccines are not safely used or administered, not effective, not tested and/or not deemed safe yet they continue to be pushed on the American public!!! Why?? Why is our state vying to shove needles into our children against their will, against their parents wishes/decisions?? It is ludacris that children will be subjected to this lunacy, especially those who have illnesses or are potential carriers of a disease that would cause them severe reactions to a vaccine. That they will not be able to be excused on a medical exemption nor will parents be able to use a religious exemption any longer if this bill passes!?!?

What happened to freedom of life, liberty and freedom of religion?? Do our laws that have governed this great nation since the beginning no longer apply in this state? If that is the case we will be moving and taking our votes and tax dollars elsewhere!

It is not the government's role or right to determine what is best for our children. I as the parent am responsible for determining what is best for their health! Please vote no and help

keep our parental rights to protect our kids!

Regards,
Mrs. L

From: [Kristel Gabriel](#)
To: [JWMHS Exhibits](#)
Subject: No on HB 3063
Date: Tuesday, April 23, 2019 7:39:13 PM

Vote NO on HB 3063!
Where there is risk there must be choice
-Kristel Gabriel

Proud mother of two fully vaccinated children who still believe we should have the choice regarding our medical care.

Sent from my iPhone

From: [Kristi Murphy](#)
To: [JWMHS Exhibits](#)
Subject: RE: NO on HB 3063
Date: Monday, April 22, 2019 5:47:18 PM

Dear Joint Committee on Ways and Means,

I write today regarding HB 3063.

In 1853, my great-great-great grandparents traveled from Illinois to Cottage Grove in the hopes of a brighter future for themselves and their families. My great-great-great grandfather lost his mother and brother in the Clark Massacre in Idaho during the 1851 Train on which his brother, Thomas Clark, was Captain. Despite the danger and, most certainly, fear of the unknown on the Trail, they traveled with their numerous children, including my great-great grandmother, who was only 1 year old.

It is because of them that I have the courage and the obligation to write to you today.

I implore you to support a parent's right to make decisions about his or her child's healthcare.

In charting for my acupuncture practice, one way of tracking informed consent is to use the acronym "PARQ", which stands for procedures (P), viable alternatives (A), material risks (R) and patient questions (Q). When administering any medical intervention, including VACCINES, a system such as PARQ MUST be utilized. In the proposed mandate, there is no VIABLE ALTERNATIVE, the MATERIAL RISKS are not discussed and it will not matter if the patient has QUESTIONS, as there won't be an alternative to reception of all but the mandated schedule.

This is NOT the American way. This is not why my family came to the colonies and this is not why my family traveled the Oregon Trail.

Twenty years ago, my life stopped dead in its tracks. I started experiencing nausea and rapidly losing weight. I started having panic attacks and severe anxiety. I felt weak and had malaise. I had to move back home with my parents. My life became about a restricted diet, limiting activities to conserve energy and doctors' appointments. The only thing that was different just prior to my life taking this turn was that I had received the Hep B vaccination.

Prior to that, I had no need to doubt in the safety of vaccines. I had received them as a child and was healthy with no acute side effects, of which I was aware.

And so, I began to educate myself about vaccines. My education extended to a Master of Traditional Oriental Medicine. After I became ill from my vaccine, Chinese Medicine, I believe, saved my life and helped me to regain improved health. I wanted to do the same for others.

I am worlds better than I was at 28, thanks to knowledgeable healthcare practitioners, supportive friends, personal experience and 20 years of education in holistic education. Thousands of hours and tens of thousands of dollars later, I am living a fairly normal life.

But, what about those who aren't?

What about those babies or teenagers or adults who haven't been as fortunate as I?

This is only my story. I have also heard the stories of others. For example, two acquaintances have shared with me their experience of the onset of juvenile rheumatoid arthritis and juvenile diabetes right after their childhood vaccinations.

We live in a society of staunchly held beliefs. One of those beliefs is that vaccines are safe and effective. When somebody suffers an adverse reaction to a vaccine, not only is the affected suffering the physical and emotional pain, he or she is doubted and ridiculed by family, friends and, if they post their experience on Facebook, the entire nation.

Those vaccinated after the 1983 vaccine schedule change have had to endure large quantities of preservatives and adjuvants injected into their bodies. Is it possible that there is a connection with the large uptick in children suffering from auto-immune conditions, allergies, attention disorders, not to mention more severe illnesses such as brain damage and cancer? Until there is **absolute** proof that **each** individual child will not be directly impacted by the injection that he or she is being given, we need room to make the choice to vaccinate or not vaccinate, to selectively vaccinate or to spread out the shots in a fashion that will adequately allow the child's body to tolerate them more successfully. Each child has his or her own genetic make up, environmental stressors and gut biome. **ALL** of these things need to be taken into account before any medical intervention is performed, unless in the case of a severe accident or life threatening experience.

When a legislator votes on a bill like HB 3063, I believe that they are making this decision based on 20th century knowledge. The amount of new information on epigenetics, brain-gut connections and the gut biomes' relationship to immunity is new and exciting and can give a clear understanding as to why some children react to vaccines and some don't. How many people with law making power are up to date on current research? Or, have taken the time to speak to experts in these fields of new research, instead of relying on old data and the word of the CDC?

I ask that, in the face of this decision, you take time before you make a decision about the fate of Oregon's children to study the literature on vaccination and vaccination side effects. Please don't make a decision that may impact children and their futures until you speak to families whose lives have been forever changed. Take the time to confer with doctors who support selective vaccination and why.

Before you vote yes on this bill, take into consideration the personal impact vaccines have had on your constituents already. How many more will have to experience a negative impact before legislators understand that **mandating** health care initiatives that require injecting chemicals into the human body is not a good idea?

Sincerely,
Kristi Murphy

Tigard, OR

Sent from [Mail](#) for Windows 10

From: [Kristi Murphy](#)
To: [JWMHS Exhibits](#)
Subject: RE: NO on HB 3063 (Corrected and resent)
Date: Tuesday, April 23, 2019 7:21:21 AM

Dear Joint Committee on Ways and Means,

I write today regarding HB 3063.

In 1853, my great-great-great grandparents traveled from Illinois to Cottage Grove in the hopes of a brighter future for themselves and their families. My great-great-great grandfather lost his mother and brother in the Clark Massacre in Idaho during the 1851 Train on which his brother, Thomas Clark, was Captain. Despite the danger and, most certainly, fear of the unknown on the Trail, they traveled with their numerous children, including my great-great grandmother, who was only 1 year old.

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Sincerely,
Kristi Murphy
Tigard, OR

Sent from [Mail](#) for Windows 10

From: [Kristin Harris](#)
To: [JWMHS Exhibits](#)
Subject: HB 3036
Date: Tuesday, April 23, 2019 8:26:11 AM

My name is Kristin Harris. January 30th, 2019 my daughter Gracey got the MMR at age 12. Two days later on February 1st she had a severe migraine vomiting 4 times. To this day, 11.5 weeks later she is still fighting constant headaches. The headaches come in waves, some days she acts like a normal kid other days she can't go to school. She has missed over 10 days of school in the last 11.5 weeks. I have seen 3 different medical doctors, a acupuncturist, a chiropractor, and the ophthalmologist. Nothing has helped! She is currently seeing nutritionists and an ND working together to improve her health. I was told by the pediatrician to never let her get another MMR. If this bill passes and you take away our right for a religious and philosophical exemption we will still not comply. I will not jeopardize the life long health of my daughter. We will be part of the over 31 thousand students flooding the on line public school system. Please consider the negative and harmful side effects for our children and our state if this bill passes.

Sincerely,

Kristin Harris

From: [Kristina Soff](#)
To: [JWMHS Exhibits](#)
Subject: Please oppose HB 3036
Date: Tuesday, April 23, 2019 7:02:15 PM

Hi,

My name is Kristina Soff from Canby, Or and I oppose this bill HB 3063.

~Kristina

Sent from my iPhone

From: [Kristine Taylor](#)
To: [JWMHS Exhibits](#)
Subject: Oppose HB 3063
Date: Wednesday, April 24, 2019 5:26:31 PM

Dear Joint Ways and Means subcommittee on Health Services,

I oppose HB 3063. This bill takes away my rights as a parent to make the best choices for my children. I am a chiropractor and I have studied health for over 20 years. I have looked at the actual research and have found that vaccines are not safe for all people and are not effective for all. The research shows that people respond in different ways to [the vaccines](#), and some of those are in negative ways.

There are thousands of people including parents, grandparents, doctors, nurses and teachers that oppose this bill. We have no financial gain by speaking up, whereas the pharmaceutical companies have everything to gain if this bill passes. Please do not mandate a medical procedure that the manufacturers have no liability for. Drug manufacturers do not have our best interest in mind. You can look what Vioxx and Opioids have done to the people. The drug companies have been sued for injuries and deaths from these drugs. They are not held accountable for injuries or death from vaccines. Vaccines are just like other pharmaceutical drugs that have risks and side effects. There has been over \$4 billion paid out to vaccine injured children since the 1986 National Childhood Vaccine Injury Act was passed, in which the pharmaceutical companies are not held liable for injuries and death due to vaccines. Big Pharma is who profits from this law passing!!!

The health decisions for children should be made by their parents with advice from their doctors. The state government should not be deciding what medical procedure we should have. This bill violates informed consent and takes away our right to say what procedures are done to our bodies.

HB 3063 aims to take away my children's right to an education, both at public and private schools. This bill will discriminate against those families that are making a choice to do what they feel is best for their children. This bill would also segregate healthy children from their peers, which could cause negative emotional consequences.

I ask that you please listen to the concern of your constituents and allow us to have the freedom to make our own medical decisions about what is best for the health of our families. Please vote no on HB 3063 and all of the amendments.

Thank you for your time.

Sincerely,

Kristine Taylor D.C., Klamath Falls, OR

From: [Kristy Newell](#)
To: [JWMHS Exhibits](#)
Subject: testimony for hearing re: HB3063
Date: Tuesday, April 23, 2019 6:55:17 PM

Dear esteemed committee members,

My name is Kristy Newell and I am a mother and midwife from Talent, Oregon. I am writing to you today to ask you to vote NO on HB3063 and all amendments.

First and foremost, HB3063 violates our intrinsic right to make decisions about our own bodies and the bodies of our precious children. It is inappropriate for the state to violate medical informed choice, which is foundational for ethical health care, especially where there is risk. As a midwife, informed choice is the cornerstone of all of the care that I offer my clients. My job isn't to decide what testing and procedures are best for families but to educate them about the standard of care, the benefits, risks and alternatives and then to respect their informed choice. It is extremely concerning to me that many medical providers and now the state of Oregon seem to believe that doctors and the state have ultimate authority and power over our bodies. Mandating vaccines and holding public education hostage is coercion.

Enacting mandatory vaccination is extreme government overreach, a violation of medical and personal privacy, and suggestive of corruption by the immensely influential pharmaceutical industry. Please do not allow the pharmaceutical industry to control our bodies. Please protect philosophical and religious exemptions, medical informed choice and the right of informed parents to make the best choices for their children.

Thank you for your time and consideration.

Sincerely,

Kristy Newell, CPM

9969 Wagner Creek Rd.

Talent, OR 97540

541-660-9849

From: [Krystal Barnett](#)
To: [JWMHS Exhibits](#)
Date: Tuesday, April 23, 2019 7:41:20 AM

Vote no on HB 3063
I support parental rights
Krystal
Oregon resident

From: [K.O](#)
To: [JWMHS Exhibits](#)
Subject: Please vote no on HB3063!
Date: Monday, April 22, 2019 10:09:11 PM

Please vote no on HB3063 and any amendments on Wednesday! My wife and I moved to Oregon partially because the state offered a choice to vaccinate. We're not against vaccination entirely but the unneeded added chemicals are a concern for us. The vaccine insert even warns of complications of taking these vaccines. Please do a vaccinated vs unvaccinated study also before you force these on our children.

Best Regards,
Kurtis W Olin

From: [Kyle Haggerty](#)
To: [JWMHS Exhibits](#)
Subject: House Bill 3063
Date: Tuesday, April 23, 2019 6:53:24 AM

Dear Senators Wyden and Merkley,

As a Medical Student at Oregon Health & Science University, I am writing on behalf of medical professionals everywhere, to urge action on non-medical exemptions from state immunization laws.

I am very concerned about the recent surge in vaccine preventable diseases such as measles. In 2018, there were 372 confirmed cases of measles; and already, this year, there have been well over that number with close to 626 individuals confirmed with measles in 22 states. Indeed, Oregon and Southwest Washington have seen one of the largest recent outbreaks of measles in our country. I personally have a friend who was told to seclude herself from public due to her immune compromise and risk of contracting and dying from measles during the most recent outbreak.

Vaccines protect the health of children and adults and save lives, especially those in our community who are most vulnerable. Community-wide vaccination is required for the safety of that vulnerable population. Vaccines prevent life-threatening diseases and certain forms of cancer.

Claims that vaccines are unsafe or may cause autism have been disproven by a robust body of medical literature including a recent Danish [study](#), published in the Annals of Internal Medicine, that shows that “MMR vaccination does not increase the risk for autism, does not trigger autism in susceptible children, and is not associated with clustering of autism cases after vaccination.”

[Data](#) show that just for children born in the United States in 2009, routine childhood immunizations will prevent approximately 42,000 early deaths and 20 million cases of disease with savings of more than \$82 billion in societal costs.

Outbreaks of vaccine-preventable diseases have been linked to communities of unvaccinated and under vaccinated individuals.

We urge you to support House Bill 3063. We are counting on your support to take the necessary action to protect the health and welfare of patients in our state.

Yours truly,
Kyle Haggerty

Medical Student, Oregon Health & Science University

From: [Lance A-lot](#)
To: [JWMHS Exhibits](#)
Subject: Personal testimony for hb 3063
Date: Wednesday, April 24, 2019 8:41:42 AM

My son was vaccinated at one year old. Soon after he began having periodic seizures. They stopped after a few weeks. I didn't relate it at the time.

In August before he started kindergarten he was vaccinated again. Again he had seizure like space outs, began stuttering and began wetting the bed.

At that time I began researching vaccines and realized they strongly go against my religious beliefs. Please vote no on HB 3063

From: [Laura Adams](#)
To: [JWMHS Exhibits](#)
Subject: Vote No HB 3063
Date: Monday, April 22, 2019 3:32:03 PM

Vote no on HB 3063.

Laura Adams
Sherwood, Oregon

From: [laura.bartko](#)
To: [JWMHS Exhibits](#)
Subject: Bill 3063
Date: Tuesday, April 23, 2019 5:57:34 PM

Dear Representatives,

Everyone wants our kids and our community to be healthy and strong. We are all working to make the best decisions we can, but come at our decision making with vastly different information.

The most crucial piece to me in the debate around House Bill 3063 is that vaccine injury is not a rare event. I know the OHA has stated that it's a "one in a million" odd, but there is significant research and lived experiences that would prove it is horribly more common. This generation of children is incredibly unhealthy. They have significant rates of neurological disorders, asthma, tics/seizures, severe life-threatening allergies and other chronic diseases. Expanding the vaccine schedule around 1986 from 16 to 69 childhood vaccines is a significant change that occurred around the time we started to see these conditions increase. Of course correlation is not causation, but as yet a study excluding this causation has never been done.

The pastor at my church, when I talked to her about my concerns about the potential loss of informed consent with this bill, stated "yes informed consent is important, but if a parent wanted to let their child not be in a carseat would that be an ok use of informed consent?" The difference is that **THERE IS A SIGNIFICANT RISK** to this intervention. That would be the equivalent of forcing children into a carseat made of toxic ingredients and exposures. They might be ok... but we need research to prove that the current vaccine schedule is in truth safe. Until that occurs, we cannot mandate for school entry something that may seriously harm some children, especially as we have countless accounts from parents who are convinced that this has occurred to their child.

One of the speakers at today's rally pointed out that even if all 31,000 of Oregon schoolchildren with a medical exemption got fully vaccinated, that would only increase overall immunity in Oregon by 0.7%. Most adults are not up-to-date on their vaccines, or they were not required while they were children. Why should we focus this intervention on our most precious and susceptible children. It is **NOT** worth the loss of patient/parent autonomy and is an incredible breach of our freedoms as citizens of a democracy.

I implore you to vote **NO** on Bill 3063.

Thank you,

Laura Bartko

From: [Laura Castro](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Tuesday, April 23, 2019 7:53:01 AM

Dear Governor Brown,

As a Medical Student at Oregon Health and Science University, I am writing on behalf of medical professionals everywhere, to urge action on non-medical exemptions from state immunization laws. I am very concerned about the recent surge in vaccine preventable diseases such as measles. In 2018, there were 372 confirmed cases of measles; and already, this year, there have been close to 626 individuals confirmed with measles in 22 states. Indeed, Oregon and Southwest Washington have seen one of the largest recent outbreaks of measles in our country.

Vaccines protect the health of children and adults and save lives, especially those in our community who are most vulnerable. They prevent life-threatening diseases and certain forms of cancer. Claims that vaccines are unsafe or may cause autism have been disproven by a robust body of medical literature including a recent Danish [study](#), published in the Annals of Internal Medicine, that shows that "MMR vaccination does not increase the risk for autism, does not trigger autism in susceptible children, and is not associated with clustering of autism cases after vaccination." [Data](#) show that just for children born in the United States in 2009, routine childhood immunizations will prevent approximately 42,000 early deaths and 20 million cases of disease with savings of more than \$82 billion in societal costs. Outbreaks of vaccine-preventable diseases have been linked to communities of unvaccinated and under vaccinated individuals. We urge you to support House Bill 3063. We are counting on your support to take the necessary action to protect the health and welfare of patients in our state.

Yours truly,

Laura Castro

Medical Student, Oregon Health & Science University

April 24, 2018

TO: The Honorable Senator Lee Beyer and Representative Rob Nosse,
Co-Chairs Joint Subcommittee on Human Services,
Ways and Means Committee

FROM: Laurel Murphy Hoffmann, MD MPH , General Pediatrician
Doernbecher Children's Hospital
murphy@ohsu.edu

SUBJECT: HB 3063 A

For the record, I am Laurel Hoffmann, MD MPH. I present this written testimony in support of HB 3063 A. This bill removes the ability of parents to decline required vaccinations against restrictable diseases on behalf of their children for reasons other than a medical diagnosis.

As a pediatrician, I help children grow in healthy communities. Vaccines are safe. They are effective. They save lives. We can prevent disease, cancer, and death with vaccines.

I strongly support HB 3063 A because it protects some of our most vulnerable children. Children with special health care needs are at very high risk of complications from vaccine-preventable illnesses. These children deserve safe schools where they are not at increased risk of encountering dangerous germs. Our state has the opportunity to stand up for healthy children and families and it is time to do so by voting YES on HB 3063 A.

I am happy to be a resource for your Committee and appreciate your time.

Thank you,
Laurel Murphy Hoffmann, MD MPH

Senators & Representatives,

My name is Laurel Jonas, I reside in Beaverton OR. First off, I wanted to say a huge thank you to those who already are opposing this bill! You are doing a fantastic job at protecting our rights and freedoms, it is very much appreciated! Keep up the great work, you will have my votes in the future! YOU are exactly they type of people we need leading this State, my hope is that all legislators, will follow and do the right thing by the people who live here.

Please, I urge you, to uphold the United States Constitution, and vote NO on HB 3063 today. This is a bipartisan issue. For all those who vote for abortion rights, how can you not vote to protect parental rights and support those who have chosen to space out or select which, if any vaccines, they are willing to take the risks with?

Since measles has not and is NOT being spread in schools, and we already have higher then needed vaccine rates in Oregon, this bill is completely unnecessary, and unacceptable!

If this were truly about "public health" then why is the bill only reaching for and attacking school children? Health care committee members who voted yes on this also voted NO to include healthcare workers in this mandate. That double standard goes to show, this is a discriminatory and segregating bill, and you must vote NO and protect a minority group. Those that think this will protect pregnant women and immunocompromised people are wrong. If we kick children out of school, you know they will be spending more time in Dr's offices, stores, kid activity centers like the Zoo, kids museum and OMZI etc. When I am expecting my next child, if my child cannot go to school, when I typically schedule my Dr's visits, she will be by my side, for each and every Dr visit, of which there are dozens for my high risk pregnancies. HB 3063 will not protect anyone, but will harm over 31,000 children.

My journey to motherhood has been a long and utterly painful one. I have lost 6 babies, 3 due to miscarriage and 3 born too early to survive. I will NOT play vaccine roulette with the only living child I was honored and trusted by God to raise to the best of MY abilities. Government has NO rights to mandate such thing on free citizens.

We are not anti-vaccine or anti-science. The scientific studies used to license and approve vaccines are horrible, and lack the gold standard of safety testing. Liability free pharmaceutical products mandated on school children without sufficient safety studies? Allowing this violation of human, civil, religious, and philosophical beliefs and rights must end here and now!! Uphold our constitution, protect our rights, and do the right thing, please.

There ARE real risks with vaccines, this is a fact! Life changing injuries and DEATH, Over 4 BILLION dollars paid out to date, and growing exponentially with every new vaccine mandate.

You cannot accept that homeschooling is an acceptable alternative. More than half of homeschoolers do not graduate. All children are entitled to a public and free education. There are NOT even enough spaces for online homeschooling available to accommodate these children if this bill passes.

I vaccinate my child, selectively. It is my right and my choice! We refuse any vaccine that is made on the backs of aborted fetal tissue. There is no amount of coercion or force that will make us comply. We also do not need sexually transmitted diseases recommended at birth! Or even before high school.

Half the vaccines today were not even recommended when I was a child and are completely unnecessary.

HB 3063 is a disgusting bill for dozens of reasons. It is really easy to see how overreaching and unamerican this is.

Please do not force thousands of children into isolation by letting this bill pass.

Public health is doing fine when it comes to vaccine preventable diseases, this is America, not a 3rd world country. Everyone is recovering fine and no one is dying. Why aren't we seeing more efforts to try and solve REAL health crisis in this state and country? People who feel this bill is necessary, really need to do some serious in depth research, and realize just how awful this is.

Please stand up for these children and families, stand up against liability free vaccine manufacturers, stand up for medical freedom, stand up for parental choice, stand up for education equality, stand up for minorities, stand up for informed consent, stand up for patient/Dr relationships, stand up and be brave, this is what you were voted into office to do! Please vote and protect the PEOPLE and not corporate interests. I don't care if OHA, or ONA, the education board, or any other association or corporation, donated handsomely to your campaign, you represent your constituents, and we say NO vaccine mandates, not today, not ever, NO HB 3063.

Thank you.

Laurel Jonas
Beaverton Oregon

From: [Lauren C](#)
To: [JWMHS Exhibits](#)
Subject: Vaccination
Date: Tuesday, April 23, 2019 8:48:09 AM

Hi. I'm writing to tell you that mandatory vaccinations are a bad idea. People are afraid that outbreak can occur. This is a legitimate fear. But Vaccinations are defined by Germ Theory. The CDC only knows Germ Theory, and ignores its rival/partner, Terrain Theory. You cannot combat disease without looking at both of these theories. If you look at these topics, you will see that Terrain Theory is important and pertains to diet. To properly insure outbreak doesn't happen, you have to make sure the populations internal environment is not suitable for deadly disease. This can be easily won by cracking down on the FDA, and making all food organic and non-processed. Mandatory organic non-processed foods. This will take a long time to do. But mandating vaccination for the meantime, will corrupt the internal systems of the public and lead to more favorable diseases. Diseased will mutate and they will last longer if people are vaccinated. Choice should maintain open for people who want to maintain health and potentially help us merge the gap of allopathic and naturopathic medicine. If our system is too unbalanced, leaning towards allopathic, it will collapse upon itself. This is basics. I think its time to give in. Some people who do not vaccinate, wish vaccination upon others. These people are fooling themselves. Health is an environment. Just as everyone gets sick during the wintertime due to lack of Vit D , causing low immune systems, and diseases to jump from one to another... These people who do not vaccinate, will end up catching deadly diseases due to everyone having them from their bodies weakened by vaccination. We are at a point where we are able to stay healthy without vaccination. We can go in two directions: Force vaccinate public + keep food system faulty = more disease and death of everyone(even ones who push agenda) Keep vaccinations an option + strict regulation of food supply = Let it work itself out. Our over production of food, has lead to an increased population. Why would you let these same people, regulate the population again? Is this not the definition of insanity? Do the right thing, win or lose. Let go. It will happen naturally. Do not make it worse by extra force. Thank you.

Sent from [Mail](#) for Windows 10

From: [Lauren Hartmann](#)
To: [JWMHS Exhibits](#)
Subject: No on HB3063
Date: Tuesday, April 23, 2019 7:19:24 PM

Dear HB3063 Legislators,

I have called the great state of Oregon home since I was six years old and it is a home I love dearly. But, HB3063 feels like an affront to all that I love about my state. It is closed-minded, short-sighted and downright discriminatory against the most vulnerable in our state: children.

Those of us who make the choice to follow an alternative vaccine plan do not do so with carelessness. It is a difficult path to choose. To name just a few challenges, it requires us to be more aware of our children's health in order to keep them and others around them healthy. It requires us to be willing to sacrifice the time to keep them home from school for 21 days if an outbreak of a disease occurs at their school. It opens us to the vitriol of others who call us anti-vax and anti-science (those are the more mild terms they use) when we question the idea of a liability-free product being mandated on our children. I could go on, but I just want to make it clear that this is not the easy choice, but it is worth it for us .

Vaccines are not a one-size-fits-all product and I urge you to please vote on segregation in our schools. No on HB3063.


Thank you for your time.

Sincerely,

Lauren Hartmann

From: [Laurie Nuske](#)
To: [JWMHS Exhibits](#)
Subject: Oppose HB 3063
Date: Monday, April 22, 2019 12:06:14 PM

HB 3063 is being pushed by legislators who claim there is a public health emergency, where there is in fact none. Vaccination rates in Oregon have remained constant for over 20 years. [CDC, Check YOUR Data: MMR Vaccination Rates are NOT Declining • Children's Health Defense](#)



CDC, Check YOUR Data: MMR Vaccination Rates are NOT Declining • Children's Health Defense

There's a narrative being spread that the vaccination rate for the MMR vaccine has fallen lately due to irresponsible parents, but the CDC's numbers, clearly show that the rate has held steady for more than 20 years.

Vaccines are inherently risky. \$4 billion has been paid out to victims of vaccine injury and deaths in the past 30 years by the US Government.

<https://www.hrsa.gov/vaccine-compensation/data/index.html>

In 2010 the Supreme Court ruled that, “vaccines are unavoidably unsafe.” Where there is risk there must be choice.

<https://www.supremecourt.gov/opinions/10pdf/09-152.pdf>.

Any child who has symptoms of illness may not attend school. If there is an outbreak of a communicable disease, unvaccinated children are already required to stay home for 21 days. This bill is not about a public health emergency. It is about governmental control and the influence of the pharmaceutical industry on public policy, which spent \$200 million in lobbying in 2018.

<https://www.cnn.com/2019/01/23/health/pharma-lobbying-costs-bn/index.html>

Unvaccinated children do not pose a risk to vaccinated students. All current measles outbreaks have been traced to International travelers. If the Oregon Legislation is concerned with protecting the children of Oregon, they would implement a system to safeguard against International travelers with fever and illness. HB 3063 is completely devoid of protective measures to prevent future outbreaks.

"US measles outbreaks are linked to travelers who brought measles back from other countries

such as Israel and Ukraine, where large measles outbreaks are occurring."
<https://www.cdc.gov/measles/cases-outbreaks.html>

The AMA has revised and updated their Code of Ethics. However, the provision recognizing a doctor's right to decline immunizations based on non-medical reasons exists unchanged and has been renumbered Opinion No. 8.7 in the AMA code of Ethics.

Medical Doctors give themselves the right to retain non-medical exemptions, while others rights stand to be removed. Teachers and Childcare workers retain the right to religious and philosophical exemptions, too.

<https://www.ama-assn.org/delivering-care/ethics/code-medical-ethics-physicians-health-community>

Dear **Kate Brown**,

As a Medical Student at Oregon Health and Science University, I am writing on behalf of medical professionals everywhere, to urge action on non-medical exemptions from state immunization laws.

I am very concerned about the recent surge in vaccine preventable diseases such as measles. In 2018, there were 372 confirmed cases of measles; and already, this year, there have been close to 626 individuals confirmed with measles in 22 states. Indeed, Oregon and Southwest Washington have seen one of the largest recent outbreaks of measles in our country.

Vaccines protect the health of children and adults and save lives, especially those in our community who are most vulnerable. They prevent life-threatening diseases and certain forms of cancer.

Claims that vaccines are unsafe or may cause autism have been disproven by a robust body of medical literature including a recent Danish [study](#), published in the Annals of Internal Medicine, that shows that “MMR vaccination does not increase the risk for autism, does not trigger autism in susceptible children, and is not associated with clustering of autism cases after vaccination.”

[Data](#) show that just for children born in the United States in 2009, routine childhood immunizations will prevent approximately 42,000 early deaths and 20 million cases of disease with savings of more than \$82 billion in societal costs.

Outbreaks of vaccine-preventable diseases have been linked to communities of unvaccinated and under vaccinated individuals.

We urge you to support House Bill 3063. We are counting on your support to take the necessary action to protect the health and welfare of patients in our state.

Yours truly,
Lavinia Turian

Medical Student, Oregon Health & Science University

DO YOU KNOW WHAT'S IN A VACCINE?

NONE OF THESE SHOULD BE INJECTED INTO YOUR BODY

Aluminum

Known to cause brain damage at all doses, linked to ALZHEIMER'S DISEASE, dementia, seizures, autoimmune issues, SIDs and cancer. This toxin accumulates in the brain and causes more damage with each dose.

Beta-Propiolactone

Known to cause CANCER. Suspected gastrointestinal, liver, nerve and respiratory, skin and sense organ POISON.

Gentamicin Sulphate & Polymyxin B [antibiotics]

ALLERGIC reactions can range from mild to life-threatening.

Genetically Modified Yeast, Animal, Bacterial and Viral DNA

Can be incorporated into the recipient's DNA and cause unknown GENETIC MUTATIONS.

Glutaraldehyde

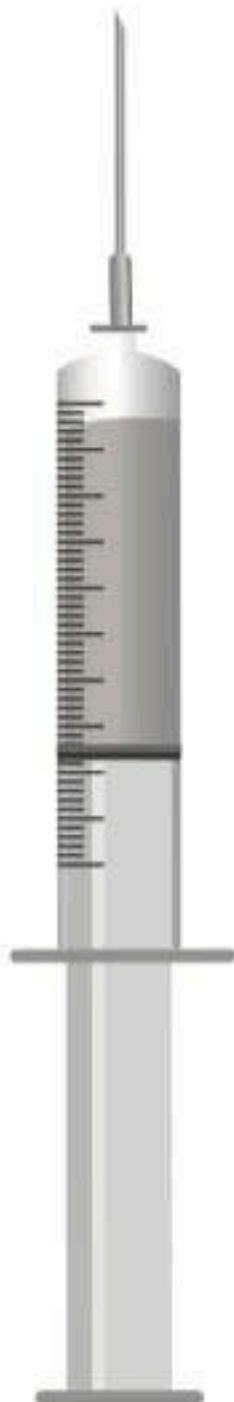
Poisonous if ingested. Causes BIRTH DEFECTS in animals.

Formaldehyde [formalin]

Known to cause CANCER in humans. Probable gastrointestinal, liver, respiratory, immune, nerve and reproductive system POISON. Banned from injectables in most European countries.

Latex Rubber

Can cause life-threatening allergic reactions.



Human and Animal Cells

Human DNA from aborted BABIES. Pig blood, horse blood, rabbit brains, dog kidneys, cow hearts, monkey kidneys, chick embryos, calf serum, sheep blood & more. Linked to childhood leukemia and diabetes.

Mercury [thimerosal]

One of the most toxic substances known. Even if a thermometer breaks, the building is cleared and HAZMAT is called. Tiny doses cause damage to the brain, gut, liver, bone marrow, nervous system and/or kidneys. Linked to autoimmune disorders, and neurological disorders like AUTISM.

Monosodium Glutamate [MSG]

A toxic chemical that is linked to birth defects, developmental delays and infertility. Banned in Europe.

Neomycin Sulphate [antibiotic]

Interferes with vitamin B6 absorption which can lead to epilepsy and brain damage. Allergic reactions can range from mild to life-threatening.

Phenol/Phenoxyethanol [2-PE]

Used as anti-freeze. TOXIC to all cells and capable of destroying the immune system.

Polysorbate 80 & 20

Known to cause CANCER in animals and linked to numerous autoimmune issues and infertility.

Tri(n) Butylphosphate

Potentially toxic to the kidney and nervous system.

From: [LeeAnn Congdon](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Tuesday, April 23, 2019 7:18:36 PM

Hello,

You are in the position to protect freedom and the constitution by voting NO on HB 3063 and I urge you to do the right thing and vote for freedom.

There are so many disturbing things about HB 3063, but for the sake of time, I will just remind you how unethical and unconstitutional this bill is. Are you prepared to get all these vaccines being mandated yourselves? Are you prepared for your own kids to get them? Nobody should ever ask someone to do something they are not willing to do themselves so I urge you to think very hard about how this will effect your families.

I will end by quickly telling you about my youngest child. She has life threatening food allergies. Her doctor has written a letter stating that it is not safe for her to have anymore vaccines, but that is not enough for her to have a medical exemption. This bill would not protect my daughter and it would not protect thousands of other kids. You have the lives of thousands of kids in your hands. Please be thinking about that as you vote.

Thank you for your time and consideration,

LeeAnn Congdon

From: [Lesli Lucier](#)
To: [JWMHS Exhibits](#)
Subject: OPPOSE HB3063
Date: Tuesday, April 23, 2019 8:42:57 PM

Greetings Members of the Joint Subcommittee on Human Services,

My name is Lesli, I am a concerned mother of four from McMinnville, OR. Please oppose HB3063. Vaccine manufacturers are not liable for injuries caused by the product they make. Where there is risk, there must be choice.

Not only is this bill a far overreach from our government, the fiscal impact of this bill could be detrimental to our beloved state. It may not be immediate but with the potential of over 31,500 students being removed from all schools and daycares across the state, schools will lose funding and/or close, teachers will lose jobs, and taxes paid to the state will lessen due to people quitting their jobs and moving out of the state. The passage of HB3063 would not be a small impact. Please oppose and stop this bill.

"What country can preserve its liberties if their rulers are not warned from time to time that their people preserve the spirit of resistance?" - Thomas Jefferson

Thank you for your time. Please oppose HB3063.

Respectfully,
Lesli Lucier
McMinnville, OR

From: [Lia Pearson](#)
To: [JWMHS Exhibits](#)
Subject: hb3063
Date: Wednesday, April 24, 2019 12:10:37 PM

My name is Lia Pearson and I am a resident of Salem and a mom of 5 children. I am in opposition of HB3063 and I am begging you to consider the consequences of such a bill:

- ALL children should have the right to an education in Oregon regardless of their private medical decisions. **My son, who is a freshman at our local high school, would no longer be allowed to attend his school if HB3063 were to pass.** He is an honor roll student who is very involved in the orchestra and choir and loves his school. Even at this well respected highschool (with over a 96% vaccination rate) there are still drug dealers, bullies, harassers, students who smoke or drink on school grounds...not to mention all of the sick kids who come to school passing around the flu, strep throat, mono, etc. All of these students would still be allowed at this school but my healthy, respectful, conscientious son would be stripped of his rights to attend simply for refusing even one vaccine. He is currently 15, the age of medical consent in Oregon, and for ethical and medical reasons he opts out of some vaccines...he should not be punished for the informed decisions made between himself and his doctor. His body, his choice!

- Removing religious exemptions would directly contradict our own constitution. **The Oregon constitution article 1 section 3 states "No law shall in any case whatever control the free exercise, and enjoyment of religious [sic] opinions, or interfere with the rights of conscience.—"**

- In many many cases this bill will FORCE vaccinations or FORCE parents to quit their jobs with the only two options being to fully vaccinate or homeschool.

- Medical exemptions are very difficult to obtain in Oregon, even for children who should have them per CDC recommendations. My 13 year old has an autoimmune disease and my 9 year old has a seizure disorder...neither should be vaccinated according to their doctor as well as CDC recommendations. They STILL do not qualify for medical exemptions here in Oregon. **The new amendments will not improve this and will actually make it even MORE difficult. Doctors will also feel pressured by oversight committees to not give "too many" medical exemptions or risk investigation or even losing their license.**

In conclusion, I would like to remind you that vaccination rates remain high in Oregon and there are no outbreaks of measles within schools. There is no emergency. You have time to think this through and do what is right for the children of Oregon.

thank you for your time,
Lia Pearson

From: [Linda Larkin](#)
To: [JWMHS Exhibits](#)
Subject: HB3063
Date: Tuesday, April 23, 2019 8:32:40 PM

This is regarding HB3063

I oppose this bill for so many reasons.

It is not needed, the measles is not a dangerous illness and once a child has had it they are immune for life.

Shame on this country where we brag about our freedom but it's ok to Force people to get vaccinated!

Do NOT pass this Bill!

I am from Bend, Oregon

Linda LARKIN

Linda.Larkin@hotmail.com

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From: [Lindea Kirschner](#)
To: [JWMHS Exhibits](#)
Subject: Testimony against HB 3063
Date: Tuesday, April 23, 2019 7:47:36 PM

Vote NO on HB 3063!

Oregon is AT herd immunity with 95% vaccinated for measles. There is no justification for stripping us of our religious, parental and medical freedom rights. Parents will not vaccinate; they will their kids out of school and either leave the state or continue fighting in Oregon. If passed, you can expect the vaccine issue to continue to consume your time. It will also make a huge financial impact on Oregon schools.

Lindea Kirschner
Ashland, Oregon

From: rabournlindsay@gmail.com
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Tuesday, April 23, 2019 8:49:11 PM

My name is Lindsay Rabourn. I live in House District 22 and Senate District 11. I am opposed to HB 3063 on many levels but I want to focus on my opposition as an educator. Having spent most of my 6 years in education working with the most vulnerable populations (special needs, homeless and expelled students) I am concerned about the outcome for ALL Oregon students but especially for those I have worked with. Sometimes for these vulnerable students, school is their only safe space, the only place they feel encouraged or hopeful. School may provide their only meal(s) for the day. Finally, it may be the only place where they will get the specialized education they require to succeed and they will not get the same opportunities in an online setting or homeschool. There are far simpler, far less damaging ways to improve vaccination rates. I urge you, please, don't support this bill.

Sent from my iPhone

From: [Lisa Capicchioni](#)
To: [JWMHS Exhibits](#)
Subject: Bill 3063
Date: Monday, April 22, 2019 11:13:26 PM

Hi! Just to let you know, I will NEVER EVER vaccinate my kids-just do an hour of research and your eyes will be opened as to why vaccinations are potentially not safe, and not needed anymore in this society. Measles is a benign disease like chicken pox to 99.9 % of people. Its better to have lifelong immunity and pass this immunity to your babies (up to 1-2 years) then to vaccinate and not pass on the natural immunity- It's true!! We are creating a population of people who won't get the measles naturally, will potentially get it as older people when the vaccine wears off or if you are one of the 20% where the vaccine doesn't work on you- and creating a population where the babies will not be protected from the mother's natural immunity. With proper hygiene, great sanitation, amazing nutrition in this country now, Measles just is not a problem how it used to be. Same goes for the rest of the diseases. Other diseases we don't have vaccinations for have gone away too. So the risk of the potential harmfulness of vaccines is way higher than the risk of getting the disease or dying. There are thousands of Mothers who know their kids to the core- and know that their child was harmed by a vaccine. Vaccine companies can't be held liable and the special fund created by tax payers have already paid out millions to vaccine-injured kids. The government used to say Smoking was Healthy!!! It took many Doctors and Scientists who risked credibility and careers to speak up against the the potential risks of smoking- and look where we are now. These doctors and scientist speaking out against vaccines have a lot to lose and nothing to gain except helping the health of our population. Please don't pass a bill that will force my kids to stay out of public school. Everything is Ok, there is no emergency and no widespread diseases happening to need to force this on us. Thank you- Lisa Cap

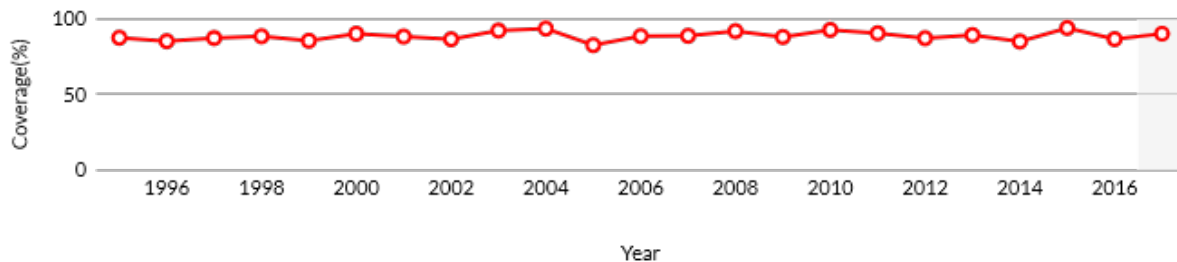
Dear Ways and Means Committee Members,

I am a parent that would be directly impacted by HB 3063. I am an Oregonian, a voter and a mother who is passionate about protecting the health of my family and the children of my community.

Protecting the health of Oregon children is a worthy goal that I share with this committee; however this bill will not accomplish this goal.

First of all we are not in an emergency situation. According to CDC data, the rates of measles vaccination have remained consistent over the past 23 years.

Measles, mumps, and rubella (MMR) vaccination coverage among children 19-35 months by state: Oregon



Source: <https://www.cdc.gov/vaccines/imz-managers/coverage/childvaxview/data-reports/mmr/trend/index.html>

Vaccination rates for other diseases are similar. The unvaccinated rate that you see reported include children that may be missing only ONE vaccine. That vaccine may be Hepatitis A (a disease spread by sexual contact and shared needles) or tetanus (a disease that is not contagious). The parents may be following a delayed schedule, but if they are late for even ONE vaccine they will be considered “unvaccinated”.

Health care decisions need to be made by the parents with the help of the child’s doctor. There is no one-size-fits-all when it comes to health. Children whose parents choose to vaccinate on a delayed schedule or skip one vaccine still deserve a public education. These children are not a threat to the health of other children.

I received all the recommended vaccines when I was a child (about 6 in total). That was a small fraction of the number of vaccines children are required to have these days, with more vaccines are being added to the schedule. We were not in a state of emergency over vaccine rates in the 1970 & early 1980s when children received far fewer vaccines. If they choose, parents should be able to follow the schedule that worked in their own childhood.

Proponents of HB 3063 suggest that removing exemptions will increase vaccine rates, it will not. This has been studied by vaccine proponents who concluded that mandates do not encourage vaccination; they push children out of school (J.Public Health Policy 2018 39:156, Helps et al.). The study also

showed that mandates motivated parents into activism. Parents who have chosen not to vaccinate (or delay or partially vaccinate) have done so for reasons which will not go away. There are over 31,000 students with vaccine exemptions currently in Oregon; if a child is missing even ONE vaccine from the CDC schedule, they will be excluded from school. This means that if this bill passes there will be thousands of healthy children kicked out of school.

Therefore, parents will have no choice but homeschool, leave the state or leave the country. Homeschooling is a wonderful option for those who choose it, but it is a big commitment. I know because I have been homeschooling my son for the last year and a half. Homeschooling was a good option for us at first, but my son is now ready to return to school. The 31,000 families affected by this bill are not homeschoolers; these are families who feel that school is the best option for their children. Homeschooling should always be an option, but it should never be coerced.

There is no reason to restrict the rights of parents to choose the health decisions that best fit their family. Oregon already has a vaccination rate of 94-95% for the 7 vaccines surveyed by the CDC. The existing philosophical and religious exemption has not decreased rates and must be left intact.
<https://www.cdc.gov/mmwr/volumes/66/wr/mm6640a3.htm>

Vaccines do not come without risks. We parents have to weigh the risks and benefits of any medical treatment our child receives and make an informed choice ourselves. As recognized by the U.S. Supreme Court – and evidenced by the \$4 billion that has been paid by the federal government to victims – vaccines can injure and kill an individual. Vaccine package inserts warn of the risk of brain damage, life-threatening allergy, and death. No one knows in advance whom a vaccine will harm. Vaccine ingredients vary, but may contain a variety of toxic ingredients including but not limited to; mercury, aluminum, formaldehyde, cells from fetuses, cells from monkey kidneys, chicken egg proteins, gelatin, and viruses. http://www.vaccinesafety.edu/package_inserts.htm

The idea that unvaccinated individuals pose a health risk to others is unsupported in the medical literature. In fact, vaccinated individuals can pose greater risk to public health due to a process known as shedding. Scientific evidence demonstrates that individuals vaccinated with live virus vaccines such as MMR (measles, mumps and rubella), rotavirus, chicken pox, shingles and influenza can shed the virus for many weeks or months afterwards. <https://www.westonaprice.org/studies-show-that-vaccinated-individuals-spread-disease/>

Personal and religious freedoms must be protected. Forcing parents to choose between education and vaccinating their children with numerous vaccines is simply wrong. This legislation discriminates against families with sincere philosophical or religious beliefs opposing the administration of one or more vaccines to their children.

From a financial consideration I am disappointed to see only the direct cost to the State considered, because most of the costs are outsourced to parents. Parents who have to rearrange their lives and workload to homeschool, parents who have to pay for tutors if online schooling is not enough, parents who have to take care of vaccine injured children.

There are many other unintended consequences to HB 3036. I urge you to consider all of the ramifications before you make your decision. You can be in favor of vaccination and still recognize that this bill will not increase vaccine rates.

I am very passionate about this issue. I urge you to vote NO on HB 3063 and any amendments. Preserve our right to make health care decisions.

Sincerely,

Lisa Davis

From: [Lisa lindman](#)
To: [JWMHS Exhibits](#)
Subject: Testimony
Date: Monday, April 22, 2019 9:43:23 AM

To Whom it May Concern,

Thank you in advance for taking the time to read my testimony. My job is to protect my children as best as possible. I come from a family with a history of multiple vaccine injuries. It has been recommended by my children's doctors that they avoid vaccines for they are at high risk for permanent injury. With a combination of healthy diet and vitamins, both of our children maintain a strong immune system. When viruses are going around, they usually don't get sick. Sometimes they get the sniffles and & quickly recover.

HB 3063 would strip away our parental rights & put our children at risk. Instead of enforcing vaccinations, we should educate our citizens on how to naturally boost their immune systems. It's quite easy, affordable, and safe. We love Oregon and would love to stay here but I will never put my children at risk for injury. Please don't pass this bill.

All my best,

Lisa Lindman

From: [Lisa Nichols](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063 testimony
Date: Tuesday, April 23, 2019 8:28:12 PM

Greetings,
I'm writing to express my grave concern over HB 3063.

Oregonian children are vaccinated at a rate of 95%; we have good herd immunity. Although the media and the pharmaceutical industry have dramatized this topic, we are not in a medical emergency.

To deny individuals' religious freedom is absolutely wrong. Please do not act to strip our Amish, Christian Scientist and pro-life Oregonians of their medical autonomy. It would be a tragic turn to have people leaving this great country in search of religious freedom.

To discriminate against children based on their parents' medical decisions is unconstitutional. Our children have a right to a Fair and Appropriate Public Education. Please do not strip our children of their rights.

Most of the parents I know that seek exemptions for their children are simply opting out of one or two vaccines, due to lack of possible exposure (such as to Hepatitis B and HPV). Neither of these diseases are communicable in a school setting. Both of these vaccines contain high amounts aluminum.

Although the pharmaceutical industry would like us to believe that there are never any side effects to vaccines, that is simply untrue. From July, 2006 to February 2007, 385 cases of severe reactions to the HPV vaccine were reported to the the Vaccine Adverse Event Recording System (VAERS). According to a Harvard Medical School study, VAERS only captures 1% of adverse events.

Thank you in advance for your consideration.

Sincerely,
Lisa Nichols
Ashland OR

From: [Stefanie P](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Tuesday, April 23, 2019 8:30:19 PM

NO on HB 3063!
NO segregation, no Coercion!

Stefanie
Oregon Resident!

From: [Lisa Scott](#)
To: [JWMHS Exhibits](#)
Subject: no on 3063
Date: Wednesday, April 24, 2019 6:59:53 PM

Are the legislators listening to their constituents, or are they trying to push through their own political agenda? A well contained measles outbreak has been used to push forward a political agenda on the people.

There has been a great outpouring of Oregonians asking for freedoms to be protected, but some of the legislators do not seem to be listening to anyone other than themselves. People have the right to make personal, interventional medical decisions for themselves, and not be bullied into making a decision using school as a leverage tool.

There is NO EMERGENCY that has necessitated this bill. Everyone knows by now that measles can be spread by recently vaccinated persons and also outbreaks have occurred in vaccinated people. Everyone keeps blaming a very small subset of people who have made their own medical choice, which is their RIGHT. Measles outbreaks will continue to occur as vaccines are not perfect, and some people do not gain immunity from them. The agenda to reach 100% vaccination is flawed and will not accomplish a disease free society. The people who do not wish to receive this vaccine have made the choice that the risks outweigh the benefits, which is called "informed medical consent" (or non-consent).

Vaccine injectables have neurotoxic aluminum, cancer causing formaldehyde and foreign animal viruses among other things. Brain damage, encephalitis and death are possible adverse events to this vaccine. Some vaccines are made from aborted fetal cells, which violates the religious conscience, and freedom of religion is protected in this country.

Oregon has long stood for personal freedoms of all kinds. Forcing a loss of this personal freedom will set a frightening precedent of strong arm government and pushing political agendas against the people's will.

Please use your powers as a legislator to preserve democracy. Mandates for a medically dangerous intervention, such as vaccinations, should NEVER be instituted.

Thank you,

Lisa Scott

Dear Committee Member,

As the parent of a teenage daughter who will not be able to graduate from high school if HB3063 passes, I would like to remind you of a few facts relevant to your vote on this legislation.

1) HB3063 is unconstitutional in Oregon. From our state's Bill of Rights...

Section 3. Freedom of religious opinion. No law shall in any case whatever control the free exercise, and enjoyment of religious [sic] opinions, or interfere with the rights of conscience.

Section 20. Equality of privileges and immunities of citizens. No law shall be passed granting to any citizen or class of citizens privileges, or immunities, which, upon the same terms, shall not equally belong to all citizens.

2) The U.S. Supreme Court decision used to justify vaccine mandates -- Jacobson vs. Massachusetts -- upheld a state law mandating that adults receive one smallpox vaccine in the midst of an epidemic or pay a fine.

- This is NOT 1905... medicine has advanced a long way since then in its ability to treat infections. And hygiene and public sanitation, which allowed contagious diseases to spread aggressively, is also far better than in 1905.
- This is NOT smallpox... it's measles and other diseases that used to be a normal part of growing up.
- This is NOT an epidemic... it's 8 cases of measles in a population of over 4,000,000.
- This is NOT a fine and it's NOT about adults... it is the forced injection of pharmaceutical drugs into a young child.
- And this is NOT just one vaccine... it's 40 doses of 11 vaccines in Oregon, and up to 73 in other states. (see attached chart)

3) Every family I know who is involved in the fight against this heinous bill will NOT comply. We will never subject our children to this dangerous pharma game of Russian Roulette. We will homeschool our children, or we will move our family to a state that's not run by tyrannical legislators.

VOTE NO on HB3063 and someday soon, when RFK Jr. and his team of lawyers gets done hammering the corrupt vaccine industry with lawsuits, as he has been doing to Monsanto, you will find yourself on the right side of history!

Sincerely,

Liz Schmidt
Ashland, OR

DOSES of VACCINES from BIRTH to 18 YEARS

1960

TOTAL = 5

(3 injections)

Polio
Smallpox
DTP

1983

TOTAL = 24

(11 injections)

DTP (2 months)
OPV (2 months)
DTP (4 months)
OPV (4 months)
DTP (6 months)
MMR (15 months)
DTP (18 months)
OPV (18 months)
DTP (4 years)
OPV (4 years)
Td (15 years)

OR 2019

TOTAL = 40

(24 injections)

Hep B (birth)
Hep B (2-3 months)
DTaP (2-3 months)
HIB (2-3 months)
IPV (2-3 months)
DTaP (4-5 months)
HIB (4-15 months)
IPV (4-15 months)
Hep B (4 mo -kindergarten)
DTaP (6-15 months)
HIB (18 months)
IPV (18 months)
HIB (18 months)
MMR (15 mo - kindergarten)
Varicella (18 months)
Hep A (18 months)
DTaP (18 months)
Hep B (18 mo - kindergarten)
Hep A (kindergarten)
DTaP (kindergarten)
IPV (kindergarten)
MMR (kindergarten)
Varicella (kindergarten)
TdaP (grade 7-10)

Measles (college)
Meningococcal (some colleges)

CDC 2019

TOTAL = 73

(55 injections)

Influenza (pregnancy)
DTaP (pregnancy)
Hep B (birth)
Hep B (2 months)
Rotavirus (2 months)
DTaP (2 months)
HIB (2 months)
PCV (2 months)
IPV (2 months)
Rotavirus (4 months)
DTaP (4 months)
HIB (4 months)
PCV (4 months)
IPV (4 months)
Hep B (6 months)
Rotavirus (6 months)
DTaP (6 months)
HIB (6 months)
PCV (6 months)
IPV (6 months)
Influenza (6 months)
Hib (12 months)
PCV (12 months)
MMR (12 months)
Varicella (12 months)
Hep A (12 months)
DTaP (18 months)
Influenza (18 months)
Hep A (18 months)
Influenza (30 months)
Influenza (42 months)
DTaP (4 years)
IPV (4 years)
MMR (4 years)
Varicella (4 years)
Influenza (5 years)
Influenza (6 years)
Influenza (7 years)
Influenza (8 years)
Influenza (9 years)
HPV (9 years)
Influenza (10 years)
HPV (10 years)
Influenza (11 years)
HPV (11 years)
TdaP (12 years)
Influenza (12 years)
Meningococcal (12 years)
Influenza (13 years)
Influenza (14 years)
Influenza (15 years)
Influenza (16 years)
Meningococcal (16 years)
Influenza (17 years)
Influenza (18 years)

SOURCES: www.cdc.gov & www.oregon.gov

ABBREVIATIONS

DTaP: Diphtheria, Tetanus, Acellular Pertussis
DTP: Diphtheria, Tetanus, Pertussis (whole cell)
Hep A: Hepatitis A
Hep B: Hepatitis B
HIB: Haemophilus Influenzae type B
HPV: Human Papilloma Virus
IPV: Inactivated Polio Vaccine
MMR: Measles, Mumps, Rubella
OPV: Oral Polio Vaccine
PCV: Pneumococcal Conjugate Vaccine
Td: Tetanus, Diphtheria
TdaP: Tetanus, Diphtheria, and Pertussis
Varicella: Chicken Pox

In 1986, pharmaceutical manufacturers producing vaccines were freed from liability resulting from vaccine injury or death by the Childhood Vaccine Injury Act. Since then, over \$4 BILLION has been paid out by the U.S. National Vaccine Injury Compensation Program (aka Vaccine Court) for injuries and deaths caused by vaccines.

As an educator of nearly 30 years, I can't imagine many things more important than getting the children of our state educated. With a graduation rating of 49th out of 50 states, now is a poor time to "kick kids out of school."

A-18

Section 3

It doesn't appear according to this amendment, that medical exemptions will be any easier to get. Currently medical exemptions have to be approved, and only include .1% of students. The additional review by the various boards will simply increase the amount of bureaucracy, and not accomplish any good purpose.

Section 4 Line 18

I thought this bill was intended to make our schools safer. What exactly is the intention of finding out the immunization of homeschool children?

Section 4 Line 28

Schools personnel already have plenty of work load. Needing to submit information every two weeks is simply excessive.

A-50

Our schools are always short of money. I would suggest that you give them the \$100,000.

I know there are several other amendments recently posted, but due to time, I am unable to comment on them. I hope that you will carefully weigh each amendment and do what is right.

Lois Patterson

From: [London Lunoux](#)
To: [Sen Beyer](#); [Rep Nosse](#); [Sen Heard](#); [Sen Wagner](#); [Rep Hayden](#); [Rep Salinas](#); [Rep Schouten](#); [Rep Stark](#); [JWMHS Exhibits](#)
Subject: No on HB3063
Date: Monday, April 22, 2019 2:20:50 PM

As a native Oregonian I was highly disappointed by the proposal of HB3063 which removes the rights of parents to make informed choices about vaccines with their doctor without governmental interference. Now that I see an amendment has been added to track the vaccine status of homeschoolers as well (which would be the only option left for a child missing even one dose of one vaccine) I am absolutely disgusted and fed up. Oregon law makers need to stop interfering in the lives of Oregonians and stop over reaching in grabs of power and control. There is absolutely no excuse for an amendment like this. Leave the homeschoolers alone. Please vote no on this bill as it has spiraled out of control and gone too far. We have no emergency or reason for this bill and the segregation and problems and financial burden it will cause. Law makers should be focusing on the homeless drug problems and the foster care crisis. Please vote no on this bill which has become a grotesque over reach of government into Oregonians lives. This is not what Oregon is.

London Hannigan
SE Portland OR

I, Lori Barker, BSN, RN oppose Mandatory Vaccination Bill HB 3063.

First, I have a gene mutation that passes onto my biological children putting them at risk of being unable to remove large doses of toxins from their bodies. The current CDC schedule would give my children heavy metal poisoning and toxicity, which causes disorders such as autism, ADHD, autoimmune diseases, multiple sclerosis, fibromyalgia, heart disease, addiction, and miscarriages. Forty percent of individuals have this same mutation as I do, putting them at risk for heavy metal poisoning and toxicity too. The mandatory vaccination bill takes away the parents' rights to protect their children from adverse reactions cause by the child's genetic predispositions.

Second, I am a foster parent. It took two and a half years to get all of our foster child's (now our adopted child) medical records to even know how many vaccines she had received. Insurances do not cover titers to check a child's immunity and therefore, foster parents are forced to reject additional toxins into these children in order to be in compliance with the state school vaccine requirements. Many of our foster children in Oregon come from drug backgrounds. Their brains have already been overloaded with toxins and the government wants to mandate additional toxins in the form of vaccinations. The mandatory vaccination bill fails to protect our most vulnerable population, foster children, by focusing unnecessary repeat vaccines due to a failure of acquiring updated medical records and removing a foster parent's right to sign vaccine exception forms until accurate updated medical records can be provided.

Last, as an American citizen it is my first amendment right to religious freedom. Schools fall under the protection of our first amendment right and therefore, no law can be made that prohibits our rights to exercise our chosen religion openly without government interference. Just as a student can wear their religious clothing and symbols my children have the right to refuse medical care that goes against their religion. The adoption of US Department of Education Guidelines on Religious Expression in Public Schools in 1995 states that schools may not forbid students acting on their own from expressing their personal religious beliefs and schools may not discriminate against private religious expression by students. The mandatory vaccination bill discriminates against religious followers and infringes on our first amendment right.

I, Lori Barker, BSN, RN, oppose Mandatory Vaccination Bill HB 3063.

Lori Jean Barker, BSN, RN

1647 SE 62nd Ave Hillsboro, OR 97123

Oregon Registered Voter

From: [Lori Burr](#)
To: [JWMHS Exhibits](#)
Subject: Democrats against HB 3063
Date: Tuesday, April 23, 2019 8:44:57 PM

This could increase vaccination rates by less than 1 percent?!
Is it truly worth the risk? Who in the state has died from this measles media firestorm?

Why not listen to the facts on both sides?

Do you care about people with the MTHFR gene and what vaccines can do to them?
What about other genetics and the impact?
There needs to be more research, better studies and better vaccines.

Look deep into the questioning and answers of what this bill could actually accomplish.
Do we want Oregon to have an even higher infant mortality rate? Or autism rate? That is the real epidemic that is being ignored. Who among those voting in favor of this receive funding and donations from Merck? or pharma companies?

This bill cannot possibly be for the good.

Please, do not ignore recent scientific studies and information.
Ask yourselves, why would some of these parents choose such a hard route.
Listen to them, it is the least you can do.

May God be with us all,
Lori

Lori Leigh Burr
503-709-9349

From: [Lori Shelton](#)
To: [JWMHS Exhibits](#)
Subject: HB3063 Testimony
Date: Wednesday, April 24, 2019 8:09:14 AM

Dear Ways and Means Committee:

My name is Lori Leedy. I am a Kindergarten teacher in a public school, and a vaccinating mother: I oppose bill HB3063.

As a mother, I believe with every ounce of my being that I should be able to choose how my child is educated, how my child is medicated, and how my child is raised. No one is more important to me than my children, and I want to keep them safe and healthy in the best way that I know. I am an educated, vaccinating mother, yet I oppose bill HB3063.

I agree that we need to advance public health; however, I do not believe forced medicine, abolishing medical freedom, discriminating against children, nor excluding children from school and activities based on their parents' decisions is the morally correct way to grow a healthier public body. While one is coercing parents to medicate their child for proposed physical health, they are damaging the mental health of both parents and children. I am concerned about public health, yet I oppose bill HB3063.

I have the best job; I get to teach children every day and provide opportunities for them to use their minds well, be curious about the world, and to search for answers in a variety of ways and then make informed decisions. This bill is the opposite of what we are teaching our youth to do. I believe in research, yet I oppose bill HB3063.

Our student body is filled with young minds ready to make the world a better place! To take these students away would not only harm our school community greatly by removing amazing learners, but it would also damage their educational progress by forcing them out of a school that provides academic experiences, caring adults and peers, social interactions, and, specifically to my area, the chance to learn a 2nd language. I am a teacher, yet I oppose bill HB3063.

Thank you for taking the time to read and consider my thoughts.

Sincerely,

Lori Leedy
790 Ayres
Eagle Point, OR
97524

4/23/19

To the people of the Oregon Legislature and Way and Means committee:

I would like to voice my opposition to Bill HB 3036. I am a lifelong Democratic party member, and am appalled to see the level of support by democrats today. I elected you in a supermajority to protect us from corporations, and now I see that you are making a decision that will literally hurt my life in a way that no human or institution has ever done.

There are a number of important reasons why this bill would be damaging to our state and must be voted down today.

We must avoid unnecessary human suffering in our endeavors. This is one of the principles of the Nuremberg code of human ethics. This bill will cause and is already causing massive suffering for those whose kids have suffered vaccine injury but cannot get a medical exemption under the current OR THE PROPOSED law, and those who hold deep philosophical and religious views. Kids lives will be torn away from them, families will relocate to other states, moms and dads will quit jobs to homeschool, our tax base will be lost, our schools will lose funding.

Our current vaccination system is working on all cylinders. In the year 2000 when we declared Measles eradicated, our vaccination rate was 93%, and today it is over 95%. Any resurgence of measles is not due to declining vaccination rates. Vaccination provides a temporary immunity. When we combined the natural immunity of those born before 1957, with the temporary immunity of the vaccine, it provided optimal grounds for minimal outbreaks in the early 2000s. As immunity from this first set of vaccinations has waned, however, it has created the opportunity for increases in outbreaks. In addition outbreaks can occur after a lull in cases when foreign measles is introduced into a highly unvaccinated as was the case in Clark County Washington.

We must separate Corporate lobby and State. You have all received the emails collected by a local safety advocate showing that OHA has been severely influenced by Pharma lobby. Pharma has lined the pockets of money of our elected and non-elected officials. We do not consent to a state run medicine pushed by pharma. We demand freedom and independence from corrupt politics and corrupt corporations.

We must protect religious minority groups from becoming further segregated and persecuted.

Government has no place removing a child from school for their parents' choices that are actually safer than the government schedule you are suggesting. We have the smartest parents in the world in Oregon. That is why our kindergarten rates of exemption are the highest. Not because they are anti-vaccine but because parents take the time to educate themselves about the safest vaccine plan for their child. But

these high rates for kindergarten are misleading because when you look at these exemptions, over 2/3 are still mostly vaccinated. Sweden and Japan have the healthiest kids in the world, and our mothers are copying the vaccine plans of these countries.

Vote NO today. If not we will do as the declaration of independence stated we should do, that government, “deriving their just powers from the consent of the governed, — That whenever any Form of Government becomes destructive of these ends, it is the Right of the People to alter or to abolish it, and to institute new Government, laying its foundation on such principles and organizing its powers in such form, as to them shall seem most likely to effect their Safety and Happiness.”

You do not derive your power from our consent when you submit to the will of the pharmaceutical industry, and we will vote you out if you vote for this bill.

Sincerely,

Luke Gonzales
Albany, Oregon

From: [Lindsay Phillips](#)
To: [JWMHS Exhibits](#)
Date: Tuesday, April 23, 2019 8:53:49 AM

Vote No on HB 3063! I support parental rights.

Lindsay Phillips

From: [Lyndsey Clarke](#)
To: [JWMHS Exhibits](#)
Subject: Vote NO on HB 3063!
Date: Tuesday, April 23, 2019 10:57:23 AM

I support parental rights. Lyndsey

From: [Lyndsi Holmes](#)
To: [JWMHS Exhibits](#)
Subject: House bill
Date: Tuesday, April 23, 2019 2:26:36 PM

Hello, please vote no on HB3063. The parents should have the right to make medical decisions for their children. Oregon's vaccination rate is 97% for measles and there are 2.8% unvaccinated. There is no emergency and parents are talking with their doctors and vaccinating, just on a different schedule. To take that choice away violates our human right. Please I urge you to vote no on HB3063.

I am a parent, educator, and citizen of Oregon for 28 years.

HB3063 strips citizens of their religious, parental, and medical freedom rights.

For what? A few cases of measles, and a state already at herd immunity: 95%. Who benefits from this bill? Not children. Only big pharma, with a mandated liability-free product, zero placebo-controlled safety studies and Merck currently sued for fraud concerning MMR.

Did you see the thousands who showed at the Rally for Rights? If you pass this bill against our strong opposition, we will not stop fighting until we regain our rights. Parents whose children are not fully vaccinated have good reasons. They will not comply. They will pull their kids out of school and possibly leave the state. Those of us left will continue to fight for our children and our freedom.

The “home schooling” option has now been revealed as the fraud it was, since the bill has an amendment to require reporting of vaccine status. How dare the state demand private medical information from citizens?

Since this is the Ways and Means Committee, I understand you care about costs. I haven't seen any remotely reasonable analysis concerning the true costs. Cost of enforcement (how will you keep unvaccinated students away from school activities? Will students need to show their papers to attend a concert or sports event?), cost of increasing paperwork and compliance efforts, cost of increasing online school for students kicked out of school, cost to school districts for students who leave school, cost to private schools who lose tuition.

Here are some other costs to consider:

Cost of the bad blood created by kicking out of school students who are healthy and no risk to others. There were eloquent teens at the rally today, already positive contributors to our state, who would be excluded from all their extra-curricular activities. They don't deserve that.

Cost of tearing the social fabric of Oregonians, dividing them into warring camps.

Cost of anger created by trying to force Oregonians to violate their consciences by injecting their children with fetal DNA from aborted babies.

Cost of requiring parents to take action they believe will harm their children. Expect vaccine issues to take up a large chunk of your time for the foreseeable future. Is that why you went to Salem? To steal our rights? Surely you had other issues you wanted to work on. NO amendments make this travesty acceptable. KILL THE BILL.

Respectfully submitted,

Lynn Barton

From: [Lynne Marks](#)
To: [JWMHS Exhibits](#)
Subject: HB3063
Date: Tuesday, April 23, 2019 3:59:29 PM

I am writing to share my concerns about HB 3063. As a retired teacher, I believe some vaccines have an important place in our society – on a schedule that a medical professional and parents (in collaboration) determine what is best for a child. I also feel that this bill is an overreach of government.

Restricting children from school, public places, etc. especially because they are missing ONE vaccination is far too restrictive. In addition, as you know, these children would be automatically expelled from school - regardless if they are in pre-school, kindergarten, or a senior in high school with only weeks before graduation.

The medical exemptions to not vaccinate are nearly impossible to obtain, so families who have had children with severe vaccine reactions and/or the genetic predisposition to possible severe reactions, would struggle to qualify under the overly strict guidelines.

Most importantly, this bill infringes on Oregonians' right to medical freedom and choice. (One of the reasons I am proud to live in our state/country is that we are a democracy and are afforded rights/choices). As it currently is written, even with the suggested amendments, this bill would be a step in slowly chipping away at our freedom of medical choice.

In fact, in a recent letter to the Senate Committee on Health, Education Labor and Pensions (dated February 26, 2019), the Association of American Physicians and Surgeons recognizes and addresses their concerns about governmental "interference in medical decisions, including mandated vaccines:" Specifically, they stated:

“After being fully informed of the risks and benefits of a medical procedure, patients have the right to reject or accept that procedure...Governmental preemption of patients' or parents' decisions about accepting drugs or other medical interventions is a serious intrusion into individual liberty, autonomy, and parental decisions about child-rearing.”

In my opinion HB3063 - if passed as it is currently written - would be a "serious intrusion" in the rights of all Oregonians to medical freedom and choice. I strongly urge you to oppose HB 3063 and protect the freedom of your fellow Oregonians.

Sincerely,

Lynne Marks
3657 Silverstone Dr. NE
Salem OR 97305

From: [Alima Lynne Matejcek](#)
To: [JWMHS Exhibits](#)
Subject: Support Medical Freedom
Date: Wednesday, April 24, 2019 7:48:59 PM

Please support my choice to immunize myself and my family when & if i believe it's best.
Support our/my medical freedoms.

Sincerely,
Lynne Matejcek

From: [Mackenzie Soltero](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Tuesday, April 23, 2019 9:04:41 PM

I am writing this email to ask you to please vote no on HB 3063. I want to share a little bit about how vaccines have changed my life. When I was fifteen years old my mom decided that I needed to get the HPV vaccine. Within weeks of receiving the first dose I started to feel sick. I became a different child. Always tired, to the point where I quit sports and missed a lot of school. What I did not know then was that I had developed an autoimmune disease, hashimotos. Living with this chronic disease has not been easy. Because I have an autoimmune disease, the CDC recommends not giving my children the MMR, Varicella, and rotavirus vaccines. The state of Oregon will not accept a medical exemption for my children if this passes, even though the CDC says these vaccines should not be given to my children. I am devastated even thinking that I might have to explain to my kindergarten that he will no longer be able to attend school, or play sports. If this bill passes we will be selling our home, and closing our business to leave the state of Oregon. Our local Schools and the state of Oregon will be losing money if this bill passes. Parents should have the right to choose what is best for their children! Please vote no on HB 3063.

Thank you for taking the time to read this.

Mackenzie Soltero

From: [Malisa Lowrey](#)
To: [JWMHS Exhibits](#)
Subject: No on HB3063
Date: Tuesday, April 23, 2019 8:03:29 PM

I would like to send a simple email urging to please, please, please..

Vote NO on HB 3063

Rights should not be taken away from parents on what they deem medically necessary for their children.

Thank you.

Malisa Anderson
541-974-5617
<https://m.facebook.com/myheartandhustle>

From: [Mandi Meador](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Tuesday, April 23, 2019 10:04:42 AM

Vote NO on HB 3063!

I support parental rights.

Mandi Meador

Sent from my iPhone

From: [Mandy](#)
To: [JWMHS Exhibits](#)
Subject: Testimony against HB3063 PLEASE HELP MY FAMILY
Date: Monday, April 22, 2019 10:47:47 PM

>>>>

>>>>

>>>> As I sat in church Sunday, I prayed our legislators realize the harm that has been caused to so many children, including mine, as a result of vaccines and you will vote against this bill and protect these children from further damage.

>>>>

>>>> I have cried, and cried, and wondered if anyone in our government cares about the children who cant tolerate vaccines, who suffered seizures, developmental regression, or who have died.

>>>>

>>>> 2 of my 3 children almost died with prolonged seizures on their, 12mo, 18mo, and 5 year shots. Those doctors challenged me with "proving their reactions were caused by the vaccines they received," and refuse to consider medical exemption, completely dismissing our terrifying experience.

>>>>

>>>> Philosophical exemption is all I have to protect them from ever experiencing that again, or even possible death.

>>>>

>>>> I am a single mother, working full time as a social worker, paying for my oldest to attend college, and my younger 2 to participate in elite level sports, all connected through their public schools. If we are forced by law to vaccinate or be segregated from school it will devastate our family, because continuing to vaccinate is just too much of a risk. A risk we cannot take.

>>>>

>>>> The risk of continuing to vaccinate my children on the current schedule is extreme, and the consequence of choosing to decline further vaccinations extreme.

>>>>

>>>> My family does not have a choice without suffering a devastating outcome, either way.

>>>>

>>>> I have been registered a Democrat my entire life-believing this party supports human rights and personal choice. That has all changed as Ive watched this bill highlight differences between parties. While my own party is turning against families of injured children crying out for help, it is Republicans who hear us, supporting a parents God given duty to protect their children from harm. My eyes have been opened, and my mind has been changed. As are those of thousands of Oregon families who will never again vote Democrat.

>>>>

>>>> Someone, has to do something. This cannot become law. We are good people, defend those who are vulnerable, and participate actively in our schools and community. My children suffered greatly and no one should force them to suffer again.

>>>>

>>>> Are you someone who will help us? Will you fight for my children who have no power to protect themselves from further harm? Will you think of my family as you sit and deliberate the consequences of this bill? Will you imagine my daughter who almost died twice being forced to accept another injection...maybe not being so lucky next time...will you sit there and turn a blind eye to the damage being inflicted by those in power who believe they know best for my children. Will you feel bad knowing how much pain this bill will cause and wonder if you did your best to prevent it?

> Will you accept that more children will die and suffer permanent injury with the passage of this bill? If you will accept this, our humanity is already lost.

>

>>>>

>>>> Parent desperately trying to save her children.



Forbes Fulminates

State Vaccine Doctor Feeds Oregon Lawmakers Bunk; CDC, Experts Argue for Longer Intervals for 21 Forced Shots

April 22, 2019 — 11 Comments

Among the 8.6 million people who live in New York City, there's been 359 cases of measles since last September. On March 9, Mayor Bill de Blasio leading the charge, the city mandated the MMR (measles, mumps, rubella) vaccine in four densely populated zip codes in Brooklyn, neighborhoods where many Hasidic Jews reside. With 294 cases in Williamsburg, the outbreak has been centered in that community. (55 cases have hit another largely Hasidic community in Brooklyn, with ten cases elsewhere in the city.)

Should the city learn that an unvaccinated person in the crowded, insular community has been exposed to measles, they and their family have a matter of days to get the single MMR vaccine or pay a fine.

In Oregon, on the other hand, there's been 10 cases of measles statewide in 2019 – six cases in the county that includes Portland, and four in the rest of the state. Of Oregon's 36 counties, 32 have seen no measles at all. It's a bag of shells compared to what's happened in Brooklyn.

Yet Oregon state legislators, primarily Democrats and with the backing of the state's Democratic governor, are proposing to pass legislation, HB 3063, mandating *full* vaccination for any child in the state who wants to attend any school or day care, public or private – or even, in most cases, go to church with their family.

Should the law pass, any child lacking a medical exemption for a specific vaccine, an exemption that is approved by the local health department and tough to get, must get up to date on the seven mandated vaccinations – six for children age 5 or older. Up to date on shots to guard against diphtheria, tetanus, pertussis (that is, whooping cough), polio, measles, mumps, rubella (German measles), haemophilus influenzae type b (Hib: a rare disease, primarily in children under age 5, that can lead to meningitis), hepatitis A and B, and varicella (chicken pox).

Get all your shots, and once the law's in place, get them quick. That or stay home for the cobbled-together education and socialization available there.

(This is unfolding in the context of vaccine-maker Merck & Co., Inc. paying \$5,146,000 from 2016 to 2018 in 21 separate grants to three doctors' professional associations that have a formal role *approving* the federal vaccine schedule, according (<https://www.cdc.gov/mmwr/volumes/68/wr/mm6805a4.htm#contribAff>) to the Centers for Disease Control and Prevention. A good slice of that \$5-million went to promote acceptance and use of Merck's controversial human papilloma virus vaccine, Gardasil, including, for instance, a payment of \$219,000 on July 23 of last year to one of the groups, the American College of Obstetricians & Gynecologists. The Merck spread-sheet indicated the money funded an "HPV Immunization Web Program."

Also peering over the shoulder of the current debate is the issue of what vax-compliance registry experts – the Immunization Information Systems folks – refer to as inter-operability: the coming ability of various state vaccine-status registries to communicate with each other so as to, one day, create a full national registry of vaccine noncompliant Americans. CDC guidelines as well as a registry vendor I interviewed, indicate that this information is available to health insurers ("stakeholders," that is) – perhaps the future route for higher insurance premiums or denial of coverage for those not fully vaccinated. Several academics pushing full vaccination have called for insurance penalties for the noncompliant.

More on Williamsburg, Merck's payments to doctors' groups, the future tracking of Americans' vaccine status and the press's role in the vaccine-debate miasma in a future article.)

Along with New York's four-zip-code, one-shot agenda, statehouse action in Washington also comments on Oregon lawmakers' overarching ambitions. Unlike Oregon, Washington has experienced an actual measles outbreak, one confined to Vancouver, the city across the Columbia River from Portland. There's been 73 cases in Vancouver's Clark County along with one in the Seattle area.

Yet, as in Brooklyn's 'emergency' order, Washington's pending legislation will require only the MMR shot. On Thursday, largely on party lines with Democrats in favor, the bill passed a closely divided state senate and is expected to make it into law. The rarely used religious exemptions will still apply in Washington.

Though the media conflate the two states, constantly referring to "the measles outbreak in Oregon and Washington," with a population of 807,000, Multnomah County – that is, Portland and some suburbs – has seen six cases total.

Nonetheless, with Democrats and a few Republican lawmakers in a tizzy, Oregon is reaching for the stars. Should the bill pass, the state will mandate the entire schedule of shots mentioned above. That or no school or day care, public or private.

Nope, not just the MMR shot, like the jurisdictions that actually have more than a smattering of measles cases. It seems almost vindictive somehow, a punishment perhaps of the Oregon parents (and their children) who followed current state law and legally opted out. Among K – 12 students, there's 31,474 Oregon kids statewide whose parents declined at least one of the shots listed above, including two combination injections covering three diseases each.

So, two states with bona fide, albeit limited – certainly quite limited geographically and demographically – measles outbreaks. One, New York, is mandating MMR shots solely in four zip codes for those thought to be exposed. In practice, it appears that contact tracing will be largely limited to Hasidic Jews, the same folks who've gotten ill with what, in rare instances, can be a serious, life-altering disease.

The other state, Washington, is looking to enact a statewide mandate, but solely for the MMR vaccine.

“Newsworthy,” But Not an Emergency

Oregon, on the other hand, is not facing a measles emergency, not remotely. As one Oregon official told me, “It’s nice that it’s newsworthy, but I don’t consider measles an emergency.”

The concept of outbreaks’ utility was echoed by Phoenix-area pediatrician Dr. Chris Hickie on a rigorously pro-vax [blog](https://scienceblogs.com/insolence/2016/08/25/vaccine-exceptionalism-with-friends-like-these-who-needs-enemies). (https://scienceblogs.com/insolence/2016/08/25/vaccine-exceptionalism-with-friends-like-these-who-needs-enemies). Decrying what he rather amazingly termed big medical associations’ supposed apathy towards nonmedical exemptions, Hickie wrote, “[W]e are then relying on further Disneyland-type vaccine-preventable infectious disease outbreaks to do the work we should have been doing these last 10+ years.”

The reference is to the late-2014 measles outbreak at Disneyland that served as a catalyst for California revoking personal belief exemptions. California an American bellwether for generations, a well publicized outbreak there closed the gates on nonmedical exemptions. Now in 2019, seizing the opportunity presented by an outbreak in Washington, Oregon lawmakers are proposing to mandate seven different vaccines for 11 diseases.

The law will particularly affect the 17,700 Oregon children who’ve received no shots at all. That’s 15,737 K – 12 students in 2018 and, I estimate after parsing state records, approximately 2,000 more in preschool.

For an unvaccinated Oregon 3-year-old, say – should the child get 4 DTaP shots and not 5 – that would add up to 21 needles (six of them being combination shots). And, no, the momentary discomfort of the jabs is not the issue.

The CDC [defines](https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/prinvac.pdf) (https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/prinvac.pdf) an antigen as, “A live (e.g., viruses and bacteria) or inactivated substance capable of producing an immune response.” And the Institute of Medicine describes antigens as “those portions of a foreign substance that trigger an immune response.”

[Research](https://jamanetwork.com/journals/jama/fullarticle/2673970?utm_campaign=articlePDF&utm_medium=articlePDFlink&utm_source=articlePDF&utm_content=jama.2018.0708) (https://jamanetwork.com/journals/jama/fullarticle/2673970?utm_campaign=articlePDF&utm_medium=articlePDFlink&utm_source=articlePDF&utm_content=jama.2018.0708), sponsored by the CDC and published in 2018 in *JAMA: The Journal of the American Medical Association* (see ETable3), discussed the number of antigens in the multiple doses of the vaccines Oregon is proposing to mandate (six for children age 5 or older, the Hib vaccine dropped for them).

If the 17,700 totally unvaccinated children are to follow a full catch-up schedule – as Oregon is proposing – the total number of antigens, including viruses and bacteria, is between 285 and 295 according to the *JAMA* study.

The number varies depending on which brand of DTaP is used. For children 5 or older, the total is between 277 and 287 antigens (again, depending on the DTaP choice) after subtracting the 8 total antigens contained in the two Hib doses they don’t get.

Note that this antigen total is certainly reduced from the days when whole-cell pertussis and smallpox vaccines were routinely used.

A Super-Majority Plows Ahead

The Democrats in Salem, the Oregon capital, enjoy super-majorities in both houses: 18 Democrats to 12 Republicans in the Senate, and 38 to 22 representatives in the House. They can do, more or less what they like.

And as they plow ahead, they did embrace a broader view in one respect. Of the dozen and more amendments offered on the bill, they passed one, Amendment 13, that extended the deadline for complying with the proposed new law out till next summer. Unvaccinated children, therefore, will not be barred from school or day care until August 1, 2020. And, yes, that is indeed something.

Should the bill pass sometime in the next several weeks, parents paying attention to state politics will have a year and more to catch their kids up. That, of course, doesn't include the large percentage of folks out there who ignore politics in favor of the finer things in life like skee-ball or skittles. There are people who don't engage in the polity, or only follow the far-off orbs that suck all the air out of the room.

Additionally, the 'grace period' till next August may be of little solace to parents who entirely oppose some or all vaccines. If you think your child might be harmed – which is certainly a real, albeit rare possibility; if your child already *has* been harmed; or has a sibling who's been harmed, having a year to accomplish the task means little. That's why there were several mothers shedding quiet tears as the bill was voted out of the House committee, its first step towards potential passage.

There's a lot of uncertainty at play about how all the various vaccines interact with each other. The well respected Institute of Medicine, one of the National Academies of Sciences, Engineering, and Medicine, published a volume in 2013 entitled, *The Childhood Immunization Schedule and Safety: Stakeholder Concerns, Scientific Evidence, and Future Studies*.

And it delved deep into the issue of the safety of the entire vaccine schedule. The summary chapter (<https://www.nap.edu/read/13563/chapter/2#2>) noted, "First, the concept of the immunization 'schedule' is not well developed. Most vaccine-related research focuses on the outcomes of single immunizations or combinations of vaccines administered at a single visit.... Thus, key elements of the entire schedule—the number, frequency, timing, order, and age at administration of vaccines—have not been systematically examined in research studies."

What's more – and here's one of the key issues the article you're now reading addresses – once the law takes full effect next August, according to the state expert steering how it all shakes out, all Oregon families with unvaccinated children will be under intense pressure to meet the state's new requirements quickly.

Then consider this real-world scenario, one that might grace the stage after August 2020:

Mom and Dad have been sailing along, the happy parents of three-year-old Henry, one parent taking care of him at home, Henry the recipient of no vaccines. He's at home when he's not digging in the park's sandbox or flapping his arms at the chickens in the yard down the block trying to get them to fly, life proceeding apace.

Then, boom! – a different life intrudes.

Mom heads for the hills with some Uber driver. Or Dad disappears with the local laundromat attendant. It happens. So the parent saddled with Henry, the parent who's been stay-at-home Mom or Dad, now has to find work and slap Henry in day care right quick.

It's worth noting divorce's economic effect, which is typically harsher on women. (Sainted Mom true to her vows, her ex is the one leading the high-life off counting quarters from all the driers). The CDC notes ([page 4](https://www.cdc.gov/nchs/data/abus/2017/066.pdf)), (<https://www.cdc.gov/nchs/data/abus/2017/066.pdf>) that for whites (remember, we're talking Oregon here), the percentage of toddlers aged 19 – 35 months who had all their shots averaged more than 13 percent *lower*, from 2012 to 2016, for children living below the Census Bureau's poverty thresholds compared to children living at or above that income level.

If the bill passes, it'll be in full force come next summer. After that, how quickly will woebegone Mom be required to get that kid vaccinated? For the most part, that will be left up to the good graces of the Oregon Health Authority, which means it'll be the determination – to a large degree – of Paul R. Cieslak, MD, OHA's Medical Director, Communicable Diseases and Immunizations.

His assessment: six months. Yup, safe – and immunologically efficacious, too – in his considered professional judgement for Henry to get 21 shots in six months.

Leading Oregon legislators by the hand, more than once during public testimony March 14 right before Democrats on the Oregon House Committee on Health Care voted to move the bill along to a joint House-Senate committee, Cieslak stated that entirely unvaccinated children could safely be caught-up to full compliance in a matter of months.

With no mention of the 17,700 or so totally unvaccinated Oregon kids potentially affected, state representatives asked (http://oregon.granicus.com/MediaPlayer.php?clip_id=26192) Cieslak (starting at the 29:00 mark of the video) how quickly totally unvaccinated children could get the many shots needed to comply with Oregon law.

His expert (unsworn) testimony: six months.

Recall the exhaustive IOM research effort quoted above: “[K]ey elements of the entire schedule – the *number, frequency, timing, order, and age at administration of vaccines* – have not been systematically examined in research studies.” [Emphasis added.]

Cieslak's statement contrasts with the current de facto system in Oregon. School children whose parents have not exercised the current personal-beliefs exemption might be given an injection at the local health department in February and basically told to return in a year for any needed booster shots.

It was rather breathtaking. Asked again by a somewhat incredulous lawmaker, Cieslak repeated his assertion as to the half-a-year safe time-frame.

The Big Kahuna

An MD and the state's designated expert, who according to his LinkedIn page has been managing communicable disease prevention at OHA since 1995, Cieslak's safe six-month window lies at a far remove from the CDC's official guidelines (<https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html>), the “General Best Practice Guidelines for Immunization,” as promulgated by the CDC Advisory Committee on Immunization Practices. ACIP is the big kahuna of vaccination policy; when media reports refer to federal guidelines, they're typically referring to what ACIP puts out. Most states follow suit.

ACIP has 15 voting members, mostly med-school professors, who vote on the Best Practices. They're aided by eight “ex officio members” representing federal entities such as the Food and Drug Administration and National Institutes of Health. Then there's the “30 non-voting representatives of

[various pro-vax] liaison organizations.”

(Of note are the representatives of three doctors’ professional associations who, as mentioned, also have a role in approving. (<https://www.cdc.gov/mmwr/volumes/68/wr/mm6805a4.htm#contribAff>) the CDC’s vaccine schedule. As will be discussed in a future article, these three groups – the American Academy of Pediatrics (with two representatives), the American Academy of Family Physicians, and the American College of Obstetricians and Gynecologists – have received more than \$5-million from vaccine maker Merck over the last three years, some of the money geared to promoting acceptance and use of Merck’s controversial HPV vaccine.)

Oregon indicates

(<https://www.oregon.gov/oha/PH/PreventionWellness/VaccinesImmunization/GettingImmunized/Documents/SchVacCriteria.pdf>) that the first of its 12 criteria when establishing its schedule is whether a vaccine is recommended by ACIP – often the determining factor.

As to Mom having to stash Henry in day care so she can get a job and keep a roof over their heads: the CDC calls for eight months to elapse before the child can get four DTaP shots – not Cieslak’s six months. And should the timing of Henry’s age work out that he gets five DTaP shots, what’s referred to as the Minimum Interval is 14 months – not six.

In the same vein, the minimum time between the polio shots is also eight months, not six.

And those are just the absolute Minimum Intervals.

ACIP’s “Recommended Intervals,” however, are a horse of another color; they’re the elapsed time indicated for *maximum* immunological efficacy. As to safety – lowering the risk of adverse events after vaccination – as the IOM research suggests, the data is lacking.

The AICP Best Practice guidelines come down hard on eschewing the Minimum Intervals and spacing vaccines out according to the Recommended Intervals. Thus, the CDC argues for Oregon lawmakers and parents alike to ignore Cieslak’s putative six-month safe-window for up to 21 shots containing up to 289 antigens.

The guidelines (<https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html>) state, “Vaccination providers should adhere to recommended vaccination schedules.” Only when a child who is behind schedule needs “rapid protection,” or in the event of impending foreign travel, should the intervals be shorter than the Recommended Interval.

There’s certainly scant case to be made in Oregon that any child needs “rapid protection” against chicken pox or polio.

The Three Mavens

Mark Sawyer, MD, professor of clinical pediatrics at UC San Diego, has served on ACIP and is also chair of the California Immunization Committee – a vaccine maven, obviously. He said, “There’s not a lot of data to support the use of minimum intervals; only small groups have been studied.”

The ACIP guidelines add on Page 2 that, “Doses administered too close together or at too young an age can lead to suboptimal immune response.” In other words, rush the gun on subsequent doses – as Cieslak assured lawmakers was OK – and health officials might shoot themselves in the foot. On Page 10,

ACIP reiterates, "Vaccination providers should administer vaccines as close to the recommended intervals as possible."

Jose R. Romero, MD, a professor at University of Arkansas for Medical Sciences and the current ACIP chair – Maven Number Two – said, "Ideally, yes, you stick as close as possible to the Recommended Intervals."

Asked about a statewide campaign catching up thousands of children, Romero said, "I don't know that I'd used accelerated intervals." It's more individualistic than that, he added. "I would say if the family will bring the child back at the appropriate time, I would stick with the Recommended Intervals.... It requires some thought by the health department."

In other words, according to the ACIP chair, not just the state of Oregon buffaloing through a blanket, one-size-fits-all program.

Another authoritative CDC source, now in its 13th edition, is the agency's vaccination bible, commonly called the Pink Book (<https://www.cdc.gov/vaccines/pubs/pinkbook/index.html>). It advises, "Accelerated schedules should not be used routinely." And a program for 17,700 kids, by definition, has to be informed by routine, or it'll devolve into chaos.

Formally titled, *Epidemiology and Prevention of Vaccine-Preventable Diseases*, the Pink Book's General Recommendations chapter (<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/genrec.pdf>), offers this large-font, pull-quote General Rule: "Decreasing the interval between doses of a multidose vaccine may interfere with antibody response and protection."

What's more – Oregon lawmakers please take note as you usher Cieslak's six-month catch-up schedule to the door – it advises that, "Studies have demonstrated that *recommended* ages and intervals between doses of the same antigen(s) provide optimal protection or have the best evidence of efficacy." [Emphasis added.]

Shorter, minimum intervals might be substituted for the recommended intervals pending international travel, the Pink Book advises. Or, "when an infant or child is behind schedule and needs to be brought up-to-date quickly...." But there's no further guidance given as to when a quick catch-up might actually be indicated.

No rationale for when a quick catch-up might be called for.

Conversely, see the CDC material just above calling for adherence to the much longer Recommended Intervals. To repeat: "Decreasing the interval between doses of a multidose vaccine may interfere with antibody response and protection." In other words, the kid gets the shots and risks the attendant adverse events for little or nothing.

Mandatory full-vax advocates, the Immunization Action Coalition, also advises following CDC's Recommended Intervals. An IAC power-point presentation (<http://www.immunize.org/catg.d/s8025.pdf>) echoes ACIP: "Vaccination providers should adhere as closely as possible to the recommended vaccination schedules to provide optimal protection." In other words, unless there's a good reason otherwise, stick to the Recommended Intervals.

The IAC adds, "Administration of doses of a vaccine series using intervals that are shorter than recommended might be necessary in certain circumstances, such as impending international travel or when a person is behind schedule but needs rapid protection."

The reference is to “a person” – singular. There’s no indication that a wide-scale immunization program for up to 31,000 students constitutes a population that needs “rapid protection.”

IAC Executive Director Deborah L. Wexler, MD declined to identify when a person – never mind tens of thousands of them – might need “rapid protection.” Though a physician who’s been at IAC for 29 years, Wexler emailed to say, “I am sorry that I am not a good source for answers to your other questions.” That’s a bit tough to swallow from a professional in the field for almost three decades.

Or is it the case that there’s no criteria at all indicating a need in a large population for “rapid protection”? No criteria supporting CDC’s hypothetical scenario of a child that, for unstated reasons, “needs to be brought up-to-date quickly.”

Statements by the expert quoted above, the current ACIP chair, Dr. Romero, as well one quoted below, Dr. Arthur L. Reingold of UC Berkeley, seem to underscore the lack of any good reason to go off half-cocked.

Some examples of the Recommended versus Minimum Intervals:

While the Minimum Interval for the two required MMR shots is within Cieslak’s six-month time-frame, ACIP’s Recommended Interval between them is 3 to 5 years. Immunity waning, that’s so the child will actually be protected when they head off to school.

For varicella, the Minimum Interval between the two doses is 3 months but the Recommended Interval is at least 3 years.

And for the four mandated polio shots, CDC’s Minimum Intervals add up to 8 months – longer than Cieslak’s safe window – but the Recommended Intervals are at least 40 months.

Full Catch-Up Necessary?

On a different front, UC Berkeley School of Public Health professor of epidemiology, Arthur L. Reingold, MD, who served on ACIP from 2013 to 2017 (Maven Three), questioned the doctrinaire need to catch-up with blind observance to the *full* immunization schedule. A vastly experienced expert, he, Sawyer and colleagues co-authored ACIP’s 2018 [recommendations](https://www.cdc.gov/mmwr/volumes/67/rr/rr6702a1.htm) (<https://www.cdc.gov/mmwr/volumes/67/rr/rr6702a1.htm>), on pertussis, tetanus and diphtheria.

Asked about CDC’s stated preference for following the Recommended Intervals rather than the Minimum ones, Reingold said, “You raise a really important question.” Taking my question and running with it, he added, “Clearly for a number of the vaccinations in question, even one dose offers reasonable protection.” For instance, Reingold said, one shot of Hep A vaccine offers “good protection.”

Reingold said, “We want kids in school. And we don’t want the shots too close together. They’re not valid,” he said, if too close, “and you won’t get the same level of immunity.”

Reingold added that from a public health viewpoint, “It’s reasonable that if you get one MMR vaccine, you could wait on the second. Or the second may not be necessary. That’s another example of one dose being OK to get kids in school.” A pragmatic man, it seems, Dr. Reingold.

For his part, Sawyer said, “For measles, a single dose does a pretty good job; there’s less pressure to accelerate to the minimum intervals.” That’s less true for mumps, Sawyer added. But mumps are not the issue here in Oregon; mumps aren’t driving legislation.

As to polio, Reingold said, “One dose of the injectable polio vaccine provides reasonable efficacy.” Especially since, “The risk of contracting polio is vanishingly small in Oregon. So one dose is an OK starter.” Contrast that view with the four polio shots Cieslak and Oregon lawmakers want to pound home in six months.

Unless international travel is anticipated, Sawyer said of the polio vaccine, “There’s no need for accelerated administration. I would go with the Recommended Interval. At this point, the risk of polio is minimal or zero.”

In other words, in the opinion of these two nationally recognized experts – doctors steeped in the making of federal vaccine policy – violating the CDC’s Minimum Intervals by forcing kids to get four polio shots within six months to satisfy some crack-the-whip notion of compliance is of little utility and less sense.

Yet Cieslak expressed none of this to legislators about to vote a bill out of committee and on its way, perhaps, to becoming their own whip forged of ignorance, unaccountable partisan momentum and bad advice from the state expert ‘testifying’ before them. (Maybe if Oregon had *sworn* testimony, state experts might bone up a bit on what they impart.)

Regarding Hep B, Reingold expressed his personal opinion that one shot should suffice for most of childhood. “If you don’t get it from your mother at birth, a child is reasonably safe till adolescence.” For the most part, in his view, that’s when the next likely exposure might occur.

Official Approval for Delay

In fact, just delaying the shots, spacing them out, as many parents wish to do as a step far short of vaccine refusal, receives official approval. According (<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/genrec.pdf>) to the Pink Book, the CDC bible, “[A]vailable data indicate that intervals between doses longer than those routinely recommended do not affect seroconversion rate or titer when the schedule is completed.” Titer refers to a blood test of the number of antibodies, which indicates the level of immunity.

In a bold-faced, large-font pull-quote, this official reference states: “General Rule: Increasing the interval between doses of a multidose vaccine does not diminish the effectiveness of the vaccine.* The asterisk says, “after the series has been completed.” Yet the meaning of this General Rule is clear.

Finally, as a bullet point in a box so as to emphasize the statement, the Pink Book adds, “Available studies of extended intervals have shown no significant difference in final titer.”

Nor does an organization roasting marshmallows round the mandatory full-vax campfire, the Immunization Action Coalition, which receives funding from both the CDC and pharmaceutical companies, shy from delay.

Its power-point (<http://www.immunize.org/catg.d/s8025.pdf>) states, “Doses given even years later than recommended are still valid because the body has ‘immunologic memory.’ The real problem with longer than recommended intervals is not the validity of the doses or their immunologic effect. It is that, until the series is complete, the person may remain susceptible to the associated vaccine-preventable disease.”

Chances are good, quite good given the large Democratic majorities in both houses of the state legislature, that Oregon will pass some sort of a bill restricting exemptions. Opponents might hope that, as in Washington, the stricture might be limited to the MMR vaccine. Or perhaps some lawmaker a bit

better versed in the complexities of the vaccine schedule – having taken the time to do some reading – might offer an amendment with specific, written caveats about adhering to the CDC’s Recommended Intervals and not the Minimum Intervals. And certainly not Cieslak’s wildly aggressive six-month window once the bill potentially takes hold next summer.

Scant Data on the Full Schedule

Yeah, it really might be best to go slow, given the paucity of research on the possible adverse effect of all those vaccines in the short time proposed, six months for maybe 21 shots. One issue regarding so many vaccines is that while individual vaccines have been studied, albeit often with small samples, there is limited research, according to the Institute of Medicine, on the entire vaccine schedule. Limited research on accelerated delivery of that passel of shots.

As the IOM research (<https://www.nap.edu/read/13563/chapter/2#2>), *The Childhood Immunization Schedule and Safety*, quoted above – as far from fringe science as it’s possible to get, but unfortunately not updated in the six years since publication – put it, “[F]ew studies have comprehensively assessed the association between the entire immunization schedule or variations in the overall schedule and categories of health outcomes....”

It added, “Experts who addressed the committee pointed not to a body of evidence that had been overlooked but rather to the fact that existing research has not been designed to test the entire immunization schedule.”

Finally, the IOM committee stated its belief that, “although the available evidence is reassuring, studies designed to examine the long-term effects of the cumulative number of vaccines or other aspects of the immunization schedule have not been conducted.”

In an editorial (<https://jamanetwork.com/journals/jama/article-abstract/2673951>) in JAMA, two professors, one at Stanford, the other at the University of Colorado (and a big ACIP man) wrote of “the robust and safe childhood immunization schedule....” But they also noted the increase in routine vaccinations from the 8 typically given in 1994 to 2010’s total of 14. (Some not mandated by Oregon – not yet – though keep your eye on HPV.)

And then this in JAMA, “In 2013, the Institute of Medicine ... called for increased research into the safety of the entire childhood immunization schedule. Although pre- and post-licensure studies had examined the safety and efficacy of individual vaccines separately and in combination with other vaccines, these studies did not examine the safety of the overall schedule.”

It’s a shot in the dark.

Oregon is proposing to embark on a grand experiment: from no-vaccines to full-vaccination, zero-to-60 in six months maybe, N = 17,700. (N is the number of subjects in a study.)

It’ll be a vast, bitter experiment under a cloud of uncertainty, lack of research, and steady amendment to the devilishly complicated vaccine schedule. For instance, the ACIP recommended schedule (<https://www.cdc.gov/mmwr/volumes/68/wr/mm6805a4.htm#contribAff>) for 2019 noted, “changes in the 2019 immunization schedule for children and adolescents aged ≤18 years include new or revised ACIP recommendations” for HepA, HepB, influenza, Tdap, “as well as clarification of the recommendations” for polio. That’s in 2019! With the exception of any given year’s flu shot, none of these are new vaccines.

“Errors Occurred”

And though ACIP is treated as if handing down tablets from Mt. Sinai, things do get botched. Or, as CDC admitted, “errors occurred.” For ACIP’s 2011 “General Recommendations on Immunization” ([here](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6002a1.htm?s_cid=rr6002a1_w#Tab6) (https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6002a1.htm?s_cid=rr6002a1_w#Tab6)) left out an entire category of vaccines that may cause the dreadful response known as the Arthus reaction. It’s named for the French immunologist [Nicolas Arthus](https://en.wikipedia.org/wiki/Arthus_reaction) (https://en.wikipedia.org/wiki/Arthus_reaction), who discovered it in 1903.

According to a [different](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm) (<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm>). ACIP document, this from 2006, the Arthus reaction to vaccines (and other medical events), which may occur from 4 to 12 hours after vaccination, is “characterized by severe pain, swelling, induration [a hardened mass or loss of elasticity], edema [swelling], hemorrhage, and occasionally by necrosis.”

Necrosis refers to irreversible tissue death, in this case, typically around the injection site.

CDC did mention tetanus. But it left out an entire category of *diphtheria* containing vaccines that might also spark an Arthus reaction: the two “MCV4” meningococcal shots that are diphtheria conjugate vaccines. That means they use a form of diphtheria to help the meningococcal antigens do their job.

It took CDC six months in 2011 to issue an erratum [here](https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6029a7.htm) (<https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6029a7.htm>) noting that “errors occurred” regarding the danger the meningococcal vaccines represented to prior Arthus reaction patients. No way of telling, of course, how many children might have experienced severe pain and necrotic tissue death over those six months.

CDC Medical Officer and lead author of the 2011 “General Recommendations,” Dr. Arthur T. Kroger, told me that Arthus is indeed a serious reaction, one that, by definition, is “very painful.” But he couldn’t say what the long-term effect of necrotic tissue death might be. The CDC states that it occurs “occasionally” with Arthus. Asked, say, if such tissue death might affect the ability going forward of a young baseball player (of either gender) to throw a baseball or softball, he declined to answer. Kroger did say, “I guess it’s irreversible. You have to debride” the dead tissue. “It’s not deep. The arm’s not limp.”

Some parents may wonder why they can’t just go get a measles vaccine alone – a monovalent vax. But there’s no stand-alone measles vaccine available. After a production hiatus, Merck terminated the three monovalent vaccines, including mumps and rubella, in 2009. This followed its licensing of a combined MMR-varicella vaccine in 2005.

Merck’s 2018 [annual report](https://s21.q4cdn.com/488056881/files/doc_financials/2018/Q4/2018-Form-10-K-(without-Exhibits)_FINAL_022719.pdf) ([https://s21.q4cdn.com/488056881/files/doc_financials/2018/Q4/2018-Form-10-K-\(without-Exhibits\)_FINAL_022719.pdf](https://s21.q4cdn.com/488056881/files/doc_financials/2018/Q4/2018-Form-10-K-(without-Exhibits)_FINAL_022719.pdf)) states that global sales of ProQuad, its MMRV vax, were \$593 million in 2018, up 20 percent from sales of \$495 in 2016. The most recent annual increase was “driven primarily by higher volumes and pricing in the United States and volume growth” – *not* higher prices – in Europe. (The CDC [indicates](https://www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/index.html) (<https://www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/index.html>) that in the “private sector,” the MMRV shot costs \$214 a pop.)

The annual report adds that global sales of MMR were \$430 million in 2018, up 22 percent from \$353 million two years before in 2016. Up 20 percent and more the past two years, both products are enjoying remarkable growth.

Never mind that according (<https://www.cdc.gov/vaccinesafety/vaccines/mmr/mmr-v-safety-studies.html>) to the CDC, post-licensure studies of MMRV versus separate, simultaneous MMR and varicella shots indicate that among kids aged 12-23 months, twice as many who got the MMRV shot experienced febrile seizures as did children that age who got simultaneous but separate MMR and varicella injections. The CDC notes that Merck did its own post-licensure study. And while the absolute numbers were slightly less, the ratio of seizures remained two to one, MMRV vs. MMR and varicella shots during the same office visit.

Ball's in Your Court, Oregon Lawmakers

Despite flying in the face of official federal vaccine scheduling guidelines as promulgated by ACIP's experts, Cieslak still well might determine state policy. That's his job, done competently or not. One wonders at his blithe contradiction of the 15-odd med-school professors who vote on ACIP's Best Practices. Fifteen vax-mavens on one side versus one lonely OHA doctor on the other – though he's the one calling the tune for Oregon legislators, the one potentially carrying the day down in Salem.

As currently written, the law leaves much to untempered bureaucratic initiative, lawmakers proposing to allow OHA to do what it will. The bill says, "The Oregon Health Authority shall adopt rules pertaining to the implementation," etc.

Implementation – the when and how that any termination of nonmedical vaccine exemptions will affect many thousand Oregon children – is left to OHA's discretion. Moving forward, Cieslak, his boss, OHA Director Patrick Allen (an administrator, not a scientist), and Allen's boss, Governor Kate Brown, a Democrat, get to decide the nuts and bolts of Oregon's immunization policy.

That is, unless some Oregon legislator takes the time to master a tough subject and write some amendments to HB 3063 to rein in Oregon's unbridled – again, almost punitive – legislation. The bill currently before a House-Senate committee, the word afoot is that amendments remain a possibility even at this late date. So, some lawmaker might try to rein it in starting with Washington and New York's more modest ambitions as a model and cracking the whip solely, perhaps, in regard to MMR – which will still dismay an awful lot of parents. And then that same, truly progressive lawmaker, will take it upon her or himself to convince enough Democratic colleagues to vote for restraint.

That, or maybe even take a step back and realize – all the media ballyhoo aside – that it is possible to cry halt to the frenzied, alarmist fandango that's crowded the dance floor.

XXXXXXXXXXXXXXXXXXXX

Daniel Forbes's series (<https://www.portlandmercury.com/archive/daniel-forbes>) of 20 articles in *The Portland Mercury* on toxic emissions from Portland glass factories helped drive state policy change. Won awards from such outfits as Columbia University's J-School, published in a bunch of national publications such as *Rolling Stone* and *The Nation*, etc., and appeared on radio and TV a fair bit. (Cool when they send a big black limo, you exit the house in a suit, and the neighbors think someone's died and send over free food.)

Testified before the U.S. House and the Senate at hearings I caused (https://www.salon.com/2000/01/13/drugs_6/) on the Clinton White House's \$24-million, sub rosa propaganda campaign to rewrite TV scripts to sway elections. My novel, *Derail this Train Wreck*, from Fomite Press (<http://www.fomitepress.com/Derail.html>), was sparked by a police assault that led to a successful, free-speech federal lawsuit against Lincoln Center and the NYPD.

Bookmark the [permalink](#).

Blog at WordPress.com.

From: [Margaret Sexty](#)
To: [JWMHS Exhibits](#)
Subject: Re: -18 HB 3063
Date: Tuesday, April 23, 2019 11:07:40 PM

Hi

I am against the -18 amendment because the immunization status of homeschooled children should be no one's business. Those children are no more a health threat than any unvaccinated adult. In reality, the vaccination or health status of any person, adult or child is no one's business. Why children are being singled out is outrageous. Do you know your co-workers/co-legislators vaccination or health status? Or your neighbors, the grocery clerk, gas attendant? This is a blatant invasion of privacy. You might work with someone who has HIV, hepatitis, herpes, etc and not know it. Does it make them any less of a human being or any more of a threat to you not knowing these things? How is it any different for children? It makes no sense. This bill and the amendments have nothing to do with health but all to do with money, power and control.

Adding boards and more OHA invasion into private lives is taking away freedoms. I want HB 3063 and all its amendments gone. Children are human beings just like adults and the vaccination requirements and lack of freedom of choice is child abuse. Anyone who agrees to persecuting children and their families for health choices and being healthy needs to answer to a criminal human rights board. Please vote No on amendment -18 and HB 3063.

Thank you for voting no
Sincerely
A voting resident of Salem
Margaret Sexty

From: [Maria Chuop](#)
To: [JWMHS Exhibits](#)
Subject: Please Support HB 3063
Date: Tuesday, April 23, 2019 10:13:40 AM

Dear Governor Brown,

As a medical student at Oregon Health and Science University, I am writing on behalf of medical professionals everywhere, to urge action on non-medical exemptions from state immunization laws.

I am very concerned about the recent surge in vaccine preventable diseases such as measles. In 2018, there were **372 confirmed cases of measles**; and already, this year, there have been close to **626 individuals confirmed with measles in 22 states**. Indeed, Oregon and Southwest Washington have seen one of the largest recent outbreaks of measles in our country.

Vaccines protect the health of children and adults and save lives, especially those in our community who are most vulnerable. They prevent life-threatening diseases and certain forms of cancer.

Claims that vaccines are unsafe or may cause autism have been disproven by a robust body of medical literature including a recent Danish [study](#), published in the Annals of Internal Medicine, that shows that “MMR vaccination does not increase the risk for autism, does not trigger autism in susceptible children, and is not associated with clustering of autism cases after vaccination.”

[Data](#) show that just for children born in the United States in 2009, routine childhood immunizations will **prevent approximately 42,000 early deaths** and 20 million cases of disease with savings of more than \$82 billion in societal costs.

Outbreaks of vaccine-preventable diseases have been linked to communities of unvaccinated and under vaccinated individuals.

We urge you to support House Bill 3063. We are counting on your support to take the necessary action to protect the health and welfare of patients in our state.

--

Sincerely,

Maria Chuop

Medical Student, Class of 2019

Oregon Health and Science University

Mobile: (562) 230-6166

mariachuop@gmail.com

chuop@ohsu.edu

From: [Maria Garcia](#)
To: [JWMHS Exhibits](#)
Subject: NO HB 3063
Date: Tuesday, April 23, 2019 8:29:52 PM

Dear Sub Committee on Human Services,

I am writing in opposition to HB 3063. It is very concerning that this bill will mandate a medical product while at the same time take away medical freedom. This bill does not take into consideration a person's medical history, their family's medical history, risk factors and or level of understanding of the procedure mandated. Vaccines are a pharmaceutical product that can cause injury and death in some people, and are contract indicated in others. The United States government has paid out more than \$4 billion dollars to vaccine victims through the National Vaccine Injury Compensation Program. Vaccinations have inherent risk and therefore there should be informed consent and medical freedom to chose what is best for each individual person. Medicine is not a one size fits all and it should not be approached as such.

Sincerely,

Maria G.

Concerned Oregonian

From: ceciliagmiami@gmail.com
To: [JWMHS Exhibits](#)
Subject: Medical Freedom
Date: Tuesday, April 23, 2019 2:45:29 PM

My name is Maria Gonzalez from Ashland, Oregon and I oppose HB3063 and I urge you to do the same.
Medical Freedom and Education are not issues to play around with.

This is the United States of America!

We the citizens have spoken and demand to be heard now or you will hear us loud and clear on Election Day.

From: [Marie-Christine Lhomond](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Tuesday, April 23, 2019 8:30:12 PM

Hello,

My name is Marie-Christine Lhomond, I live in Eugene, OR. I am writing about HB3063 which is scheduled to be heard this morning, Wednesday April 24th .

I'm am respectfully urging you to vote NO on this bill or any amendments that will limit parental rights.

Thank you.

Respectfully yours,

Marie-Christine Lhomond

Sent from [Mail](#) for Windows 10

From: [Mariko Korican-Pentagram](#)
To: [JWMS Exhibits](#)
Subject: HB 3063
Date: Monday, April 22, 2019 12:03:52 PM

PLEASE OPPOSE HOUSE BILL 3063

I feel strongly that the government has no right to make medical decisions for parents and their children. By taking away the non medical exemptions for vaccinations, the government is taking away the parents right to make their own decisions regarding the health of their children.

This Bill will also take away the right to an education for 31,521 students in Oregon and many more children in the future. American parents should have a right to exercise their free choice regarding their children's health as their religion or philosophical beliefs dictate.

HOUSE BILL 3063 IS UN-AMERICAN!

PLEASE DO NOT SUPPORT HOUSE BILL 3063

VOTE NO ON HOUSE BILL 3063

Thank you! Mariko Korican-Pentagram
Eugene, Oregon



2/27/19

Committee Members,

I oppose HB3063.

My name is Marina Ray and I am writing because I am strongly AGAINST HB3063. My family and extended family all live in Oregon. This is our home. For many years I was a senior counterterrorism analyst for the Federal Government. I am now a Speech Language Pathologist working in the public schools.

There is a current focus to protect the most vulnerable and immunocompromised with this bill, but the truth is I BECAME immunocompromised from vaccination. No one is trying to protect me, my 19 month old baby boy, or the countless children who have suffered serious health conditions from vaccinations. Vaccines are NOT one size fit all. The situation is way more complicated than that. While they may be safe for some, they are NOT safe for all. These children also need to be protected who are genetically susceptible to vaccine injury. Who is advocating for them? I plead with you to change your position and be an advocate for these children as well. Vaccine injury is REAL and NOT RARE. It happened to me.

This is my story:

As a young adult in my mid 20s I received several vaccines when I worked for the Federal government in preparation for serving overseas in Iraq. I was young and naive and I didn't know what the ramifications could possibly be. I remember going back in for more shots and the nurse had not recorded previous shots I had received, so I received extra doses of the Hep B vaccine.

Shortly thereafter I came down with a severe immune chronic condition. This morphed into other chronic inflammatory immune conditions as well in the months to come.

I had been incredibly healthy running 5 miles a day. There was NO ONE in my family with these conditions. They came out of nowhere. This was not just "a coincidence." For years I have heard doctors call me a "weird duck" as they scratch their head.

These health problems have affected my whole life in every possibly way- physically and financially. It is also a lonely road telling my story as very few believe that you can be vaccine injured. The feelings of loneliness are intense. I now wish I could go back in time. I wish that I never worked for the CIA, served in Iraq and overseas at the Embassy in Amman as this led me to receiving these vaccines which changed the course of my entire life.

Even though my doctor does not believe I should EVER receive any more vaccines I am unable to receive a medical exemption in Oregon for myself or my 19 month old even though on the CDC website it says that if there is family history of "immune system problems" your child should not get an MMR vaccine. I just went on Friday 2/9/19 to talk to my doctor about this and "there is nothing she can do."

Having both nonmedical and medical exemptions available in Oregon allow families to make the best decision for their healthcare, between them and their doctor, based on their family medical history and religious and philosophical values

In essence getting rid of non-medical exemptions means getting rid of ALL exemptions since it is impossible to get a medical exemption in Oregon. Please note, while I think the medical exemption criteria certainly needs to be broadened, I do not believe that medical exemptions should be the only reason to not receive a vaccine. People should have the freedom to choose what goes into their body for BOTH philosophical and religious reasons as well, especially since MANY vaccines are made from aborted fetal cells. Religious freedom is a crucial right that needs to be protected.

Oregon already has a high vaccination rate and this is not necessary. The MMR rate is over 95 percent. The current module IS Working. Anyone who says otherwise, I have to believe, has a different agenda.

There is a current focus to protect the most vulnerable and immunocompromised with HB3063, but the truth is I BECAME immunocompromised from vaccination. No one is trying to protect me. I should not be put to the slaughter nor my 19 month old baby boy, because of fear, when the true unvaccinated rate for K-12 is 2.6 percent according to the OHA. We need to be protected too. Taking away our freedom is not the answer.

I do not believe that Representatives Greenlick, Wilde or Schouten have my best interest at heart. They should not be allowed to make decisions about my healthcare. Parents have the right to be concerned that 20 years ago there were about 20 vaccine doses on the schedule and now about 70. This is of valid concern. There have been no double blind placebo studies on the cumulative effects of the Current CDC schedule. The synergistic effects of all these vaccines have not been adequately studied for safety and more continue to be added.

Vaccine injury is real and not rare. I have two masters degrees, one from an ivy league school, and I am sick and tired of being told that things are “a coincidence.” This is happening over and over where people are becoming severely sick and developing chronic health conditions from vaccines and people have the right to a well designed vaxxed vs. unvaxxed study which has never been done. This is not just a coincidence and the dismissing of people’s stories needs to stop. By their very nature vaccines are meant to create an immune response and for some people with genetic predisposition vaccines are not safe. For these people, such as myself, Severe Health conditions are triggered. **THESE PEOPLE NEED TO BE PROTECTED TOO.** I am also sick of reading in comment sections re:vaccines that “at least” the person who experienced dreadful side effects from a vaccine “is not dead.” Oh brother. Living with a severe chronic disease is absolutely awful in about every possible way and I don’t wish it on anyone.

The idea that Greenlick would cavalierly say that students who don’t get fully vaccinated should be homeschooled is atrocious. I went to an Ivy league school and my child has the right to go to one as well. This is EDUCATIONAL SEGREGATION. We should be better than California and this should not happen here in Oregon.

There are some parents who don’t think that their child should have HPV or HEP B if they are not sexually active yet. They might have the majority of vaccines but not all. That is their right. My UC Berkeley trained doctor doesn’t think rotavirus is necessary anymore, for example.

Regardless, my child has the right to a decent education like every other child. This “outbreak” was not started in schools, but from someone who traveled from overseas. Children should not

be punished due to fear mongering. Again, the concern is on protecting the most vulnerable but my child and I are not protected in the process! Many outbreaks actually start in VACCINATED populations. The idea that the unvaxxed are the threat is NOT BASED ON SCIENCE OR RESEARCH.

My child cannot spread what he does not have! On the contrary, the first week I went back to work from maternity leave, my baby got RSV in daycare. Should that child be sent to a desert island as well? Every week my child is getting roseola, fifth disease, colds, fevers, rashes, hand foot and mouth from daycare. Should those children be punished as well? When will this stop? The CDC schedule keeps growing and diseases keep mutating. We can't vaccinate against every single one. In 10 years will there be 150 vaccines on the schedule?

And where is the recourse if there are vaccine mandates? I can't sue the vaccine companies. And if I stage a rebellion I am at risk of losing my child to DHS. So people will be "controlled" and put between a rock and a hard place. This is not right. This is COERCION and against the Nuremberg code. We live in a society where women have the "right to choose" to kill their babies (which certainly affects the life of the baby) and can also decide death with dignity, but I can't decide what I inject in my own body? This is pure crazy.

Trust me, if vaccine mandates are passed, you will have people going underground and feigned compliance. This is not the answer. Raising the MMR rate from 96 percent to 98 percent isn't going to solve your problem. Live virus vaccines shed and you can also get measles from the MMR. The immunocompromised like MYSELF or young infants still need to take precautions. This needs to be done against the threat for any disease.

Additionally, this bill is bad for women. Democrat lawmakers are constantly talking about womens' rights and women's equality. But WHO will be forced to stay home to homeschool? It will be women. Thousands of women will have to stay home to homeschool. This bill is NOT FAIR to women and punishes them. I have spent years building my career to be on an equal footing with men. Furthermore, due to my own health problems that were caused by vaccines and medical bills, we cannot afford for me to not work. If you truly care about women, women's equality, and children, like you say you do, you will not support this bill.

I oppose HB3063, HB2783, as well as future legislation that mandates vaccines. Vaccine mandates are discrimination. They take away religious freedom. And they discriminate against those who have developed serious health conditions from vaccines. Saying that people can choose to not vaccinate and then be homeschooled is NOT A CHOICE. THIS IS CALLED COERCION. If this bill is passed, the message is that legislators don't care about a huge part of the population that have been maimed from vaccines or who have family members who have been, and people will be forced to go underground.

I plead with you to remove your sponsorship of this bill. I have a right to be protected too as well as my baby boy.

Thanks,

Marina Ray
Portland, OR



From: [Marina Smith](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063 (opposed)
Date: Tuesday, April 23, 2019 8:53:49 AM

I am writing today to strongly oppose HB 3063.

As a parent and a healthcare provider, I believe that medical decisions should be made by parents and their doctors, NOT by the government.

Many, many children who could be harmed by vaccinations do not fall under the umbrella of a medical exemption and are using these philosophical exemptions for medical reasons. My own children, who both have chronic Lyme disease, fall into this category. Both their Lyme doc and their pediatrician have been very vocal about avoiding certain vaccinations. One of those doctors also encouraged me to do the DTaP, which both of my children have received. We have made decisions together that should be respected.

And most importantly, as a medical provider, the idea of "first do no harm" is something that I has always directed my own treatments for patients. The CDC says that 54% of children have a chronic illness; these rates have climbed in direct relationship with the addition of childhood vaccines. How can we not look into this before we *mandate* these products, *when the company that makes them still takes NO responsibility when they harm children?!*

Please DO NOT SUPPORT this bill!

Please DO put pressure on pharmaceutical companies to get fetal cell fragments and glyphosate out of vaccines!

Please DO find funding for *independent* studies that use a true control group and look out at least 3 years.

Parents want safer vaccines; if vaccines can be made more safely, more parents will want them for their children.

Sincerely,

Marina Smith

From: [Marion Freet](#)
To: [JWMHS Exhibits](#)
Subject: Public testimony against HB 3063
Date: Tuesday, April 23, 2019 10:25:32 PM

Dear Legislator,

I am writing to ask you to oppose HB 3063. This is a poorly written bill that segregates children and removes the necessary process of informed consent.

There is no measles epidemic. If you look at graphs of measles cases in the state of Oregon over the last 10 years, you will see this for yourself. Additionally, we are already at over a 95% MMR rate for the state of Oregon so we already have reached the threshold for herd immunity.

Vaccines have risks. The Supreme court ruled that vaccines are “unavoidably unsafe” recognizing that there are risks associated with vaccinations. Where there is risk, there must be choice. How can you mandate that a child be vaccinated when there are known risks to the vaccinations? The media, pharmaceutical companies, and many medical professionals say that “the science is settled” yet they refuse to look at science that shows that there is harm done by vaccines. I believe that you and all the other legislators on the ways and means committee were presented with many safety concerns and scientific evidence that countered that slogan. I ask you to truly read these documents. I ask you to consider the fact that the pharmaceutical companies have **NO LIABILITY** for the vaccinations they make. I ask you to consider if vaccines are all perfectly safe, then why has the Vaccine Injury Court payed out over 4 **BILLION** dollars to those that have been vaccine injured?

The medical exemptions listed are so strict that the children that have been vaccine injured and whose pediatricians have responsibly given them medical exemptions, so they are not injured further, will not be eligible for exemptions?!! This is insanity.

Do you really think that most of the parents who currently have exemptions are going to vaccinate their children because you decide to pass this bill? I can tell you right now that most of us will not. We will take our children, our taxes and our businesses to another state. We will not put our children at risk because of your law. This state will lose millions in revenue for the schools.

And those who stay because they cannot afford to move (think minorities and low income) will have to homeschool their children. This is discrimination! And you will segregate them for this? Perfectly healthy children whose parents chose not to get the Hep B vaccine (for example) because the risk of the vaccine outweighs the benefit (toddlers, infants and school aged children are not having sex or using IV drugs) will be excluded from participating in any activity at a school but kids who are Hep B positive will be allowed to attend. This makes absolutely no sense!

I implore you to really think about what you are doing if you vote yes on this bill. Please stand up for the children and autonomy over our own and our children’s bodies! Vote no on HB 3063.

Respectfully,

Marion Freet, RN, BSN, mother and Oregonian
Carver, OR

Sent from my iPad

From: [Masha](#)
To: [JWMHS Exhibits](#)
Subject: Oppose HB 3063
Date: Wednesday, April 24, 2019 11:34:13 AM

Hello my name is Mariya. Im mother of 4 kids. One of our son got all vaccinations until 2 years. But now i see the result from those vaccines from that day when he got vaccinations especially MMR he got Autism. So sad now. Other our 3 kids didn't got any vaccinations and they healthier and smarter than that who got vaccinations.
My child
My choice
I oppose HB 3063

Sent from my iPhone

From: [Marnie Teston](#)
To: [JWMHS Exhibits](#)
Subject: Testimony in opposition to HB 3063
Date: Tuesday, April 23, 2019 8:01:31 PM

I am writing to express my opposition to HB 3063 and amendments -13, -18, -49

All children of Oregon deserve equal access to education.

Thank you,
Marnie Teston
Albany Oregon

From: [Marianne Parshley](#)
To: [JWMHS Exhibits](#)
Subject: In favour of HB 3063
Date: Monday, April 22, 2019 7:47:08 PM

Dear SubCommittee of Human Services:

I am writing as a primary care physician, parent and friend of people who will be or have been impacted by the presence of unvaccinated children in their school classrooms. I urge you all to SUPPORT HB 3063 which would remove the non-medical exemptions for vaccinations required if students are to attend public schools.

Although I believe in the right to choose by adults, I am very concerned about how that impacts the vulnerable. In this case, it is not even about removing choice to vaccinate or not by parent. It is about protecting those children and adults who have no choice and can not be vaccinated because of medical conditions. If exposed to vaccine preventable diseases in the public school setting, these medical vulnerable children and adults (including pregnant women) are highly likely to acquire the illnesses brought in by the unvaccinated to the school community. Often this results in a serious medical problem resulting in weeks of hospitalisation and potentially death. A young friend of mine on anti-rejection medications spent weeks in the hospital because an unvaccinated child with chickenpox was in his classroom and passed it on. In the most recent epidemic of measles, an even more highly infectious illness, children were being exposed in classrooms, outpatient clinic waiting rooms, and other public places by those whose children acquired the measles and then exposed others. It is only by luck, grace and a rapid response by the county and state health authorities that no child became so ill they died (1 in 1000 with measles do) or had permanent brain damage (1-2 in 1000 cases do). Still this should be a lesson in the value of community immunity. Therefore, please support this legislation and allow those medically vulnerable students to be safe from vaccine preventable diseases in school, by preventing parents from bringing their kids into the public classrooms and exposing these medical vulnerable children because they choose not to vaccinate their children.

Marianne Parshley, MD FACP
Governor of Oregon Chapter of American College of Physicians

From: mmhill@email.com
To: [JWMHS Exhibits](#)
Subject: Vote NO on HB 3063
Date: Tuesday, April 23, 2019 8:20:05 PM

Vote NO on HB 3063.
I support parental rights and medical freedoms.

Marti Hill

From: grabinsky@frontier.com
To: [JWMHS Exhibits](#)
Subject: HB3063
Date: Tuesday, April 23, 2019 11:42:52 AM

Greetings,

Robert Kennedy Jr. and Del Bigtree won a case not long ago against DHS because for over thirty years DHS, who had been given oversight of vaccine safety, had done absolutely nothing!

Vaccines are not safe nor effective! The vaccine companies are making money off of harming people and killing them, and they know it and don't care! Vaccines are totally toxic, and they do cause autism according to the true science. Autism increased when the vaccine schedule was increased. The vaccine companies are lying to promote their agenda. Over \$4 billion dollars have been paid out to vaccine victims.

Have a conscience and don't be bought off!

Vote NO on HB3063.

Thank you.

Mary Grabinsky

From: [Masha](#)
To: [JWMHS Exhibits](#)
Subject: Re: Oppose HB 3063
Date: Thursday, April 25, 2019 10:38:31 AM

Hello Dear!

We are Popov family, our son seriously injured by vaccines. After all done vaccinations he got autism we don't have any compensation.

Please let to other our kids to be safe from toxic vaccines.

Please hear us.

All Oregon children deserve an education. Please oppose #HB3063. #NoOnHB3063

Thank you so much

Popov family

Sent from my iPhone

> On Apr 24, 2019, at 11:34 AM, Masha <mashapop@yahoo.com> wrote:

>

> Hello my name is Mariya. Im mother of 4 kids. One of our son got all vaccinations until 2 years. But now i see the result from those vaccines from that day when he got vaccinations especially MMR he got Autism. So sad now.

> Other our 3 kids didn't got any vaccinations and they healthier and smarter than that who got vaccinations.

> My child

> My choice

> I oppose HB 3063

>

> Sent from my iPhone

Greetings committee members,

My name is Mat Rapoza, a proud parent of two wonderful children that really enjoy their school. If this bill becomes law as written, it will not change my mind on how I, as a responsible parent, will make choices regarding vaccinations. This bill will not change the minds of many other parents either, resulting in an exodus of children leaving the school system.

I am hopeful that legislators understand what a “yes” vote actually means for this bill. A yes vote means that not only can my children not attend a public school, which my tax dollars pay for, but they can not attend a private school either. Not only that, but my children will also be banned from attending any kind of school plays, sporting events, outdoor school, or other school sponsored activities. As it stands, this bill leaves no room for compromise, and would easily become the most extreme law of its kind in the United States. What’s next, shall they be also banned from any other public space?

Why aren’t we talking about banning school bullies or children that threaten violence? These children are easily more a threat than my children, but no one is talking about banning them from school. Why aren’t we talking about banning educators, parents, staff, or any other adults from school property that have not been fully vaccinated? Because that is simply ludicrous and tramples on adult’s rights to freedom. But yet somehow, it is considered ok to trample on the rights of children to access education.

Simply put, this bill will effectively do little good, and in fact create a lot of harm.

There are some members here today that might be pressured to vote yes out of party loyalty. If that is you, but your conscience tells you that even this bill is going too far, I urge you to do the right thing, vote your conscience, and vote no on this bill. Thank you.

From: [Matthew Rubrecht](#)
To: [Rep Schouten](#); [Rep Hayden](#); [Sen Wagner](#); [Sen Heard](#); [Rep Nosse](#); [Sen Beyer](#); [JWMHS Exhibits](#)
Cc: [Sen Olsen](#); rep.billkennemer@oregonlegislature.gov
Subject: Vote No on HB 3063
Date: Wednesday, April 24, 2019 8:50:55 AM

Hello,

I am writing to voice my concern of HB 3063 regarding vaccinations. While I am pro-vaccine, I do not want the State of Oregon getting involved in my choices for my child. I want to be able to have freedom and consult with my personal doctor about what is the right course of action for vaccines. Freedom of choice is paramount to our State and our Nation. Please do not take this choice away from Oregonians. Vote no. Thank you

Matthew Rubrecht

Canby Oregon

From: [Meagan Bise](#)
Subject: Oppose HB3063
Date: Tuesday, April 23, 2019 9:06:52 PM

>>> OPPOSE HB3063 <<<

Quick Scenerio....

Three kids are walking down the school hallway.

Student A is immunocompromise, and unvaccinated for medical reasons

Student B tests positive for Hep B

Student C is unvaccinated for personal reasons, healthy, and carrying no contagious diseases

Who is the greatest risk for spreading disease?

----> NOT Student C!

>>> OPPOSE HB3063! <<<

This bill is overreaching, infringing on parental rights, and doesn't make any sense plain & simple.

Every child has the right to a good education, that doesn't depend on injecting their bodies with a chemical concoction that hasn't been proven to be safe for their particular bodies.

Why punish a perfectly healthy child?

>>> OPPOSE HB3063 <<<

Thank you for your consideration,

Meagan Bise

Concerned Parent

Supporter of Basic Rights

Tax Payer

From: [Megan Cook](#)
To: [JWMHS Exhibits](#)
Subject: Central Point, OR Opposed to HB3063
Date: Tuesday, April 23, 2019 8:18:04 PM

To the Joint Ways and Means Subcommittee on Human Services:

My name is Megan Cook and I am a resident of Jackson County. I have several concerns regarding the ethics of HB 3063 and the financial toll it will take on our state.

This bill will affect approximately 32,000 school-aged children. Educating our children is foundational if we are trying to maintain and improve our state's economy. If we want to bring high-paying jobs to this state and keep them, we need to have qualified candidates for those jobs. This bill holds education hostage unless individuals decide to comply with vaccinations that potentially go against their religious or philosophical beliefs.

A lower attendance rate for schools translates into less money for the schools. There are two ways in which this bill will reduce attendance rates for schools across Oregon. First, if students that are currently enrolled in public schools transition to a homeschool setting, public schools will lose funding for those students. Second, there are currently many homeschool students that dual enroll in public schools so that they can have access to after-school and sports programs that the school district provides. This bill will prohibit homeschool students that are not fully vaccinated from participating in these programs, resulting in even lower attendance rates and more financial losses for schools.

If there is a decline in attendance at public schools, educators will lose their jobs. The amount of funding a school given school receives is based on attendance. If there is a decrease in funding, educators will need to be laid off in order to keep the school district solvent. Educators are already dissatisfied with the current school funding; how do you think they will react to the funding changes if this bill passes?

Infrastructure and business policies will need to be developed for public events and daycare facilities. While public schools already have the infrastructure in place to track vaccination records of students, there is currently no system in place to track vaccination records for school-aged individuals attending a football game or graduation ceremony. HB 3063 specifically states in the adopted Amendment 13 that a "child who is not immunized may not attend in person any school-related activities, events, or meetings in which the child will share the same physical space as other individuals." Will it be necessary then to have identification that signifies an individual has been immunized? If that is the case, who pays for said identification? What about non-immunized individuals that have come from out of state to attend a family member's graduation ceremony or performance; will they need to fill paperwork to receive an

approved exemption or will they also be excluded?

With regards to public and daycare facilities that are affected by this bill, there is no precedent for how to deal with a situation like this. The Fiscal Impact Report that was submitted for this bill on 3/18/19 fails to address this portion of the bill entirely and there is also no clarification in the text of the bill regarding who is responsible for enforcement. Will there be forms that need to be filed or identification cards that need to be carried? And will the state need to dedicate law enforcement resources to ensure these facilities are compliant? In any case, there will be costs for creating the infrastructure and enforcing these regulations. As it stands, there is not enough information in the bill regarding this topic to sufficiently determine what the financial impact will be on the state and on the citizens.

Two-income families and single parent families will not be able to find childcare for their children, forcing them to make tough financial decisions. This bill will leave no childcare options for families that do not have a stay-at-home parent. They will need to either: (1) leave the state, (2) their children will stay home in isolation and not be educated fully or (3) in dual income families one parent may choose to stay at home with children and suffer the financial repercussions.

This bill will place undue financial hardship on many citizens of Oregon and state monies will inevitably need to be diverted from other important programs to fund this unnecessary legislation.

Sincerely,
Megan Cook

From: [Megan Stuck](#)
To: [JWMHS Exhibits](#)
Subject: Testimony for hb3063
Date: Tuesday, April 23, 2019 10:44:23 AM

I am writing today to oppose HB 3063. I am a constituent, mother, and educator. There are many concerns I have for this bill and I won't go into all of them but number one is it goes against parental rights and medical freedom. It discriminates against families and coerces them to fully vaccinate or not be able to attend public, private or charter schools. Even those who choose to homeschool would not be allowed to participate in special classes, sports, special services in their local public school which is their right. I believe all children should have access to an education regardless of vaccination status and this bill will deny around 31,000 children access to a free and fair education.

Another big concern of mine is that it also goes against religious beliefs. One big reason many people choose to not vaccinate is their pro-life beliefs. Certain vaccines (MMR, Varicella, MMRV, DTaP-IPV/Hib, Hep A, and more) were made with the use of aborted fetal cells. When you remove non-medical exemptions you are forcing people to go against their personal religious beliefs, which should be protected.

My family has used the religious exemption due to our strong pro-life Christian beliefs and we also attend a private Christian school. Because this bill also includes private schools and wants to take away the religious I would have to tell my kids they can't go to their Christian school because of our Christian beliefs. How does that even make sense? This is not right!

This bill is unnecessary. Per OHA, all Oregon kids in school are at or above the "herd immunity" threshold. What we have now is working. Our vaccination rates have not dropped in Oregon in the past 20 years. Oregon has a very high and above national average vaccine rate. 94% statewide and continues to go UP according to the OHA. Currently only 2.6% of all school students are unvaccinated. Not 7.5% which the media and even doctors are saying. Per OHA roughly 50% of those with an exemption on file are fully vaccinated for communicable disease, many opting out of one Hep A or Hep B dose. Oregon school children have 95.8% vaccine rates for MMR and 97% for 7th graders. Much misinformation and fear is being spread right now about the measles as a way to get people to support mandates like these but when you look at all the numbers there is no emergency or worry here in Oregon. Also a very similar bill was also brought up 4 years ago and thankfully was opposed yet still we have had no major outbreaks due to a lack of mandatory vaccinations which would warrant this bill.

Vaccines are not one size fits all. They have been ruled "unavoidably unsafe" which means there is a risk. When there is risk there needs to be choice. We as American citizens deserve medical freedom. Don't you want that for yourself and for your families. This is a slippery slope once it is started.

I hope you will truly listen to both sides, look at the science on both sides and realize there are many concerns and it comes down to informed consent, medical freedom, and parental rights, which I hope you all support. I strongly urge you to oppose HB 3063.

~Megan

From: [Megan r](#)
To: [JWMHS Exhibits](#)
Subject: Testimony vote no on HB 3063
Date: Tuesday, April 23, 2019 10:58:48 PM

When my son was born June 15 2016, he was a bright bundle of sunshine full of joy and smiles until after the day he was vaccinated 2 months later causing him autism and adhd. I took him in for his first set of vaccines not thinking anything would ever go wrong until the next morning he woke up. He never got sick with the vaccines only sleepy as usual but little did we know the next month to come would be nothing but tears. Our son stopped excreting. Completely. For a whole month he could not go on his own. It got so bad he was hospitalized and his tummy turned purple. We had to give him an at home enema because even the hospital wouldn't help us. We were able to find a natural cure which helped him over time thankfully. Just as you would think things were getting better we noticed more symptoms that were not right. He was acting as if he had little seizures with his eyes rolling in the back of his head. He stopped smiling and begin to cry non stop. We figured this could be colic but it still just did not match up. But every doctor we went through wanted to give him more vaccines pushing me to the point that I didn't want to return to one. I just knew something wasn't right. My once lively baby became numb. As if there was no emotion. As he got older he alway wanted to be alone. He wouldn't give eye contact did not like close encounters with anyone. As his speech should have been developing he couldn't talk it was a lot of jibber jabber and jumbled up words. Making us think of taking him to speech therapy. He never wanted to smile and would slip into deep depression. I felt as if he was not "there" in his head. He had insomnia as well and he never wanted to eat. My once bundle of sunshine was almost as if he was a robot with no emotion. All of this happened the morning he woke up after his vaccines and never was the same since. If this bill was to pass it would rob the American people and parents of these children of their choice to choose as they please with their children, but it would rob children of a productive happy lifestyle that could better their lives and futures and keep from these horrible mental illnesses arriving in their lives stealing all joy and laughter from them, their futures and their families. Please vote NO on bill HB 3063.

Thank you
Megan Youngs
Sent from my iPhone

From: [Megan Ziskovsky](#)
To: [JWMHS Exhibits](#)
Subject: Opposition to HB-3063
Date: Monday, April 22, 2019 10:38:31 PM

Dear Legislature & Joint Subcommittee on Human Services,

I'm writing to voice my strong opposition to HB-3063.

I am a physician in private practice in Portland and have served thousands of Oregon families here over the past 14 years. I am a mother. I am a concerned citizen who advocates vaccine safety and who is disturbed that there are not more studies done on vaccine safety before they are injected into our babies and children. I believe all children should have the right to an education in our Oregon schools. And quite frankly, I am appalled that medical interventions and requirements could be decided by the legislature rather than by physicians and informed parents after communication with their healthcare providers based upon what is best for that individual child.

Vaccines are touted to be perfectly safe and yet are not held to the same safety standards as other pharmaceuticals. I have not seen any double-blinded placebo controlled studies on vaccines and this is very concerning. We live in a health conscious community and yet responsible and well-meaning parents are having their children vaccinated with vaccines that neither they themselves nor their doctor know very much about. We all want nothing more than for our kids to be healthy.

Sadly, since my very first year in private practice in 2006, I have seen firsthand that vaccines given to help prevent diseases can cause injury in susceptible individuals. We still do not understand exactly why certain patients are susceptible to vaccine injury but we do know that injuries happen. And when vaccine injuries happen, the pharmaceutical companies that manufacture them are not held responsible for these injuries. The National Vaccine Injury Compensation Program has awarded approximately \$4.0 billion dollars in compensation since the program started in 1998. These funds come from a trust fund supplied by a surcharge on vaccines. These settlements happen outside of the regular court system and in a special vaccine court. Does this not seem concerning that vaccine injuries cannot be handled in our regular court system.

Today's children are the sickest generation this country has ever seen. Sensory processing disorders, food allergies, asthma, learning disabilities, developmental delays, autism and autoimmune conditions are all on the rise. As a practicing physician, I am concerned that it is no mere coincidence that our children's health has declined as the number of recommended vaccines has increased. It is recommended that my son get over 3 times as many vaccines as I received as a child in order to be fully vaccinated. When will this stop?!?!

Also concerning to me is that HB-3063 deprives children of their right to an education. The parents of my patients who vaccinate their children on alternative schedules or not at all are well educated and informed with their decisions. I do not think that these parents will change their minds, put aside all of the information they have gathered and the information they have received from their doctor's and fully vaccinate their children. But if their children cannot attend Oregon schools and parents do not want to homeschool then they will be forced to move elsewhere. Oregon schools will loose money. California has been through a similar

thing when they passed SB-277 which mandated vaccines to enter schools. I have a colleague in private practice in California who was forced to pull her kids out of schools when this happened and she has good reason to chose not to fully vaccinate with her history of severe auto-immune issues in her family. I do not think Oregon should follow in California's footsteps.

If keeping Oregon's kids healthy is really the focus of this bill then I urge you as a physician, mother and concerned citizen to please help push for vaccine safety studies, allow physicians and parents to jointly decide what is the best vaccination plan for each child and allow all kids to have access to an education in our Oregon schools.

Thank you for reading this & for your consideration,

Best Regards,

Megan A. Ziskovsky, DC, FICPA
Chiropractic Physician

Megan A. Ziskovsky, DC, FICPA

Center for Chiropractic & Pain Rehabilitation
3241 NE Broadway
Portland, OR 97232
www.center4chiropractic.com
503-282-8582

From: [Megan](#)
To: [JWMHS Exhibits](#)
Subject: No on HB 3063
Date: Tuesday, April 23, 2019 9:03:45 AM

Please vote NO on HB 3063! Where there is risk there must be choice. I support parental rights.

Megan

From: [Meghan Larivee](#)
To: [JWMHS Exhibits](#)
Subject: testimony in opposition of HB3063- please protect medical freedom and oppose HB3063
Date: Monday, April 22, 2019 7:35:58 PM

Dear Oregon legislators and specifically those of you on this special joint ways and means committee

Thank you for your time and commitment serving your district and all Oregonians. I understand you are in the midst of a grueling legislative session and working overtime to ensure that only sound legislative bills become law.

I write to you as a scientist with a background in both immunology and neurology (I hold both a masters and doctorate degree), a mother, and a citizen. I urge you to promote INFORMED CONSENT and support MEDICAL CHOICE including that of religious freedom and oppose HB 3063

I share the same goal as you from a public health perspective and wanting to protect the health of Oregon's children, however vaccine mandates are not an effective avenue to reach this goal. Vaccines are medicine- and medicine is not "one size fits all" what if we said everyone needed the anti-biotic penicillin? yes, it's saved millions of lives and it is/was an incredible addition to the field of medicine, yes it's "safe and effective," BUT it is not for everyone. People still have reactions and people still have negative side effects and ultimately people still have a choice with regard to medical procedures. Could vaccines become like antibiotics, where they are over used and lead to negative public health consequences?

We are NOT in a state of emergency! Oregon has high vaccination rates. You have heard that the non-medical exemption rates in Oregon are 7.5%, but that number is highly misleading. That number is for kindergarten students only. The non medical exemption rate for all grades K-12 is 5.2%, an entire 2.5% lower than the kindergarten rate. This is a far more important number as it represents all students in Oregon school. More importantly, of that 5.2%, half of those students, 2.6% are selectively vaccinating, in other words they have received *most* of the required vaccines. For example, a student may be vaccinated for every dose of the polio, diphtheria, pertussis, measles, mumps, rubella, chicken pox, and Hep A, but their parents decided not to vaccinate them against Hep B (because they are in elementary school and not likely to engage in sex or IV drug use) so the parent chooses a non-medical exemption for this vaccine. That student is still part of the 5.2% of what Oregon Health Authority considers unvaccinated/part of the exempt students. As another example, a child may have every dose of every vaccine except the 5th dose of DTaP and that child would still be a part of the 5.2% that OHA considers unvaccinated/part of the exempt students.

Again, while I support the public health goal of protecting the health of our children, I do not support legislation that ultimately removes INFORMED CONSENT while removing both parental and physician choice in mandating vaccines. I certainly do not endorse mandating vaccines for illnesses which are not highly contagious (Tetanus, HepA, and HepB,) and further mandating vaccines for illnesses that are so rare around the world that they are considered eliminated in the US (Polio, Rubella, Tetanus, Diphtheria) We are certainly not in a state of emergency for those illnesses.

Please continue to focus your desire to protect children by supporting informed consent,

removing pharmaceutical company influence from policy decisions, and allowing parents and patients to make medical decisions with their doctor. Please stand up for choice in the name of medicine

Thank you for taking the time to read my email and listen to my concerns.

Sincerely,

Meghan Larivee
Hood River, OR

From: [Meghan Waters](#)
To: [JWMHS Exhibits](#)
Subject: Testimony for HB 3063
Date: Tuesday, April 23, 2019 4:58:18 PM

I am an Oregon constituent living in Portland. I am also a mother of a toddler and a small business owner in the Portland area. I urge you to vote **no** on HB 3063. As a medical professional, I did my due diligence on vaccine research before deciding which vaccinations to administer to my son. My largest concern is the amount of aluminum in each vaccination. There has never been a study or clinical trial of the safety of aluminum as an adjuvant in vaccinations as injected into the body. "Safe" levels of aluminum are no more than 850 micrograms per day, however, this number is not adjusted for body weight in reference to injecting children. Due to this fact, a newborn gets 17 times the recommended daily allowance of aluminum on their first day of life. Also, the recommended daily allowance of aluminum was determined from oral intake studies. Injection into the body and oral intake are two completely different modes of ingestion. Injection into the bloodstream bypasses the liver (involved in digestion) which generally filters any toxic substance before it enters the bloodstream.

My last point is that the cumulative affects of heavy metals in vaccinations has never been studied. When vaccination clinical trials for safety are conducted, one vaccination is studied at a time. However, this scenario is not realistic. Children do not receive one vaccine, the required number is 31 scheduled doses throughout a childhood.

Currently, pharmaceutical companies can't be sued for the side effects or medical repercussions from vaccinations. Due to this fact, I believe that they do not have sufficient incentive to conduct appropriate safety studies of their products, and this is why I have opted out of many vaccinations. If this bill is passed, I will decide to homeschool, or I will leave the state of Oregon. I have the financial ability to do this, however, not every family does. These families should not lose their ability to choose what is best for their child because of the lack of financial resources. Thank you for your time.

- Dr. Meghan Berninghausen, D.C

From: [Melanie Kebler](#)
To: [JWMHS Exhibits](#)
Subject: Support for HB 3063, Melanie Kebler, Bend OR
Date: Tuesday, April 23, 2019 2:29:50 PM

Dear Subcommittee Members,

I write in support of HB 3063 and the goal of removing non-medical exemptions for vaccination of school children from Oregon law. I am a mother of a young child and have serious concerns about the level of un-vaccinated children attending our public schools in Oregon and in Deschutes County. It is critical to the safety and health of all the children in our communities that we maintain a safe level of vaccination in the population, so that immunocompromised people, children who are too young to have had all their vaccinations, pregnant women, and other vulnerable populations are not put at risk of contracting deadly communicable diseases. It saddens me that there are a vocal minority of people who maintain that their "freedom" to choose not to vaccinate should be held above the safety and health of everyone in the community. If there is a legitimate medical reason a child cannot be vaccinated that can be verified by a doctor, that child should be exempted from the requirement under the law. Other than that, there should not be any exception to keeping our children healthy and free from the type of dangerous diseases we as a society should have eradicated decades ago.

I hope parents who are on the fence on this issue will turn to true, validated information to learn why vaccines are so important and how they are safe. One resource from here in Oregon is from a nonprofit called Boost. <http://www.boostoregon.org/parents-guide-to-childrens-vaccines>. Though education of parents is something I believe is crucial to preventing more outbreaks of measles and similar diseases, I also believe the legislature should be taking action to protect our children as well.

Please pass HB 3063 out of committee without changing the language that removes non-medical exemptions from the law.

Thank you,
Melanie Kebler
Bend, OR

From: [Melanie Rodriguez](#)
To: [JWMHS Exhibits](#)
Subject: Opposition to HB3063
Date: Monday, April 22, 2019 9:54:51 AM

I am a mother of two school aged children. Our family owns a small local business and I volunteer countless hours in our public school classrooms. We are opposed to HB3063. We believe no child should be restricted from access to public education.

My daughter loves her teachers and her school. She is on an IEP with a documented risk of social isolation. HB3063 would force her into an online education and unable to interact with her peers. This would be devastating to her mental health and jeopardize her academic and social progress. No parent should have to decide between their child's physical or mental health.

I believe any and all medical treatments should be decided between a patient and their doctor, including a risk and benefit analysis and decision. This should not be governed by legislature. Where there is any risk, however minimal, there needs to be true choice and informed consent.

I believe in science. I also believe that the beauty of science is that it's never settled. Medications and treatments are recalled by the FDA regularly. Peanut butter is harmless, until it isn't. We do better until we know better. I am not going to debate the value of vaccines or attempt to convince a parent to vaccinate or not because I truly believe that all parents love their children and want the best for their schools and communities. I know that those who opt out of one, some or all vaccines do not make that decision lightly.

Ten confirmed cases of measles is not an emergency. None of the listed past or current exposure sites are public schools in Oregon. None of the confirmed cases spread from Juniper Swim & Fitness or Mountain Air Trampoline Park in Bend, places that are popular with kids of all ages. Most schools have high enough vaccine rates to support herd immunity. These rates are posted publicly for all to see and form their own decisions about their personal health. Our current system is working. Oregon already has an annual Exclusion Day and protocol in place to handle a true outbreak. The last date of a reported measles case in Oregon was on March 22nd (over the 3 week incubation period ago) and there are currently NO exposure sites in Oregon.

Oregon has proven time and time again that the state is unable to provide appropriate care for it's youngest population. Our graduation rates are among the lowest in the country. Regardless of your stance on vaccine safety, our biggest crisis is improving our education system and keeping students in school. This bill is a distraction from more urgent crises.

This bill is not a partisan issue. I personally know parents of fully, partially and non vaccinated children in all party affiliations who oppose this bill due to its severe government overreach and discrimination/segregation of children. The sheer number of constituents opposed to this bill should be enough to give you pause.

I beg of you to put Oregon children first and oppose HB3063.

Thank you for your time and consideration,
Melanie Rodriguez

Bend, Oregon

From: [Melissa Norland](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063
Date: Monday, April 22, 2019 11:51:43 AM

To all serving on the Joint Ways and Means Committee,

HB 3063 threatens to drive a wedge between parents and their children.

Have you thought about how this bill will affect the older children, cognizant of what this bill actually is and how it will affect them? Our 12 and 15 year old boys are left to fret about being excluded from the schools they love and the friendships they have formed. These are connected kids. Healthy kids. Involved kids.

They are left to fret about being forced medicine in which is not thoroughly studied for safety against the entire mandated vaccine schedule, a medicine they know very well that their parents oppose. Our family does not, and never has, relied on the pharmaceutical industry to ensure our health. We study nutrition. We eat clean. We exercise. We trust in our body's ability to heal itself when able. We are not afraid to get sick.

What message are you sending our kids by supporting this bill? That their parents are wrong in how they have chosen to parent? Our beliefs regarding health are unfounded? The research we have done to make the choices we have is not valid?

The passage of this bill will take our 2 boys out of the Corvallis School District during a critical time in their social and educational development. Currently 7th grade 4.0 GPA, 3 sport athlete and accomplished violinist. The other, a 10th grader with a 3.8 GPA and an elite level triathlete, currently a 3 sport varsity athlete at Crescent Valley High School.

We are educated. We are informed. We are healthy. We are pro choice.

Please consider voting NO on HB 3063

With gratitude,

Melissa and Trevor Norland
Corvallis, Oregon District 16

From: [Melissa Fothergill](#)
To: [JWMHS Exhibits](#)
Subject: No on HB3063
Date: Tuesday, April 23, 2019 9:12:02 PM

To whom it may concern,

I vote no on this bill. As a government you should have no control over the personal decisions I make for my children. Where there is a risk, and there is, there should be a choice. By allowing this bill to pass you are forcing people into decisions they do not agree with and punishing children. Segregation is something America has preached and preached about overcoming and here we are in Oregon, year 2019, starting a whole new war.

- Melissa Fothergill

From: stylistm555@gmail.com
To: [JWMHS Exhibits](#)
Subject: No HB3063
Date: Tuesday, April 23, 2019 10:25:34 AM

I do not agree with government controlled medicine. I do not agree to inject my child or the rest of my family with untested, liability free medication. Nobody on this earth knows my child or what's best for my child better than I do. I've raised 2 children successfully without the state legislatures or OHA's unwanted assistance, and my grown children are doing amazing. I'd like to continue that goal with my youngest without having to leave our home state to do so. This is an over reach. Profits are NOT above our children. Focus on the REAL problem.....our school dilemmas and our foster care system CRISIS!!! This bill and alleged "emergency" is a waste of time, money, and a complete unnecessary distraction from the important issues at hand.

Melissa Moen

Sent from my iPhone

From: [Melissa Stanley](#)
To: [JWMHS Exhibits](#)
Subject: No on HB3063
Date: Tuesday, April 23, 2019 1:58:40 PM

While I am pro vaccine I am also pro choice-in all aspects. HB 3063 removes choice and violates our right to body autonomy. Please vote NO on HB 3063.

I want everyone to have the same rights-those who want every vaccine and on the CDC schedule, as well as those who want to opt out of a few or many. Please vote no and preserve our medical freedom.

Where there is risk there must be choice.
Please preserve parental rights.

Sincerely,
Melissa
Salem, OR
Sent from my iPhone

From: ccsloanmommy@gmail.com
To: [JWMHS Exhibits](#)
Subject: NO ON HB 3063
Date: Tuesday, April 23, 2019 6:32:21 PM

VOTE NO ON HB 3063
I support parental rights!
Melody Sloan

From: [Melyssa Williams](#)
To: [JWMHS Exhibits](#)
Subject: Hb3063
Date: Tuesday, April 23, 2019 8:25:45 PM

Where this is risk there must be choice.

Please vote no on HB 3063
Sent from my iPhone

From: [Merri Sjaan Pylkas](#)
To: [JWMHS Exhibits](#)
Subject: HB3063
Date: Monday, April 22, 2019 4:52:43 PM

I am writing this as I am unable to make the trip to the capitol for this vote. Please vote no on HB3063 and let us keep our first amendment rights. Please do not vote to throw out our constitutional rights and freedom of religious beliefs when it comes to vaccines.

Sent from my iPad

From: [Micayla Card](#)
To: [JWMHS Exhibits](#)
Subject: Vote No on HB 3063
Date: Tuesday, April 23, 2019 7:38:15 PM

Vote NO on HB 3063!
Where there is risk there must be choice!

Oregon is AT herd immunity with 95% vaccinated for measles. There is no justification for stripping us of our religious, parental and medical freedom rights. Parents will not vaccinate; they will their kids out of school and either leave the state or continue fighting in Oregon. If passed, you can expect the vaccine issue to continue to consume your time.

From: [Michael Eubanks](#)
To: [JWMHS Exhibits](#)
Subject: OPPOSE HB 3063
Date: Monday, April 22, 2019 2:08:08 PM

I have great concerns regarding HB 3063. Not only does this bill remove the rights of parents to decide which, if any, vaccines their child receives, it negates the option of delayed vaccination chosen by each parent to fit the medical needs of their individual children. There is currently far too much conflicting evidence in the medical community regarding the safety of vaccines to impose such a mandate. Even the Supreme Court in May of 2011 ruled vaccines to be "unavoidably unsafe".

This proposed legislation ignores and eliminates the fundamental American value of choice as well as a doctor's ethical obligation to provide their patients informed consent. If we are not free to make informed, voluntary decisions about which pharmaceutical products we are willing to take, then we are not free in any sense of the word. If this bill passes it will set a very dangerous precedent and there will be no limit on which individual freedoms the State can remove in the name of the greater good.

When there is a risk, as with vaccines, there must also be a choice.

Please OPPOSE HB 3063.

From: [Michael Framson](#)
To: [JWMHS Exhibits](#)
Subject: HB3063 HUBRIS----IGNORANCE BACKED UP BY OVERCONFIDENCE
Date: Wednesday, April 24, 2019 7:35:10 AM

To the Joint Ways and Means Human Services Committee,

HUBRIS--*IGNORANCE BACKED UP BY OVERCONFIDENCE*

ARE YOU LISTENING?

- • Dozens of parents testified at the Public Hearing about their children's vaccination injury. It doesn't seem to matter; next order of business vaccines are safe and effective.
- • 4 billion dollars have been paid out for vaccine injuries including autism and Sudden Infant Death, but it doesn't even matter!
- • 10 cases of measles-- and it's time to exclude 31,000 students from Oregon schools.
- • Punish the children; deny them the school setting in which they thrive. Isolate them from their peers. *Does anyone think that doesn't matter?*
- • Mandate vaccinations that are categorized as "unavoidably unsafe"² because in "the present state of human knowledge, are quite incapable of being made safe for their intended and ordinary use"
- • HB 3063 violates the Nuremberg Code principle of Informed Consent
- • HB 3063 violates UNESCO'S 2005 Universal Declaration on Bioethics and Human Rights.

We are in trouble when the **JOINT WAYS AND MEANS SUBCOMMITTEE ON HUMAN SERVICE** mandates products from an industry known for its greed having been fined over 38 billion dollars over 27 years for its criminal and fraudulent behavior.

When does it matter—when your child suffers a vaccination injury and it breaks them; and a parent is left trying to fix a child broken by their safe vaccinations. Too many children being broken by vaccination injuries, but it doesn't seem to matter, to anybody!

Is anybody listening?

Don't do this to Oregon's children. Education works; Coercion doesn't.

“There is a balance between benefit and harm. This is a value judgment, and **no authority** can make that judgment better than those who are offered the intervention. This is the general guiding principle in medical ethics, not specific to this debate.” *Karsten Juhl Jorgensen, MD., Deputy Director Nordic Branch of the gold standard of mainstream medical review, Cochrane*

Respectfully submitted,

Michael Framson
Medford, OR

Dear Senators and Representatives,

I am so impressed with your dedication to public health, and that you are continuing to allow for public testimony about this very important issue and bill, so that you can make your decisions with an open, investigative mind.

There are of course many sides to any issue. However, if we can strive to be on the side of values that we can agree on, like public health education, then we can all rise above our differences and live in a peaceful, democratic society. So, I greatly appreciate your efforts.

I would like to encourage you to explore how these amendments to HB 3063 will *still* give too much oversight, causing too much work overload, and put too many decisions about the complexities of medicine and school communities into the hands of the OHA, who really are not qualified or capable of handling it.

Not even an annual exemption waiver allowed by Naturopathic or Medical Doctors will solve all of the problems these amendments will create. Despite your valiant efforts to address a real public health issue, the whole thing is really just too much.

We can solve these public health problems another way.

Just think how much more could be accomplished through health education and community empowerment. By putting this much power into the hands of the medical and governmental authorities, we are forgetting the real strength of a democracy. We can empower the people by standing up for better health education. We can put our resources into better research and better health care so that the people do not feel that you've taken away their freedom and rights, but have come to an understanding with your help.

Let's work together as Oregonians and focus on public health education rather than mandates. Please put HB 3063 and its new amendments behind you with a NO and let's start focusing on education and democracy.

Sincerely,
Michael Givens
Happy Valley

From: [hilltrain](#)
To: [JWMHS Exhibits](#)
Subject: Vote NO on HB 3063
Date: Tuesday, April 23, 2019 8:22:46 PM

Vote NO on HB 3063

I support parental rights and medical choices remaining between a patient and their doctor.

Thank you,
Michael Hill

From: [Richard Bryan](#)
To: [JWMHS Exhibits](#)
Subject: Oppose HB 3063 97352
Date: Tuesday, April 23, 2019 8:24:36 AM

I oppose HB 3063. Do not pass!
Richard Bryan 97352

From: [Rick Gillaspie](#)
To: [JWMHS Exhibits](#)
Subject: HB3063
Date: Tuesday, April 23, 2019 3:17:13 PM

Dear Sirs

Please let it be known that I oppose this bill. Please vote No.

Richard Gillaspie

"If you want something you've never had, you must be willing to do something you've never done".
Thomas Jefferson

http://abcliveit.com/site/ABC_PrimeTime_Report.html

From: [Dr. Rick Kirschner](#)
To: [JWMHS Exhibits](#)
Subject: Testimony against HB 3063
Date: Tuesday, April 23, 2019 8:15:20 PM

Please vote no on HB 3063.

I walked into the Capitol building today and read this words inscribed above me:

IN THE SOULS OF ITS CITIZENS WILL BE FOUND THE LIKENESS OF THE STATE
IF THEY BE UNJUST AND TYRANNICAL THEN WILL IT REFLECT THEIR VICIES
BUT IF THEY BE LOVERS OF RIGHTEOUSNESS CONFIDENT IN THEIR LIBERTIES
SO WILL IT BE CLEAN IN JUSTICE BOLD IN FREEDOM

This immoral bill, HB 3063, is not just unconstitutional (4th Amendment) but it is a violation of American and Oregon values, it goes against the expressed will of the citizens of Oregon as we all learned last time around (I am referring to Elizabeth Steiner Hayward's previous attempt to force medical procedures onto Oregon citizens in violation of conscience and with no care for the well being of individual children who are already damaged by vaccines)

HB 3063 is so egregious that for the first time in my adult life (turning 70 in a few months) I can not conceive of any way that any sane reasonable decent functioning human being, or even someone with half a heart, could support this terrible piece of "legislation" much less introduce it. And yet here we are.

This bill needs to die. Any amendments at best are putting lipstick on a pig, and from what we've seen so far, it just makes it more obviously odious. The bill doesn't deserve all this time and energy and effort and anxiety for the families of 31000 children. The list of reasons to kill HB3063 is long. The damage it would do to our state is incalculable. And it already has placed a heavy burden on the lives of too many Oregon families threatened with segregation and loss of education for their children unless they submit those children to a medical procedure with liability free risk, all the risk falling on the families when things go wrong as they do. They won't submit. They don't consent. And we don't consent. Coercion like this is simply unconscionable. You have to know this.

This bill is a hammer blow against the social fabric of our state.

It is based on a manufactured crisis.

It is clear that the only winners are the industries that make or distribute or inject vaccines.

It is a fact that some children will be harmed by this bill, under the claim of protecting other children.

The bill chooses a favorite population (the immunocompromised) and then proceeds as if that is the top priority of healthcare, while creating another population of immunocompromised children because of vaccine injury. It then creates another population to be segregated from public spaces. This is so mean spirited that it is beyond comprehension to just about anyone who learns of it.

I assure you, voters will remember this issue. I will remember this issue. I will remind people of this bill and what happened with it. About the fast tracking and scheduling to prevent public involvement. About the near complete media blackout regarding its costs. About the way Representatives and Senators have disrespected the citizenry. We will remember. And word will spread. There will be a political cost just as there is a human cost.

Please be on the right side of history. Kill this bill.

Say no to segregation

Say no to damaging our social fabric any further

Say no to forcing families to submit to one size fits all government controlled medical procedures against their will

Say no to undermining the bedrock principle of medical ethics, informed consent.

Say no to the increased costs to the state, to the loss of public support for public education.

Say no to the loss of tax revenue as these families flee our state.

Say no to legislative arrogance, and government overreach and interference in our private lives.
Say no to HB 3063.

This is Oregon. We are better than this. And we deserve better than this. Please be better than this. Thank you.

Rick Kirschner
Speaker, Author, Filmmaker, ND, VNMI

From: [Rick Melner](#)
To: [JWMHS Exhibits](#)
Subject: Written Testimony for HB 3063
Date: Tuesday, April 23, 2019 8:11:15 PM

To Whom It May Concern,

I'm writing this evening to voice my strong opposition to HB 3063 and ask that you stand with me in my opposition. Mandating vaccinations or holding public/private education hostage is unconstitutional and just not the Oregonian way. I share the same goal as you in wanting to protect the health of our children but mandating vaccines is not the answer. Vaccines are not a one size fits all proposition.

Please vote no!

Rick Melner

541 678 2169

2423 NW Hemmingway Street

Bend, OR 97703

From: [Robert Kellum](#)
To: [Sen Johnson](#); [Sen Steiner Hayward](#); [Sen Winters](#); [Rep Gomberg](#); [Rep Smith G](#); [Sen Beyer](#); [Sen Frederick](#); [Sen Girod](#); [Sen Hansell](#); [Sen Heard](#); [Sen Manning](#); [Sen Roblan](#); [Sen Thomsen](#); [Sen Wagner](#); [Rep Holvey](#); [Rep McLain](#); [Rep McLane](#); [Rep Nosse](#); [Rep Piluso](#); [Rep Stark](#); [Rep Kotek](#); [Sen Courtney](#); [Rep Smith Warner](#)
Cc: [Blumenauer, Earl](#); [Senator Michael Dembrow](#); [waysandmeans budget](#); [Senator Jeff Merkley](#); [Sen MonnesAnderson](#); [waysandmeans budget](#); [Representative Barbara Smith Warner](#); [JWMHS Exhibits](#); [Rep Rayfield](#); [Sen Fagan](#)
Subject: Re: HB3063: WHY MANDATED VACCINATIONS IS BAD SCIENCE--FOR THE HEALTH OF OUR COUNTRY PLEASE DON'T PASS THIS BILL!!
Date: Monday, April 29, 2019 10:57:32 PM
Attachments: [VACCINATIONS DON'T GIVE IMMUNITY! 3-21-19 EMAIL TO WAYS AND MEANS COMMITTEE copy.pdf](#)
Importance: High

Dear Legislator,

The SCIENTIFIC basis for SERIOUSLY QUESTIONING the mandating of vaccinations as being in the best interest of our health as a nation is actually quite STRONG. I really IMPLORE you to use reason, not emotion, dogma, pressure of media, or fear, and make a decision here based on that good evidence. I am happy to talk with you in person or by phone if you wish. The work of Yehuda Shoenfeld in Israel on the relation between adjuvants and increased auto-immunity, for example, the work of Romain Gherardi et. al. on the Biopersistence and Brain Translocation of Aluminum Adjuvants in Vaccines, and MANY OTHER reputable scientists (PLEASE SEE HERE, for example: <https://www.informedchoicewa.org/education/an-open-letter-from-edward-f-fogarty-md/>), lays a STRONG basis at the VERY LEAST for not mandating vaccinations for our children. The repercussions of what this will do will come back to haunt ALL of us in profound ways that I really don't think you will want to look back on in regret. PLEASE get ALL the facts here in making your decision, and PLEASE VOTE NO ON HB3063. I WOULD GO SO FAR AS TO SAY THAT THE HEALTH OF OUR CHILDREN, THE ONGOING HEALTH AND WEALTH OF OUR NATION, **VITALLY** DEPENDS ON THIS BILL NOT PASSING. AGAIN, PLEASE DON'T HESITATE TO CONTACT ME IF YOU WOULD LIKE MORE INSIGHT TO BE ABLE TO HAVE THE CONFIDENCE YOU NEED TO OPPOSE THIS BILL. THANK YOU FOR YOUR TIME.....

Dr Robert Kellum
HealthBridge, Inc.
3046 NE 33rd Avenue
Portland, Oregon 97212
503-331-7393
healthbridge@integra.net

Dr. Robert B. Kellum
HealthBridge, Inc.
3046 NE 33rd Avenue
Portland, Oregon 97212
503-331-7393
healthbridge@integra.net

From: Robert Kellum <healthbridge@integra.net>

Date: Monday, March 25, 2019 at 2:02 PM

To: <Sen.BetsyJohnson@oregonlegislature.gov>,
<Sen.ElizabethSteinerHayward@oregonlegislature.gov>,
<Sen.JackieWinters@oregonlegislature.gov>, <Rep.DavidGomberg@oregonlegislature.gov>,
<Rep.GregSmith@oregonlegislature.gov>, <Sen.LeeBeyer@oregonlegislature.gov>,
<Sen.LewFrederick@oregonlegislature.gov>, <Sen.FredGirod@oregonlegislature.gov>,
<Sen.BillHansell@oregonlegislature.gov>, <Sen.DallasHeard@oregonlegislature.gov>,
<Sen.JamesManning@oregonlegislature.gov>, <Sen.ArnieRoblan@oregonlegislature.gov>,
<Sen.ChuckThomsen@oregonlegislature.gov>, <Sen.RobWagner@oregonlegislature.gov>,
<Rep.PaulHolvey@oregonlegislature.gov>, <Rep.SusanMcLain@oregonlegislature.gov>,
<Rep.MikeMcLane@oregonlegislature.gov>, <Rep.RobNosse@oregonlegislature.gov>,
<Rep.CarlaPiluso@oregonlegislature.gov>, <Rep.DuaneStark@oregonlegislature.gov>,
<Rep.TinaKotek@oregonlegislature.gov>, <Sen.PeterCourtney@oregonlegislature.gov>,
<rep.barbarasmithwarner@oregonlegislature.gov>

Subject: HB3063: WHY MANDATED VACCINATIONS IS BAD SCIENCE

Dear Respected Congressional Representatives and Senators,

Attached, please find my 3-21-19 letter to the Ways and Means Committee regarding HB3063, which I hope you will take a moment to read. Thank you for considering my ideas and for the important work you are all doing for our state.

Sincerely,

Dr Robert Kellum

Listing of Legislators:

Co-Chair Senator Betsy Johnson
Phone: 503-986-1716
Email: Sen.BetsyJohnson@oregonlegislature.gov

Co-Chair Senator Elizabeth Steiner Hayward
Phone: 503-986-1717
Email: Sen.ElizabethSteinerHayward@oregonlegislature.gov

Co-Chair Representative Dan Rayfield
Phone: Rep.DanRayfield@oregonlegislature.gov
Email: 503-986-1416

Co-Vice Chair Senator Jackie Winters
Phone: 503-986-1710
Email: Sen.JackieWinters@oregonlegislature.gov

Co-Vice Chair Representative David Gomberg
Phone: 503-986-1410
Email: Rep.DavidGomberg@oregonlegislature.gov

Co-Vice Chair Representative Greg Smith
Phone: 503-986-1457
Email: Rep.GregSmith@oregonlegislature.gov

Senator Lee Beyer
Phone: 503-986-1706
Email: Sen.LeeBeyer@oregonlegislature.gov

Senator Lew Frederick
Phone: 503-986-1722
Email: Sen.LewFrederick@oregonlegislature.gov

Senator Fred Girod
Phone: 503-986-1709
Email: Sen.FredGirod@oregonlegislature.gov

Senator Bill Hansell
Phone: 503-986-1729
Email: Sen.BillHansell@oregonlegislature.gov

Senator Dallas Heard
Phone: 503-986-1701
Email: Sen.DallasHeard@oregonlegislature.gov

Senator James Manning Jr.

Phone: 503-986-1707

Email: Sen.JamesManning@oregonlegislature.gov

Senator Arnie Roblan

Phone: 503-986-1705

Email: Sen.ArnieRoblan@oregonlegislature.gov

Senator Chuck Thomsen

Phone: 503-986-1726

Email: Sen.ChuckThomsen@oregonlegislature.gov

Senator Rob Wagner

Phone: 503-986-1719

Email: Sen.RobWagner@oregonlegislature.gov

Representative Paul Holvey

Phone: 503-986-1408

Email: Rep.PaulHolvey@oregonlegislature.gov

Representative Susan McLain

Phone: 503-986-1429

Email: Rep.SusanMcLain@oregonlegislature.gov

Representative Mike McLane

Phone: 503-986-1455

Email: Rep.MikeMcLane@oregonlegislature.gov

Representative Rob Nosse

Phone: Rep.RobNosse@oregonlegislature.gov

Email: 503-986-1442

Representative Carla Piluso

Phone: 503-986-1450

Email: Rep.CarlaPiluso@oregonlegislature.gov

Representative Duane Stark

Phone: 503-986-1404

Email: Rep.DuaneStark@oregonlegislature.gov

Representative Barbara Smith-Warner

Phone: 503-986-1445

Email: rep.barbarasmithwarner@oregonlegislature.gov

Speaker of the House

Representative Tina Kotek

Phone: 503-986-1200

Email: Rep.TinaKotek@oregonlegislature.gov

Senate President

Senator Peter Courtney

Phone: 503-986-1600

Email: Sen.PeterCourtney@oregonlegislature.gov

Governor

Governor Kate Brown

Phone: 503-378-4582

Dr. Robert B. Kellum

Anthroposophic Naturopathic Physician

HealthBridge, Inc.

3046 NE 33rd Avenue

Portland, Oregon 97212

503-331-7393

healthbridge@integra.net

Cancer, Chronic Disease, Family Medicine, Obesity

Board Licensed Naturopathic Physician

Ph.D. World Systems/Sociology/Psychology/Anthropology/Biology

Reichian/Jungian/Lowen-Based Integrative Threefold Therapist

IPMT/KOLISKO/SPAN Board Certification in Anthroposophic Medicine

M.S.O.M. Classical Chinese Medicine Practitioner

Board Licensed Diplomate of Acupuncture

Board Licensed Massage Therapist

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From: [Dr. Robert Ramsey](#)
To: [Dr. Robert Ramsey](#)
Cc: [JWMHS Exhibits](#); [Sen Beyer](#); [Rep Nosse](#); [Sen Heard](#); [Sen Wagner](#); [Rep Hayden](#); [Rep Salinas](#); [Rep Schouten](#); [Rep Stark](#)
Subject: vote no one HB3063 and any amendments on Wednesday
Date: Tuesday, April 23, 2019 7:55:43 AM

This email is in response to House Bill 3063 that is currently in committee. As a Doctor of Chiropractic practicing in Oregon for the past 22 years, I have significant concerns and objections over this proposed bill. There are so many issues with it but I will try and keep this brief.

1 - Informed Consent and Conflicts of Interest: Informed consent is a process for obtaining permission before conducting a healthcare intervention on a person. I encourage you to look it up. Because there are risks to interventions, it is a standard of care to obtain permission before performing such procedures. It is often said that vaccinations are safe and effective which is not entirely true. If there were no risk, why was the **National Vaccine Injury Compensation Program (VICP)** created? As far as effectiveness, please look at incidence of disease and when the vaccines were introduced. They are hailed with saving humanity, but most diseases were significantly reduced to current levels with advancements in hygiene and sanitation. Look it up, the numbers are there. Even with Polio, the criteria to diagnose Polio was changed after introducing the vaccine. The incidence of some recent measles cases is not an epidemic. Media and special interest inflation is what it truly is. Nothing I am saying is made up, it is all public knowledge. Legislating medical interventions that carry risk to an individual violates informed consent. The theory that the rights of the many outweigh the rights of the few is truly a road that we absolutely cannot go down. We all know that the pharmaceutical industry has its own profit agendas, and placing them in control of the health care decisions of our society is a significant conflict of interest.

2 - HIPPA: While not the purpose of HIPPA, the way that healthcare information is shared is protected, and this type of legislation violates that as well.

3 - Financial Impact: This bill has significant financial impacts that I don't think you can properly estimate. Not only will it make thousands of students ineligible to go to school but I believe there will be hundreds if not thousands that will leave this state. I am one of them. I will not live in a state that removes my freedom of choice for healthcare decisions. I will sell my house, sell my practice, and take my income and resulting taxes to another state that supports my right to choose what I put in my body and my children's. The pharmaceutical industry is shielded from lawsuits of their vaccine products (a travesty of legislation). Do you really want to see how the state of Oregon fares when mandated vaccine injuries start piling up along with the class action lawsuits brought against the state?

4 - True risks of infection: The theory of "Heard Immunity" is just that, a theory. The fact that unvaccinated or partially vaccinated individuals are risks to vaccinated individuals is not possible to say the least. There have been so many "outbreaks" over the years of Pertussis to Measles that have occurred in primarily vaccinated populations. And of course, the answer to that is another round of pertussis vaccine because the other 5 did not do enough. Again, a financial conflict of interest and an action of insanity. It is also not safe to expect a child to try and "catch up" on their vaccinations just to attend school.

5 – Oregon Education Laws: This bill is in contradiction to several laws in this state not only requiring children to attend school but also goes against their state and civil rights to do so. It is not ethical or legal to withhold a child's education. Other children with health issues, disabilities and infections are protected from withholding their education. It is not legal.

6- Healthcare Legislation by Special Interests – I can not overstate the concern with mandating medical procedures. Once this happens you will see an explosion of new mandated vaccines and medical treatments. If you think it will stop their you are sorely mistaken. The next stop will be going after all adults as well to bring them current because I can guarantee none of you are up to date based upon current vaccination schedules. Get ready to get in line for your own shots. And when you disagree with a vaccine, let's say you don't want to give the HPV vaccine to your 5 year old, well, it's too late, you voted his legislation in. This is extremely dangerous where this bill can go.

I could go on, but I try to keep it brief. There are so many flaws with this type of legislation in both legal and financial impacts

Seriously concerned,

Dr. Robert Ramsey

Robert W. Ramsey, D.C., P.C.
Gresham Family Chiropractic
575 NE 2nd Street, Gresham
<http://www.greshamchiropractor.net>
503-667-6744

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Chairmans Beyer and Knosse, members of the committee, my name is Robert Snee, I am a practicing attorney from Clackamas, the father of two partially vaccinated young adults, and I oppose HB 3063.

The bill will discriminate and segregate those 31,500 current Oregon students who have a nonmedical exemption and the option of attending an online school is not a realistic option for those parents who will not vaccinate their children under any circumstance. According to the Oregon Department of Education, there are currently 21 online schools available and the enrollment at the start of the 2018-19 school year was 13,994. Online charter schools are open to anyone and the only preference allowed under statute to attend one, is if there is a sibling already attending. Otherwise when demand exceeds available seats, schools must hold a lottery to attend. Even assuming the impossible that all 14,000 were to be filled by unvaccinated children, that still leaves over 17,500 without an option to attend school in Oregon.

Secondly, with regard to medical exemptions, even the current statutory scheme which requires schools to submit medical exemptions to local health departments for review and approval, is a direct violation of Federal Law. The Office of Student Privacy Policy Office of the US Dept. of Education, recently advised a senator in Michigan that their similar procedure is a violation of the Family Educational Rights and Privacy Act. A copy of that letter is attached with my testimony. The letter states "FERPA requires that, at the elementary and secondary level, any disclosure of student immunization records that are maintained by educational agencies and institutions to the State or local health department pursuant to State law and regulations must be made with the prior written consent of parents or eligible students because nothingin the State

code indicates that the disclosure of such immunization information would satisfy the health or safety emergency exception or any other exception to the general requirement of prior written consent in FERPA.” Every school that receives any federal funding, whatsoever, which forwards those records to the local health department, without the prior written consent of the parents, is subject to loss of all federal education dollars.

HB 3063 will trample and shred Oregonian’s fundamental rights protected under the U.S. and Oregon Constitutions and the law regarding the approval of medical exemptions runs afoul of Federal privacy laws. Be on the right side of history.

Robert M. Snee
Beaverton, Oregon



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF PLANNING, EVALUATION AND POLICY DEVELOPMENT

March 27, 2019

Senator Tom Barrett
Michigan Senate
P.O. Box 30014
Lansing, Michigan 48909-7514

Dear Mr. Barrett:

This is in response to your August 24, 2017, letter to the Family Policy Compliance Office (FPCO), now known as the Student Privacy Policy Office (Office), in which you ask about the applicability of the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) to certain reporting requirements of State laws and regulations concerning the disclosure of the immunization status of students. This is also in response to your telephone conversation with FPCO on May 8, 2018, regarding this same issue, as well as subsequent email communications with your staff. We apologize for the amount of time it has taken us to respond to your letter. We are sending a copy of our response to the cosigners of your letter. As explained more fully below and based on the information that you have provided, we believe that FERPA requires that, at the elementary and secondary level, any disclosure of student immunization records that are maintained by educational agencies and institutions to the State or local health department pursuant to State law and regulations must be made with the prior written consent of parents or eligible students because nothing in your inquiry or State code indicates that the disclosure of such immunization information would satisfy the health or safety emergency exception or any other exception to the general requirement of prior written consent in FERPA.

Background on FERPA

FERPA is a Federal law that protects the privacy of students' education records and the personally identifiable information (PII) contained therein. The term "education records" means, with certain exceptions, those records that are: (1) directly related to a student; and (2) maintained by an educational agency or institution or by a party acting for the agency or institution. 20 U.S.C. § 1232g(a)(4)(A); 34 CFR § 99.3 "Education records." "PII" refers to information, such as a student's name or identification number, that can be used to distinguish or trace an individual's identity either directly or indirectly through linkages with other information. 34 CFR § 99.3 "Personally Identifiable Information." FERPA affords parents and eligible students the right to have access to their education records, the right to seek to have their education records amended, and the right to have some control over the disclosure of PII contained in their education records. 20 U.S.C. §§ 1232g(a)(1) and (2), (b), (d) (h), (i), and (j); 34 CFR Part 99, Subparts B, C, and D; 34 CFR § 99.5(a)(1). (An "eligible student" is a student who has turned 18 years of age or is attending an institution of postsecondary education at any age. 34 CFR § 99.3 "Eligible student.")

Under FERPA, an educational agency or institution is prohibited from disclosing student education records or the PII contained therein, without prior, written consent from the parent or eligible student, unless the disclosure meets an exception to FERPA’s general consent requirement. *See* 20 U.S.C. §§ 1232g(b), (h), (i), and (j); 34 CFR §§ 99.30 and 99.31. Exceptions to FERPA’s general consent requirement are set forth in 34 CFR § 99.31 and 20 U.S.C. §§ 1232g(b)(1), (b)(2), (b)(3), (b)(5), (b)(6), (b)(7), (h), (i), and (j). (A copy of FERPA’s implementing regulations may be found on our website at: <https://studentprivacy.ed.gov/resources/family-educational-rights-and-privacy-act-regulations-ferpa>).

Discussion

At the elementary and secondary level, student health records, including immunization records, maintained by educational agencies and institutions, or by parties acting for such agencies or institutions, that are subject to FERPA are generally considered “education records” under FERPA. We note that while the exception to the definition of education records for treatment records applies to students who are 18 years of age or older, it requires, among other conditions, that the records be made, maintained, or used only in connection with the provision of treatment to a student, and it does not appear that immunization records are used in connection with the provision of treatment to a student. We also note, as explained more fully in the joint guidance that we issued with the U.S. Department of Health and Human Services on FERPA and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), that the HIPAA Privacy Rule excludes from its coverage as “protected health information” student education records that are protected by FERPA. A copy of the joint guidance is available at the following link: <http://www2.ed.gov/policy/gen/guid/fpc/doc/ferpa-hipaa-guidance.pdf>). Accordingly, at the elementary and secondary level, student health records that are maintained by educational agencies and institutions may not be disclosed without the prior written consent of the parent or eligible student, unless an exception to FERPA’s general consent requirement applies.

Under one such exception, an educational agency or institution may nonconsensually disclose a student’s education records or PII contained therein “in connection with an emergency [to] appropriate persons if knowledge of such information is necessary to protect the health or safety of the student or other persons.” 20 U.S.C. § 1232g(b)(1)(I). In determining whether it may rely on the health or safety emergency exception, educational agencies and institutions:

...may take into account the totality of the circumstances pertaining to a threat to the health or safety of a student or other individuals. If the educational agency or institution determines that there is *an articulable and significant threat* to the health or safety of a student or other individuals, it may disclose information from education records to any person whose knowledge of the information is necessary to protect the health or safety of the student or other individuals. If, based on the information available at the time of the determination, there is *a rational basis for the determination*, the Department will not substitute its judgment for that of the educational agency or institution in evaluating the circumstances and making its determination.

34 CFR § 99.36(c) (emphasis added); *see also* 73 FR 74806, 74837 (Dec. 9, 2008) (explaining that the Department amended FERPA’s health or safety emergency exception to add subsection (c) in order to “provide[] greater flexibility and deference to school administrators so they can bring appropriate resources to bear on a circumstance that threatens the health or safety of individuals.”). “[T]o be ‘in connection with an emergency’ means to be related to the threat of an *actual, impending, or imminent emergency*, such as a terrorist attack, a natural disaster, a campus shooting, or the outbreak of an epidemic such as e-coli. An emergency could also be a situation in which a student gives *sufficient, cumulative warning signs* that lead an educational agency or institution to believe the student may harm himself or others at any moment.” *Id.* at 74838 (emphasis added). (Guidance on our website explains this and other exceptions typically related to emergencies: <https://studentprivacy.ed.gov/resources/addressing-emergencies-campus>. Further, in 2009, we issued guidance concerning the disclosure of PII from students’ education records to outside entities, including State and local health departments, when addressing the H1N1 flu outbreak; which is available at: https://studentprivacy.ed.gov/sites/default/files/resource_document/file/ferpa-h1n1.pdf.)

Nothing in your inquiry indicates that the disclosures of student health information under the aforementioned Michigan laws or regulations would satisfy the health or safety emergency exception to FERPA’s general consent requirement. Rather, these disclosures appear to encompass routine releases of students’ immunization records by educational agencies and institutions to local health departments. Congress has provided no exception to FERPA’s general consent requirement that permits such routine disclosures of immunization records, without parental or eligible student consent.

We address your specific questions below.

State Reporting Requirements

You explain that the following laws and regulations require disclosures by educational agencies and institutions in Michigan and ask specific questions about each of the provisions:

Section 333.9215 of the Michigan Compiled Laws (MCL), which provides that:

- A child is exempt from the requirements of this part as to a specific immunization for any period of time as to which a physician certifies that a specific immunization is or may be detrimental to the child’s health or is not appropriate.
- A child is exempt from this part if a parent, guardian, or person in loco parentis of the child presents a written statement to the administrator of the child’s school or operator of the group program to the effect that the requirements of this part cannot be met because of religious convictions or other objection to immunization.

You specifically ask:

Is the immunization record and exemption statement part of the education record? Can these be shared with the health department without parental consent?

Response:

As noted above, at the elementary and secondary level, health records, including immunization records and exemption statements, are “education records” under FERPA if they are directly related to a student and maintained by an educational agency or institution subject to FERPA. Congress has provided no specific exception to FERPA’s general consent requirement that permits an educational agency or institution to routinely disclose PII from a student’s education records to a State or local health department. Rather, any disclosure of this information to a health department would have to fall under another exception to the general requirement of consent in FERPA, such as the health or safety emergency exception or the exception that permits a school to comply with a judicial order or lawfully issued subpoena.

Section 388.1767 of the MCL, which provides, in pertinent part, that:

(2) Each district or intermediate district shall report to the local health department in which it is located by November 1 of each fiscal year, in a manner prescribed by the department of community health, the immunization status of each pupil in grades K through 12 who enrolled in the district or intermediate district for the first time or, beginning in 2014-2015, who enrolled in grade 7 in the district or intermediate district for the first time, between January 1 and September 30 of the immediately preceding fiscal year. Not later than December 31 of each fiscal year, the department of community health shall notify the department by district or intermediate district of the percentage of entering pupils and, beginning in 2014-2015, of pupils who enrolled in grade 7 for the first time who do not have a completed, waived, or provisional immunization record in accordance with section 1177 of the revised school code, MCL 380.1177. If a district or intermediate district does not have a completed, waived, or provisional immunization record in accordance with section 1177 of the revised school code, MCL 380.1177, for at least 90% of the district's or intermediate district's entering pupils, as recorded in the November 1 reports required under this subsection, the district or intermediate district is subject to subsection (4) until the district or intermediate district has such an immunization record for at least 90% of its pupils who enrolled in the district or intermediate district for the first time.

(3) Each district or intermediate district shall again report to the local health department in which it is located by February 1 of each fiscal year, in a manner prescribed by the department of community health, the immunization status of each pupil in grades K through 12 who enrolled in the district or intermediate district for the first time or, beginning in 2014-2015, who enrolled in grade 7 in the district or intermediate district for the first time, between January 1 of the immediately preceding fiscal year and December 31 of the current fiscal year. Not later than March 31 of each fiscal year, the department of community health shall notify the department by district or intermediate district of the percentage of entering pupils and, beginning in 2014-2015, of pupils who enrolled in grade 7 for the first time who do not have a completed, waived, or provisional immunization record in accordance with section 1177 of the revised school code, MCL 380.1177. If a district or intermediate district does not have a completed, waived, or provisional immunization record in accordance with section 1177 of the revised school

code, MCL 380.1177, for at least 95% of the district's or intermediate district's entering pupils, as recorded in the February 1 reports required under this subsection, the district or intermediate district is subject to subsection (4) until the district or intermediate district has such an immunization record for at least 95% of its pupils who enrolled in the district or intermediate district for the first time. If the department of community health is not able to report to the department by March 31 because a district or intermediate district fails to submit a report as required in this subsection, or submits an incomplete, inaccurate, or late report, the district or intermediate district is subject to subsection (4) until the report is submitted in a complete and accurate form.

(4) If a district or intermediate district does not comply with this section, the department shall withhold 5% of the total funds due to the district or intermediate district under this act after the date the department of community health reports a district's or intermediate district's noncompliance with this section to the department until the district or intermediate district complies with this section. If the district or intermediate district does not comply with this section by the end of the fiscal year, the district or intermediate district forfeits the total amount withheld.

You specifically ask:

Is it a violation of FERPA to require schools [to] submit this information on each student to the local health department?

This presents a conundrum for schools as state law requires this reporting, or risk a 5% loss of state education dollars whereas violation FERPA risks a loss in federal dollars. How could this situation be remedied to both protect the privacy rights of students, and also not risk education funding at both a state and federal level?

Response:

FERPA does not contain an exception to its general consent requirement that permits school districts to disclose the immunization status of each student from education records to the local health department. However, nothing in FERPA would prohibit an educational agency or institution from releasing information from student education records that has been properly de-identified. As explained above, under FERPA, an educational agency or institution is prohibited from disclosing PII from students' education records, without prior written consent, unless the disclosure meets an exception to FERPA's general consent requirement. The definition of PII in the FERPA regulations, 34 CFR § 99.3 ("Personally Identifiable Information"), states as follows:

[PII] includes, but is not limited to—

- (a) The student's name;
- (b) The name of the student's parent or other family members;
- (c) The address of the student or student's family;
- (d) A personal identifier, such as the student's social security number, student number, or biometric record;

- (e) Other indirect identifiers, such as the student’s date of birth, place of birth, and mother’s maiden name;
- (f) Other information that, alone or in combination, is linked or linkable to a specific student that would allow a reasonable person in the school community, who does not have personal knowledge of the relevant circumstances, to identify the student with reasonable certainty; or
- (g) Information requested by a person who the educational agency or institution reasonably believes knows the identity of the student to whom the education record relates.

FERPA does not prohibit the release of properly de-identified records. 34 CFR § 99.31(b)(1). Please note, however, that a student’s identity may be personally identifiable, even after removal or redaction of nominally identifying information from student-level records. This may be the case, for example, in a situation in which there are a very small number of students in a class or a school. In these circumstances, FERPA does not allow disclosure of the record in any form without consent because the irreducible presence of personal characteristics or other information makes the student’s identity personally identifiable. (For more information on data de-identification please review the following guidance:

https://studentprivacy.ed.gov/sites/default/files/resource_document/file/data_deidentification_terms_0.pdf.) Further, as discussed below, nothing in FERPA would prevent State law from requiring parents to produce immunization information and records that are not protected by FERPA to State or local health departments as a condition of attendance, although we do not opine on whether this would be permissible under other Federal laws.

Section 333.9209 of the MCL, which provides that:

- (1) Before November 1 of each year, the principal or administrator of each school shall deliver to the state and local health departments a list of the immunization status at the time of school entry of new entering kindergarten and first grade students.
- (2) The department shall prescribe minimum percentage levels of immunization for children in a school.
- (3) As a result of the information collected pursuant to subsection (1), the local health officer shall take appropriate action, including immunization clinics, to raise the immunization level of children entering school to the levels established pursuant to subsection (2).
- (4) Before the following February 1, the principal or administrator of each school shall update the list to show the additional immunizations received by each child since entering the school. The reports shall be made on forms provided or approved by the department. A child who enters school in September and who has not completed the immunizations required under section 9227 and has not filed an exemption under section 9215 before February 1 shall be excluded from school attendance. A child who enters school at any other time of the school year and who has not completed the immunizations required

under section 9227 and has not filed an exemption under section 9215 within 4 months after entrance shall be excluded from school attendance.

Regarding this provision, you also explain the following:

For at least 2 decades, state law, MCL 333.9209, and regulations [R325.176(14)]¹ ask that schools submit to the local health department each vaccine received for each child with dates, along with the exemption status of each child. This information is entered by the school into the state vaccine tracking system (MCIR: Michigan Care Improvement Registry) that is controlled by the Michigan Department of Health and Human Services (MDHHS). Another regulation [R325.176(16)]² directs schools to make the immunization information for each child available for audit by the local health department.

You specifically ask:

If the health department is requiring schools [to] submit the immunization information for each child and is sending a copy of the exemption statement to the local health department, without parental consent, is this a violation of FERPA?

Does this present a statewide violation of FERPA, thus putting schools at risk of losing federal funding by violation federal FERPA law?

And:

MDHHS Regulation R325.176(12), which provides that:

(12) When presented with a medical exemption, religious or other exemption, the administrator of a child's school or operator of a child's group program shall recognize the exemption status of the child. Each nonmedical exemption filed at the child's school or group program of a child entering a program after December 31, 2014 shall be certified by the local health department that the individual received education on the risks of not receiving the vaccines being waived and the benefits of vaccination to the individual and the community. All waivers shall be submitted using the waiver form prescribed by the department.

You state that this MDHHS regulation, which became effective on January 1, 2015, requires that parents “meet with an educator at the local public health department and have their exemption

¹ This regulation provides that: “(14) All of the following information shall be provided to fulfill the requirements of section 9209(1) of the code:

- (a) A listing, by child, of the number of doses of each vaccine received.
- (b) The date of each immunization for each vaccine received in the series.
- (c) A listing, by type of exemption granted, of the children who have exemptions.”

² This regulation provides that: “(16) A principal of a school or operator of a group program shall make immunization records available for inspection by authorized representatives of the department or the appropriate local health department. The local health officer shall also make public clinic immunization records available to local schools or group programs for the purpose of verifying pupil immunizations.”

(waiver form) certified by this educator.” You explain that the regulation requires certain information be given to the educator, including: immunization history, child name, date of birth, reason for exemption, school name, parent name, and contact information. The parent would then need to submit this certified waiver to the school. The local health department also keeps a copy of the waiver, but also requires the school to submit a copy to the local health department when the school receives it. With regard to this requirement, you state that “[i]n both scenarios, it appears parents are required to share this information with the health department, without parental consent, in order to receive the paperwork. It appears that parents are obligated to provide this information to the health department, essentially giving up their FERPA rights, in order for the child to attend school.”

You specifically ask:

Is it a FERPA violation to have this part of the education record “certified” by the local health department, before they can submit to the school?

Is it a FERPA violation to require parents to provide personally identifiable information about the student in order to obtain this part of the education record?

With regard to this Michigan regulation, you also explain that for the last two years, MDHHS has published reports disclosing the immunization status of each student within the checkpoint years (kindergarten, 7th grade, new to district). You state that “[i]t appears MDHHS is releasing this information on their website, and to various media outlets. These reports are using personally identifiable student information obtained from the educational record, without parental consent. These reports include granularity down to the classroom level, which reveals personal healthcare information about children in the classroom, information that is part of the education records, without parental consent.”

You specifically ask:

It is my understanding that schools are responsible for the actions of any third party that information is released to. Is the release of this information publicly, by the health department, a violation of FERPA?

Does this present a statewide violation of FERPA, thus putting schools at risk of losing federal funding by violation federal ERPA law?

Response:

It would not violate FERPA if Michigan requires parents to share information about their children or to share their children’s immunization records with their local health department as long as FERPA does not apply to such records or information. FERPA only applies to education records and PII contained in education records that are maintained by educational agencies and institutions or by a party acting for the agency or institution. Michigan educational agencies and institutions, however, would violate FERPA to the extent that they have a policy or practice of disclosing student’s education records or PII from students’ education records to a State or local

health department without the prior written consent of the student’s parent or the eligible student, or unless an appropriate exception applies, as previously discussed or if they require parents or eligible students to provide such consent as a condition of attendance or the receipt of educational services.

In our telephone discussion on May 8, we discussed whether attendance at a school can be conditioned on forced disclosure of immunization records to the State or local health department, even if the disclosure that is compelled is that of the parent providing another entity, such as a State or local health department, information or records about the student, instead of the local school. We do not believe that FERPA would prohibit a State from requiring parents to provide information or records about the student to the health department that is not protected by FERPA, although we do not opine on whether this would be permissible under other Federal laws. Under this scenario, the health department could then provide any collected information or records necessary to local school districts relative to a student’s immunization. However, if the school district maintains the student’s immunization records received from the health department or the parent, then it could not, in turn, disclose such records or the PII contained therein, without the prior written consent of the parent or eligible student or under an appropriate exception to FERPA’s consent requirement. This is because records that are both directly related to a student and maintained by a school district are “education records” subject to FERPA, provided they do not fall within an exception to the definition of “education records.”

We also discussed your concern that the Michigan Department of Health and Human Services (MDHHS) has been posting information concerning students and immunizations on their website that, in some cases, is personally identifiable to students. Aggregate data may still contain personally identifiable information. The aggregation of student-level data into school-level (or higher) reports removes much of the risk of disclosure, since no direct identifiers (such as a name, Social Security Number, or student ID) are present in the aggregated tables. Some risk of disclosure does remain, however, in circumstances where one or more students possess a unique or uncommon characteristic (or a combination of characteristics) that would allow them to be identified in the data table. This commonly occurs with small ethnic subgroup populations, or where some easily observable characteristic corresponds to an unrelated category in the data table (e.g., if the Health Department reports that 0% of white males in grade 11 were vaccinated). In these cases, some level of disclosure avoidance is necessary to prevent disclosure in the aggregate data table. For more information on protecting privacy in publicly released data, please consult PTAC’s [FAQs on Disclosure Avoidance](#).

Lastly, please be aware that the Department has reviewed the Michigan Care Improvement Registry (MCIR) Release Highlights (July 2018 Special Edition) article outlining new procedures in response to Michigan’s Attorney General’s guidance stating that “school entered information should not be viewed by MDHHS and local health departments unless permission has been granted by the legal parent or guardian.” The guidance introduced a “FERPA No Consent” check box in the MCIR School Immunization Reporting System (SIRS) which parents may select should they do not want PII attached to the aggregate disclosure of information from their student’s education record shared on the MCIR SIRS system. FERPA requires that a consent for disclosure of education records must be signed and dated and must specify the records that may be disclosed, state the purpose of the disclosure, and identify the party or class

of parties to whom the disclosure may be made. 34 CFR § 99.30. Therefore, a “FERPA No Consent” checkbox as a means of obtaining consent to disclose PII from a student’s education record to a third party is not in compliance with FERPA’s consent requirement.

We trust this adequately addresses your inquiry and explains the interplay between the above-referenced reporting requirements set forth under Michigan law and FERPA.

Sincerely,



Michael B. Hawes
Director
Student Privacy Policy Office

cc: Sheila Alles
Interim State Superintendent

From: [Grass Hopper](#)
To: [JWMHS Exhibits](#)
Subject: Testimony: Hearing and Work Session on HB 3063
Date: Tuesday, April 23, 2019 8:00:26 PM

Dear Ways and Means Sub Committee,

My name is Robin Morgan, from Hillsboro. Please accept this written testimony in opposition of HB 3063. I am unable to attend due to the short notice and timing during the work day.

I have worked in public school for 22 years in 5 different schools ranging from K-12. First, there are very few families that choose to not vaccinate, but I have always respected their beliefs and these parents make this decision with much thought and education. It is not in haste or quick reaction. In my 22 years, none of the students have contracted a vaccine related illness that is passed or spread to other students. Ironically, in my 22 years, I've seen a huge rise in anti-social behavior and autism spectrum behavior. Uncountable parents have shared with me the almost immediate changes in their child after certain vaccines were given. Even of "correlation does not equal causation," correlation deserves serious pause and attention

My role for 20 years has been a professional school counselor in the public schools. Aside from my experiences with non vaccinated youth not being a risk to our public schools, I ask you to please consider the emotional and social ramifications if these students are pulled immediately from their learning and social environment. Children thrive with structure and knowing what to expect each day and school is part of every child's day. When any child is pulled from a school quickly and placed in another school (family strife, loss of housing, etc), it is considered one of the ACE factors equating to what child psychologists and schools now identify as a traumatic event. The more ACES (Adverse Childhood Experiences) a child has, the more likely he or she will be subject to social isolation, drug and alcohol misuse, learning issues, and an increase in dropout rate.

Preventing social isolation for students is one of my top priorities as a counselor as this is where suicide ideation, self-harm, attempted suicide and suicide are at greatest risk. Suicide is the second leading cause of death in 10-24 year olds. As part of the school district's flight team (team of counselors trained to support staff and students after a death or traumatic event in a school), I have been called to aide in the support of a school community 6 times after a death by suicide. This is 6 times too many in my 10 years of service on the flight team. Suicide ideation is soaring with 100's of suicide screeners being done each year by school counselors. After interviewing teachers, peers and family members of these students thinking about suicide or committing suicide, the most common theme in every event was the student not feeling they belonged. A feeling of belonging is research based in determining the self esteem level of a human being, both as a child and adult. If these non-vaccinated or partially vaccinated children are taken from school, it will

create a sense of not belonging and do more emotional damage in the long run. Parents will have no discourse for where to place their children to learn and then potentially forced into a decision that goes against their religious beliefs or medical opposing beliefs for the health of their children.

I'm concerned that this bill will also negatively affect schools. Parents who selectively vaccinate tend to be more informed and active in their children's lives. These are the parents who volunteer in schools; the parents who contribute to fundraising; the parents who support bond measures. Schools are already struggling. We can not take another hit of loss of students and loss of support.

Please vote "NO" on HB 3063. The cost vs. reward pay-off is not there. Please respect the few families that are exempting their children from all or some vaccines. A Free and Appropriate education should be guaranteed to all children, regardless of their vaccination status.

Sincerely,
Robin L. Morgan
Hillsboro, Oregon

April 23rd, 2019

Dear Senator Beyer and Representative Nosse,

As a diverse group of physicians from all over the state of Oregon, we are writing to you today with significant concern regarding the health and wellbeing of our patients, families, and communities in light of the recent measles outbreak. As healthcare leaders, we recognize that the outbreak represents a symptom of a much larger problem: that Oregon now has one of the lowest rates of childhood vaccinations¹ in the country. The current rate of non-medical exemptions means Oregonians are no longer protected by herd immunity. This fact puts many of our most vulnerable community members at risk, and we are writing to urge you and the Legislature to take immediate action. **In particular, we urge you to follow in the steps of recent California legislation² and eliminate non-medical exemptions for childhood vaccinations.**

As you know, measles is a highly contagious viral infection with no effective treatment. However, the burden of measles infections, complications, and deaths has been significantly reduced worldwide in the setting of a safe and effective vaccine. It is estimated that the measles vaccine prevented 21.1 million deaths worldwide between 2000 and 2017³. Within the United States, measles decreased from hundreds of thousands of cases per year in the 1960s to 372 cases in 2018⁴. However, we are at real risk of seeing a surge not only in measles but in other vaccine-preventable diseases given the increasing trend of parents opting out of vaccination for personal beliefs, which are often based on false evidence. Were you aware that in 2015 a child in Linn County, Oregon died of measles-related encephalitis⁵?

As physicians, we are on the frontline of the consequences of under-vaccination, including the recent measles outbreak. Although the number of cases of measles in Clark and Multnomah counties is estimated to be less than 100 cases⁶, the impact of the outbreak is much more widespread, and we see it every day in our medical practices:

- Calls flooding into our clinics from parents, schools, and other institutions with concerns and questions about measles and how to protect themselves.
- Families in tears with fear for their infants or immunocompromised children who are too young or sick to be vaccinated
- Urgent requests for booster vaccines or appointments, specifically to discuss the current outbreak.
- Panic created by possible measles cases, symptoms of which can be similar to other viral infections.
- Financial hardship of quarantine: socially responsible caregivers of exposed children too young to be vaccinated can lose up to 21 days of productivity to prevent further dissemination of the disease.

¹<https://www.oregon.gov/oha/PH/PreventionWellness/VaccinesImmunization/GettingImmunized/Pages/SchRateShare.aspx>

² https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160SB277

³ <https://www.who.int/news-room/fact-sheets/detail/measles>

⁴ <https://www.cdc.gov/measles/cases-outbreaks.html>

⁵ <https://www.cdc.gov/mmwr/volumes/65/wr/mm6501a3.htm>

⁶ <https://multco.us/measles2019>

As we deal with these impacts, our time and energy is necessarily taken away from caring for the many other needs of our patients and communities.

The current policy in Oregon allows parents to opt out of vaccinating their children after watching an educational video or after discussing the risks and benefits of vaccination with a healthcare provider. As physicians, we are always happy to discuss the risks and benefits of medical decisions with our patients; however, the current law means that the onus is often on us to individually convince parents of the safety of vaccinations for their children. It can be exhausting and disheartening to repeat the scientific evidence in visit after visit only to be ignored or berated. The evidence of vaccine safety is well-established and widely available⁷. By making it an individual discussion in the physician's office, the law fails to account for the very real public health consequences of low vaccination rates. These discussions also take away from valuable and limited time during visits in which to discuss other important topics of child health and development.

We are not only physicians. We are also parents, families, friends, and neighbors of those most at risk of catching measles: young infants, children with weakened immune systems, and others who are unable to receive vaccinations for medical reasons. We are worried for our own loved ones even as we try to calm the worries of our patients and their families. It is time to stop seeing vaccination as a personal choice and instead see it for what it is: an issue of public health, public safety, and child welfare.

For vaccine-preventable diseases such as measles, one infection is unnecessary, one complication is inexcusable, and one death is unforgivable. It is time for Oregon to limit or eliminate the non-medical exemption for vaccinations. We know from California's experience that this type of legislation works⁸ to significantly improve vaccination rates, and we can no longer afford to wait any longer to make these changes.

We look forward to serving as your allies in this important effort, and many of us would be willing to testify before Congressional committees should that be of benefit. In addition to testifying, please let us know how else we can assist to strengthen immunization laws for all Oregonians.

From the frontlines,

The Oregon Pediatric Society

The Oregon Academy of Family Physicians

The Children's Health Alliance

The Oregon Physician Mom Group
(representing over 1000 physician moms across the state)

⁷ <https://www.cdc.gov/vaccinesafety/research/index.html>

⁸ <https://www.nytimes.com/2018/01/16/upshot/measles-vaccination-california-students.html?fbclid=IwAR3DvB1SsBbyVRL0PDnY-RpVJvreh7FvaKZuUfiIDrIXxH98KpNIUpXdPVg>

And the following individual clinicians:

1. Robin Tittle, MD, Portland, OR
2. Marlo McIlraith, MD, FAAP General Pediatrics at OHSU
3. Kimberly Shields, DO, Family Medicine, Portland
4. Laurel Bradford, MD, pediatrician, Tualatin, OR
5. Meredith Williams, MD Portland, OR
6. Sonel Patel, MD, Wilsonville, OR
7. Tammy Bloom, MD Portland VA Urology
8. Sarah Tycast, MD. Pediatrics- Tualatin OR
9. Annameika Goldring MD, MPH. Portland, OR. Emergency Medicine
10. Shauyene Hsieh, MD; Portland, OR
11. Emily Bronec, MD. Portland. Pediatrics.
12. Jessi Cox MD Emergency Physician Tillamook Or
13. Jennifer Byrne, D.O., Family Medicine, Troutdale, OR
14. Cristina de Castro-Dela Cruz MD, Internal Medicine, Providence Medical Group West Linn
15. Katherine W. Dempster, MD, FACP Internal Medicine, Portland
16. Tamara Barstow, MD, Pediatrician, Eugene
17. Juan Miguel Dela Cruz MD - family medicine, NW Permanente Medical Group
18. Christine McBurney, MD, Rheumatology
19. Jody Tate, MD pulmonary, critical care and sleep medicine physician
20. Tien Le, DO - Albany, OR
21. Karen E. Adams, MD, OBGYN, OHSU
22. Sharon McNeill MD
23. Lindsay Stanley, MD, Internal Medicine, Portland, OR
24. Mara Hegel D.O., Clackamas, OR

25. Payal Shah MD - Emergency Medicine, Gresham, OR
26. Lorri Wilson, MD
27. Heather Motonaga, MD Portland, Oregon
28. Karla Hennebold, MD, Hillsboro OR
29. Mary T Rogers, MD FAAP Central Oregon Pediatric Associates
30. Bethany Rosborough, MD. Pediatrics. Tualatin,OR
31. Caroline Castillo, MD, Portland, OR (Infectious Diseases)
32. Melissa Hahn, MD Pediatrics
33. Heather Bentley Offenstein, MD, Lincoln City
34. Rose Heuser, MD Internal Medicine VA Hospital
35. Matthew DiVeronica, MD - Portland
36. Christine Johnson, MD, hematologist and medical oncologist at Providence Cancer Institute
37. Weiya Wysham, MD, Portland, OR
38. Colleen McCormick, MD MPH gynecologic oncologist
39. Michelle Thompson
40. Emily Coombes, DO
41. Pejvak S Salehi, M.D.
42. Talia Kahn, MD, Internal Medicine, Portland VA Medical Center
43. Richard K Bowes, MD Portland,OR Internal Medicine Hospitalist, Portland VA Medical Center
44. Megan Kelly, MD emergency medicine
45. Lyndsey McCartney, MD, Family Medicine, Beaverton
46. Emily Puukka Clark, MD. Family Medicine in Tigard, Oregon.
47. Rebecca Lindsay, MD, Portland, OR
48. Ian Hoffman, MD, Portland, OR
49. Rebecca Cleeton, DO Tigard, OR

50. Erin Rodgers, MD, Portland, OR
51. Yoonhee Hong Choi, MD. Portland, OR.
52. Kimberlynn M Heller, DO
53. Safina Koreishi MD MPH, Family and Preventive Medicine
54. Jessica Lehrfeld, DO. Family Medicine, Legacy Medical Group Silverton
55. Tina Busby, MD. Family Medicine. Bend, Oregon
56. Penelope Lang, MD. Portland
57. Judy Guzman-Cottrill, DO Portland, OR (Pediatric Infectious Diseases)
58. Amanda Bailey, MD (board certified general pediatrician)
59. Gillian Betterton MD OB/GYN
60. Ehrine Manzana DeLoriea, MD, MPH (Portland, OR)
61. Linnea Wittick Roy, MD. Pediatric Emergency Medicine
62. Diana Gill, MD Portland, OR. OB/ GYN
63. Ambar Faridi, MD, Portland
64. Alice Huang, Psychiatry, Private Practice
65. Jeffrey Healey, MD, Portland
66. Peter Gyerko MD
67. Marissa Maier, MD, Portland, Infectious Diseases
68. Amy Gillcrist M.D. Internal Medicine, Portland
69. Smitha R Chadaga MD FHM FACP, Hospitalist, Legacy Health, Portland, Oregon
70. Wannasiri Lapcharoensap, MD, Portland, OR
71. Kathleen Dunham, MD
72. Jennifer Webster, MD. Coos Bay, OR
73. Kristin Burgher, MD, Family Medicine, Cornelius, OR
74. Shannon Brigman MD, Newberg, Pediatrician

75. Laura Schaben, MD, Bend, OR
76. Laura Davies, MD, Portland, OR
77. Lauren Champion DO, Internal Medicine, Hospitalist
78. Lisa Reynolds, MD, Pediatrician, Portland
79. Barbara Rajska MD Hillsboro
80. Mona LaBar, MD, Portland, OR
81. Zarya Rubin, MD Portland, OR
82. Sarah Powers, MD , Portland; Pediatrics
83. Arian Nachat, MD, Emergency Medicine / Hospice & Palliative Medicine
84. Cara Kawahara MD, Family Medicine, Hillsboro
85. Melissa DeFreest, MD Emergency Medicine
86. Jessica Bailey, MD; Pediatric Emergency, Portland OR
87. Danielle Hafner, MD, Child & Adolescent Psychiatry, Bend, OR
88. Julie Currin, MD, Portland (Pediatrics)
89. Stephanie Campbell, DO McMinnville OR, Dermatology
90. Zibing Woodward, MD, Gastroenterology, Tualatin, OR
91. Nisha Nagarkatti-Gude, MD, PhD
92. Christy Meade Olivier MD, Pediatric Emergency Medicine, Randall Children's Hospital, Portland, OR
93. Jessica Lubahn, MD Portland
94. Sarah Webber, MD Salem, OR Internal Medicine
95. Kelly C Vranas, MD, Portland, pulmonary/critical care
96. Aoife O'Sullivan, MD. Portland, OR. Family Medicine.
97. Maria Tumanik, DO, Salem, OR
98. Eliza Hayes Bakken, MD Pediatrics
99. Melinda Binkley, MD, MPH. Portland, OR

100. Suzanne Mendez, MD; Bend, Oregon; Pediatrics
101. Sandra Wanek, MD Salem, OR
102. Jacqueline M. Brady, MD OHSU
103. Jennifer Rupert, MD, Northwest Permanente, Clackamas, OR
104. Bahareh Keith DO, MHSc Public Health . Pediatric Hospital Medicine
105. Catherine Dalton, MD; physiatrist, Portland, OR
106. Ann Marie Paulsen, MD, Portland, OR, Internal Medicine
107. Amarprit Bains, Internal Medicine
108. Monique Carroll, DO. Pediatrician
109. Michelle Berlin MD Portland Oregon
110. Kelsie Storm, MD Portland, OR. Pediatric Oncology
111. Richard M Hall, MD, Portland, OR (Internal Medicine)
112. Tricia James MD portland OR
113. Kathryn Kolonic, DO, MPH
114. Mythili Ransdell, MD Internal Medicine/Pediatrics Samaritan Health Services, Corvallis, OR
115. Jessica Schemm, MD, Salem
116. Jeanne Robinson, MD Internal Medicine, Clackamas, OR
117. Rachel Young, MD, Portland, Oregon
118. Melissa Novak, DO
119. Anika Denali Luengo, MD Portland, OR
120. Brittany Petering, MD Portland
121. Sandra J Barton MD, Internal Medicine
122. Catherine Kent, MD General Pediatrics at Kaiser Permanente
123. Jenny Malcom, MD Pediatrician in Gresham, OR
124. Sarah Green, MD Pediatrics OHSU

125. Christina Nicolaidis, MD, MPH, Portland, OR, Internal Medicine, OHSU
126. Cecille Reuther, MD Portland OR
127. Marianne Parshley, MD FACP (General Internist) Governor Oregon Chapter ACP
128. Jill Edminster DO, Internal Medicine
129. Jill Christensen MD MPH, Milwaukie OR
130. Jennifer Brown, DO Psychiatry, Corvallis OR
131. Nicholas Brown, DO Internal Medicine, Corvallis OR
132. Kimberly Boyer, MD. Pediatrician, Tualatin, OR
133. Jennifer Lincoln, MD (Providence St. Vincent OB Hospitalist)
134. Farah Raqib, MD- Portland, OR
135. Anna Tubman MD, Family Medicine
136. Abigail Lenhart, MD in Portland
137. Anne Weinsoft, MD FACP, Portland, OR (Internal Medicine)
138. Jennifer LeTourneau, DO, Critical Care Medicine, Portland, OR
139. Esther Yue, MD. Portland, Pediatric Emergency, Randall Children's Hospital
140. Megan Chandler MD Internal Medicine Portland OR
141. T. Domi Le, MD - gastroenterology
142. Jamie Randles MD Portland, OR
143. Sarah Zapata MD, NW Kaiser Permanente Nephrology
144. Breanne Brown DO Family Medicine and Sports Medicine
145. Torree McGowan, MD, FACEP. Emergency Medicine, Culver, OR
146. Daniel Toms, MD, Portland Oregon
147. Lidija McGrath, MD (Portland, OR)
148. Kyle Kent, MD, Portland OR, Internal Medicine, VA Portland Health Care System
149. Susan Conrad, MD in Bend OR

150. Carrie Sailer, MD. Hospitalist, OHSU
151. Josh Gepner, MD, Family Practice
152. Julia Carr, MD, FAAP. Portland, Oregon. General Pediatrics
153. Mari Kay Evans-Smith, MD, Pediatrics Associates of the NW, Portland, OR
154. Lauren Rose, MD Pediatrics
155. Honora Englander, MD (OHSU, Department of Medicine)
156. Elizabeth Windell, DO - trauma and acute care general surgery, Salem Health
157. Janelle Stevens, DO, Pulmonary and Critical Care Medicine, Portland, OR
158. Wendy Jin, MD, MPH, FAAP (Ambulatory Peds, Salem Hospital)
159. Antwon Chavis, MD. General pediatrics. Portland, OR.
160. Trevor Phillips, MD, board certified Emergency Medicine, Salem Oregon.
161. Sara Murdick, MD Beaverton, OR (pediatrics)
162. Rachael Hiebert, MD FAAP, Salem, Oregon Pediatrics
163. Maureen Baldwin, MD MPH; Ob/Gyn
164. Kathleen Mooney, MD Pediatrician, Metropolitan Pediatrics, Portland, Oregon
165. Katherine Clayton, MD
166. Emily Puterbaugh, MD
167. Kate Ropp, MD. Portland, OR
168. Phil H. Alday MD PhD, Infectious Disease physician, Portland VA Medical Center / OHSU
169. Angela Alday, MD (Hospital Medicine, Portland)
170. Sara Gerhards, MD Ob/Gyn Eugene, Oregon
171. James Stephen Puterbaugh, M.D., Portland, Oregon
172. Jennifer A Black, MD, Portland, OR
173. Beau Weill, MD pediatrics
174. Elizabeth Graff, MD - pediatrician at Olson Pediatric Clinic, Lake Oswego, OR

175. Brandi Spence, MD, McMinnville Oregon
176. Ronda Pulse, MD Portland, OR
177. Rachel Rackow MD, MPH, Portland OR, Internal Medicine/Palliative Care
178. LESLIE Sanchez-Goettler, MD
179. Shirin Doratotaj, MD Pediatrics
180. Maria J Nelson, MD, MS, FACEP (emergency medicine)
181. Bina Patel, MD, MPHbin
182. Bina Patel MD MPH, Portland OR
183. Christiane Kubit MD, Vancouver WA and Portland OR
184. Elizabeth Lahti, MD Internal Medicine Portland, OR
185. Krysta Schlis, MD, Pediatric Oncology
186. Charles Culbertson, DO, hospitalist
187. Simona A Parau, MD, Internal Medicine, Legacy Health
188. Amanda Kim, MD (neonatology)
189. Evan Shereck, MD, MEd, pediatric oncology, Portland, OR
190. Kristina Haley, DO pediatric hematology/oncology Portland, OR
191. Monica DeMasi, MD. Family medicine
192. Tovi Anderson, MD, PhD, Family Medicine
193. Amelia Baker, MD, PhD, Portland, Family Medicine with Obstetrics
194. Tracy Peck, MD, Pediatrics
195. James Tycast, MD Sherwood, Oregon
196. Jerod A Cottrill, DO (Physical Medicine & Rehabilitation, Portland, OR)
197. Eneida Nemecek, MD, MBA, FAAP - Professor of Pediatrics, Oregon Health & Science University
198. Katharine Zuckerman MD MPH; General Pediatrics, OHSU
199. Rex Puterbaugh MD, Portland Pediatrician

200. Andrea Matsumura MD Portland
201. Louise Vaz MD, MPH Portland OR (Pediatric Infectious Diseases)
202. Sara Cannon, MD. The Children's Clinic, Tualatin, Pediatrician
203. Natasha Pereira, MD
204. Vesna Jovanovic MD, Family Medicine
205. Barry DeGregorio, MD, Portland OR, Northwest Gastroenterology Clinic
206. Deborah Lewinsohn, MD. Pediatric Infectious Disease
207. Audrey Unrau , MD Pediatrician TheChildren's clinic, PC
208. Julie A Fiene-Yeager, MD; Pediatrician at The Children's Clinic, Tualatin, OR
209. Sandy Sequeira, MD-Happy Valley, OR
210. Kristin Wallis, MD, pediatrician, The Children's Clinic
211. Robin E. Robbins, MD, Portland, OR (anesthesiologist)
212. Donna Givens, MD, Family Physician, Grants Pass, OR
213. Christina Lancioni, MD. Pediatric Infectious Diseases
214. Carrie Phillipi MD, PhD Professor of Pediatrics Oregon Health & Science University
215. Patra Behary MD, West Linn, OR
216. Dawn Nolt, MD MPH, Pediatric Infections Diseases, Doernbecher Children's Hospital
217. Benjamin Hoffman MD CPST-I, Doernbecher Children's Hospital, Portland
218. Alison Christy, MD PhD, Portland (pediatric neurology, Providence St Vincent)
219. Bronwyn Baz, MD, FAAP, Portland, OR
220. Dmitry Dukhovny, MD MPH, Oregon Health & Science University, Neonatology/Pediatrics
221. Danny Hsia MD, OHSU Pediatric pulmonary
222. Julie Martchenke, PNP Portland
223. Andrew Henning FNP @ OHSU Doernbecher

224. Carrie Miles, MD, MPH
225. Melinda Wu, MD; Doernbecher Children's Hospital (Pediatric Hematology/Oncology)
226. Berkle Robins, MD
227. Jason Coryell, MD (Pediatrics, OHSU)
228. Sandra A Banta-Wright, PhD, RN, NNP-BC, OHSU, SON, PNP program
229. Asma A. Taha, PHD, RN, OHSU School of Nursing
230. Ramya Ramraj MD Kaiser NWP
231. Ines Guttmann -Bauman, MD, OHSU Department of Pediatrics
232. Kelly Keller, Physician Assistant Pediatric Endocrinology and Diabetes
233. Arthur C. Jaffe, MD, FAAP, Portland
234. Melissa Weddle, MD, MPH, OHSU, General Pediatrics
235. Erin Madriago, MD OHSU (Pediatric Cardiology)
236. Tracy Bumsted, MD, MPH, Portland, Oregon General Pediatrician
237. Lisa Madison, MD, Portland, OR
238. Ilia Fong, Au.D., CCC-A, Pediatric Audiologist at CDRC
239. Matthew Halsey, MD OHSU Portland, OR Pediatric Orthopedic Surgeon
240. Meysam Asgari, PhD. Computer Science; Oregon Health & Science University
241. Jeffrey L. Koh, MD, MBA
242. Meredith Kato, MD
243. Kirk Lalwani MD FRCA MCR , OHSU Professor of Anesthesiology and Pediatrics
244. Michael Recht, MD, PhD OHSU
245. Jared Austin, MD, Oregon Health and Science University, Pediatric Hospital Medicine
246. Erin Burns, MD. Pediatric Critical Care, Portland, OR
247. Erika Finanger, MD OHSU Pediatric Neurology
248. Meganne Leach, MSN PPCNP-BC, Pediatric Neuromuscular Diseases at

OHSU and Shriners Portland

249. Kyle P Johnson, MD, OHSU Child and Adolescent Psychiatry
250. Colin Roberts MD, Pediatric Neurology, OHSU/Doernbecher
251. Kenneth Azarow, MD Pediatric Surgery OHSU
252. Kimberly Felder, PA-C Doernbecher Pediatric Infectious Diseases
253. Elizabeth Super, MD Doernbecher OHSU
254. Heike Gries, MD, PhD Portland, Oregon
255. Wayne Sells, MD Division of Adolescent Health, OHSU
256. Marguerite Stewart MD OB/GYN
257. Emmanuelle Pare, MD, MSCE. Portland, OR. OBGYN/MFM
258. Amira Baker, MD
259. Jillian Sanford, MD
260. Brian K. Jordan, MD PhD
261. Gregory S. Blaschke, MD, MPH, FAAP Portland, OR
262. Mario C Petersen, MD, Eugene
263. Jay Rosenbloom MD, Pediatrician, Tigard, OR
264. Andrea Frank CPNP OHSU
265. Jamie B Warren, MD MPH, Neonatology Oregon Health & Science University
266. Sarah Moore, MD/MPH, internal medicine, Legacy Health
267. Dean Laochamroonvorapongse, MD, MPH Portland, OR
268. Paula Vanderford, MD, Portland OR, Pediatric Critical Care, OHSU
269. Megan Jacobs, MD Pediatrics & Adolescent Health OHSU
270. Cydni Williams, MD; Oregon Health and Science University Portland Oregon
271. Laurel Hoffmann, MD MPH, Pediatrics at OHSU
272. Kelly Anderson MSN FNP
273. Stephen H. LaFranchi, MD Department of Pediatrics, OHSU, Portland, OR

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- 274. David A Kube, MD, Pediatrics, OHSU
- 275. Misha Ownbey, MD - Portland, OR
- 276. Nicholas Boespflug, MD/PhD, Emergency Medicine Tuality/OHSU ED
- 277. Laura Ibsen, MD. Pediatric Critical Care, Doernbecher Children's Hospital, Portland, Oreogn
- 278. David Jones MD OHSU Emergency Medicine Portland, OR
- 279. Henry Milczuk, MD. Portland
- 280. Lydia A. Fusetti, MD
- 281. Andrea Johnson DO - Doernbecher Pediatric Anesthesia
- 282. Mary Tanski MD MBA. OHSU Emergency Medicine
- 283. Alex Skog, MD Portland, OR. Emergency Medicine
- 284. Stephen Donnelly, MD Assistant Professor of Emergency Medicine, OHSU
- 285. Johanna Warren MD, Family Medicine, OHSU, Portland OR
- 286. Meera Kanakia, ANP Portland or
- 287. Rebecca Loret de Mola, DO
- 288. Laura Murphy MD, The Childrens Clinic, Tualatin OR
- 289. Kathryn A Woods MBBS MD (Pediatric Endocrinologist, OHSU)
- 290. Resa Bradeen, MD Portland, OR
- 291. Jane Xiao, MD, OHSU Emergency Medicine
- 292. Allison Empey, MD (OHSU Department of Pediatrics)
- 293. Sheevaun Khaki MD. Oregon Health and Science University
- 294. Jessica Fowler, MD Tualatin, OR Ob/Gyn
- 295. Alice King, MD, Clackamas Pediatrics
- 296. Peter Blasco MD, Neurodevelopmental Pediatrics, Institute on Development and Disability, OHSU
- 297. Yvonne Wang, MD (pediatric emergency medicine, Oregon Health & Science

University)

298. Kara Connelly, MD - Pediatric Endocrinology
299. Will Loker MD OHSU
300. Vishal Khemlani MD - Anesthesiologist and Pain Medicine Specialist
301. John Moorhead MD, Portland, OR
302. Katie Mansour, FNP
303. Bory Kea, MD, MCR: Portland, OR, Emergency Medicine, OHSU
304. Rosmili Villavicencio-Dunlap, MS-FNP, Portland, Oregon
305. Margaret Pattison, MD, Eugene, OR Emergency Medicine
306. Adam Blumenberg, MD MA, Portland, OR, Emergency Medicine and Toxicology
307. Ryan Hassan
308. Miles S. Ellenby, MD - Pediatric Critical Care Medicine - OHSU Doernbecher Children's Hospital
309. Sharlene Matthieu, MD Primary Care Pediatrician in Southeast Portland
310. Amy Garcia, MD OHSU (Pediatric Gastroenterology)
311. Robert G. Hendrickson, MD; Professor of Emergency Medicine, OHSU/Doernbecher;
312. Jennifer L Soden, MD, FAAP, Portland, OR, pediatrician
313. Kylee M Miller, PhD, OHSU, CDRC Eugene, OR
314. Elizabeth Estabrook, MD, MRCP, FHM Portland, OR
315. Catherine Wong, MD Portland
316. Robert L. Norton, MD, Professor Emeritus and Adjunct Professor of Emergency Medicine OHSU
317. Brandon Maughan, MD (OHSU)
318. James Resk, MD (Pediatrics)
319. Jenny Hoelter, MD, Pediatrician, Salem
320. Linda Stork, MD, Portland,

321. Kristan Collins MD Pediatrics Happy Valley
322. Whitney Casares, MD, Pediatrician, Portland, OR
323. Kylie Clark, MD, board certified pediatrician (Oregon Pediatrics)
324. Jaleh Olson MD, Family Medicine with OB
325. Jacqueline be3rnard MD FAAN Neurology OHSU
326. Jennifer Lanning, MD, Emergency Medicine, Vancouver, WA
327. Sarah Skog, MD, Family Medicine, Portland, OR
328. Sara Schwanke Khilji MD MPH, Portland, OR
329. Katherine Putnam, MD MPH, OHSU, Family Medicine, Resident Physician
330. Kristopher Azevedo, MD. Family Medicine, Portland.
331. Cindy McEvoy, MD; Oregon Health & Science University
332. Katharine Hopkins, MD, Pediatric Radiologist
333. Meri Harper, MD, Pediatrics, Lake Oswego
334. Pikulkaew Dachsangvorn, MD. Pediatric Anesthesiology. Oregon Health and Science University. Portland, Oregon
335. David Tilford, MD; Pediatric Hematology/Oncology; OHSU
336. Emily Olsen, PhD OHSU
337. Robert Steelman MD,DMD OHSU,Pediatric Critical Care Medicine
338. Janae Brill, MD, MPH, Canby, OR, Family Medicine
339. Dr. Gabriel Plourde MD/MPH OHSU
340. Bassam Hadeed MD
341. Kelsey Richardson, MD Pediatric Nephrology OHSU
342. Mary Ellen Ulmer, MD, FAAP Pediatrician, The Portland Clinic-Beaverton
343. Barbara Harden, M.S., CCC-SLP (Eugene, Oregon CDRC)
344. Alisa Gifford MMS PA-C emergency medicine
345. Elizabeth Pedigo, MD Assistant Professor Pediatric Anesthesiology at OHSU Doernbecher Children's Hospital

346. Barbara H. Sniffen, DO Oregon City, OR
347. Benjamin Colburn, MD
348. Sarah Deverman, MD OHSU
349. Michael W. Kelber, MD
350. Justin Lee, MD, Portland OR, Family Medicine
351. Jennifer Bevacqua, Pediatric Nurse Practitioner, OHSU, Portland OR
352. Gregroy D. Emmerich M.D. Pediatrician Gresham, OR
353. Karen Ulloth MD. Lake Oswego , OR
354. Caitlin Williamson, MD, OHSU Family Medicine
355. Randall Jenkins MD, Division Head; Pediatric Nephrology
356. Amy Cantor, MD
357. Andrew J Sowles, PharmD, BCPS, BCACP, BC-ADM Salem Oregon
358. Charles P. Essex, MD Family Practice, Salem Health Medical Group
359. Anthony Ferroggiaro
360. David J Rozansky MD, PhD, Pediatric Nephrology OHSU/Doernbecher
361. Cigdem Toroslu, MD Portland, Oregon pediatrician
362. Angeles Pena, MD MPH Pediatrician, OHSU
363. Christina Ronai, MD Portland OR
364. Shana Kusin, MD; Emergency Medicine, Medical Toxicology, and Occupational Health. Portland, OR.
365. Diana Villanueva, MD, Salem Health Urgent Care clinic
366. Beech Burns, Pediatric Emergency Medicine, Oregon Health and Science University
367. Amy Soleta, MD, Pediatric Anesthesiologist, OHSU-DCH, Portland, OR
368. Amit Mehta, MD; Portland, OR
369. Chelsea Doherty MSN, OHSU
370. Alfredo Sabbaj MD. Emergency Medicine OHSU

371. Dominic Caruso, MD, family medicine resident at OHSU
372. Michelle Rasmussen, MD, Salem Oregon
373. Hyojin Sung, PharmD and Salem, Oregon
374. R. Todd Clark, MD, OHSU
375. Erin Campaigniac, MD
376. Jessica Cody, MD - OHSU Family Medicine Resident
377. Fara Etzel, MD, MS, Pediatric Hospitalist, Salem Health
378. James Heilman, MD Emergency Medicine OHSU
379. Thomas Valvano, MD, JD, Doernbecher Children, Associate Professor of Pediatrics, OHSU
380. Brenna Lewis, MD Bend, OR Pediatrician
381. Jordana McDonald, FNP-c, Salem Health Occupational Medicine, Salem, Oregon
382. William Hersh, MD, Portland, OR
383. Roheet Kakaday, MD (Family Medicine, OHSU)
384. Claire Zeigler, MD MPH, Portland OR
385. Aaron Spaugy, DO, Portland, OR
386. Paula Bednarek, MD, MPH (OB/Gyn, OHSU)
387. Katie Au, MD, Obstetrics & gynecology, Portland, Oregon Health & Science University
388. Lisa Kipersztok, MD, resident family medicine physician, OHSU Richmond Clinic
389. June M DeSimone MD Pediatrics, Broadway Medical Clinic
390. David Sheridan MD MCR; Portland OR
391. Patty Tran, DO, OHSU
392. Sima Desai MD (OHSU)
393. Stephanie Halvorson, MD Portland OR
394. Josh Kornegay MD OHSU department of Emergency Medicine

395. Cheryl Hanna MD
396. Natasha Carmichael, MS CDRC
397. Dr. Clotilde Johnson-Beale, MD, Pediatrician
398. R. Adam Kellis MD Family Medicine
399. Anushka Shenoy, MD, Portland, OR
400. Sarah Nagle, MD OHSU Hematology/Oncology
401. Todd Huffman, MD Pediatrics
402. Ladawna Gievers, MD, OHSU
403. Ross Bryan, MD. Northwest Acute Care Specialists, Legacy Mt. Hood Medical Center, Gresham, OR
404. Julie Hay PA-C at OHSU/Tuality ED
405. Erika Beard-Irvine MD, pediatrics, Bend
406. Johanna Nesse FNP-BC, family practice
407. Suzanne Kavet, PNP Doernbecher OHSU Portland OR
408. Punam Hugo, DO Portland Emergency Medicine
409. Stephanie Sari, MD, Pediatrician in Gresham, OR
410. Robin Telerant, MD PORTLAND, OR
411. Ann Tseng, MD - Family Medicine Portland Oregon
412. Mandilin Hudson, DO Corvallis, OR Psychiatry
413. Eric Wiser MD, Portland
414. April Crofut, MD Portland
415. Robert Duffy, DO MPH - Portland
416. Heather Penny, MD Portland, Family Medicine
417. Robina Ingram-Rich, BSN, MS, MPH OHSU Portland
418. Sean Robinson, MD; Family Physician; Portland, OR
419. Tania Shaw MD, PORTLAND OR, emergency physician

420. Nicholas C. Welter, MD OHSU
421. Linda B Deppe, DO, Family Medicine, Milwaukie, Oregon
422. Michael P. Smith, DNP-FNP, Salem Health Urgent Care
423. Seema Kapadia Steel, D.O./Portland, OR/Family Medicine Hospitalist
424. Karen A Oyama, M.D., pathologist
425. Alison Ma MD
426. Stacy Valenzuela, MD, Emergency Medicine
427. Monina Pascua, MD, Tualatin, OR
428. Kathy Jorda, MD Portland OR
429. David Lawrence, PA-C. Emergency / Observation medicine physician assistant at OHSU.
430. Mary Miller, M.D. (Pediatrician at Gladstone Community Clinic)
431. Sylvana Bennett MD OB/GYN
432. Alexandra Butler, MD, Pediatric Hospitalist
433. Michelle Delplanche, MD; Vancouver, WA
434. Hilary Redden, MD Medford, OR Neonatology
435. Angie Reynolds MD, Portland OR
436. Elise Newman MD
437. Valerie Ing, DO, Hospitalist, Portland, OR
438. Regan Duffy, MD MPH Portland
439. Anne-Marie McCoy, MD Family Medicine, Lake Oswego, OR
440. Sandra Rood, MD, Pediatrician
441. Amber An, D.O., Vancouver WA/Portland OR
442. Kathy Shaw, MD. Family Medicine, Northwest Permanente
443. Terry Moy-Brown, DO, MPH, FACEP
444. Stephanie Coates, MD FCCP Portland OR. Pulmonary and Critical Care Medicine

445. Cezary Wójcik MD, PhD, FNLA - family medicine, OHSU Gabriel Park clinic
446. Tamara M Grigsby, MD
447. James S. Lewis, Pharm.D., FIDSA. Oregon Health & Science University
448. Justin Sales MD, MPH. Portland, OR
449. Thao M Nguyen, MD (pediatric emergency physician), mother of 3 kids under 3, Lake Oswego, OR
450. Amy Bednar, MD; Legacy Maternal Fetal Medicine
451. Danna Ogden, DO Portland
452. Diane K Rosonke, MD - Emergency Medicine
453. Peter Auerbach, MD; Pediatric Emergency Medicine; Randall Children's Hospital at Legacy Emanuel
454. Elizabeth Reding, DO - internal medicine
455. Erica Delgado MD Internal Medicine
456. Karen Maury, MD, MS Emergency Physician
457. James T. Suchy, MD; Portland, Oregon
458. Mustafa Alavi, MD - OHSU Family Medicine
459. Lydia Chiang, MD - pediatrician at OHSU/Doernbecher Hospital
460. Marissa Dorau PA-C, pediatrics
461. Mark J Merkens, MD, Professor of Pediatrics, OHSU
462. Samir Shehab, MD (pediatrician, Portland, OR and Vancouver, WA)
463. Kamala Randolph, MD, Tanasbourne Pediatrics
464. Arian Nachat, MD, Emergency Med, Hospice & Palliative Med
465. Kristin Lottig, MD Vancouver, Wa (Pediatrics)
466. Kelli C. Lund, MD, Neonatology
467. Shannon M. Theis, Ph.D., Assistant Professor of Pediatrics, Oregon Health & Science University
468. Sheila Jhansale MD Internal Medicine Eugene, OR
469. Yasemen Eroglu, MD, Associate Professor, Department of Pediatrics, Oregon

Health & Science University

- 470. John Carter MD, PhD, Pediatric Oncology, OHSU, Portland OR
- 471. Mark Buchholz MD, Portland
- 472. Rita M Lahlou, MD MPH, Family Physician, OHSU, Portland, Oregon
- 473. Jamie Rubin, MD in Portland, OR
- 474. Debbie L Miller, MD
- 475. Ross Bryan, MD. Northwest Acute Care Specialists, Legacy Mt. Hood Medical Center, Gresham, OR
- 476. Lynn A West ANP; Salem Health Medical Group, Salem Oregon
- 477. Serena Kelly MS OHSU
- 478. Annette M. Lopez, MD
- 479. Jordan Laub, MD, MS, MPH (attending emergency physician Legacy Mt Hood MC)
- 480. Ella Clark-Nicholson, MPAS, PA-C, OHSU Family Medicine at Gabriel Park
- 481. Brisa Jessup, RN, PNP student
- 482. Mary Lee Baker MD, Pediatrics, Broadway Medical Clinic , Portland OR
- 483. Joanne DeVore, MD. Pediatrician, Portland OR
- 484. Alex Kipp MD
- 485. Stewart Decker, MD, Klamath Falls, Family Medicine
- 486. Susan Lindemulder, MD, MCR Portland, OR, Pediatric Hematology/Oncology
- 487. Ellen Stevenson, MD, MPH, Portland, OR
- 488. Jennifer Siebold, CPNP
- 489. Kellie Nazemi MD (OHSU)
- 490. Shaili Rajput, MD, MPH / Portland, OR / Pediatrics / Kaiser Permanente

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491. Vinaya Pai MD, Lake Oswego
492. Christa Schulz, MD, FAAP; Pediatric Hospitalist
493. Ryan Hassan MD MPH, Pediatrician, Happy Valley
494. Luke Strnad, MD, Assistant Professor of Medicine, Division of Infectious Diseases, OHSU
495. Erin Bonura, MD, MCR Portland, OR (Infectious Disease)
496. Claire Unruh, DO, Family Medicine resident
497. Amber Diaz, PharmD, Blood and Marrow Transplant Pharmacist at OHSU
498. Regan M. Duffy, MD MPH, Portland (medical oncology)
499. Aimee Kwon, MD; Pediatric Hospitalist in Bend OR
500. Karen Heisler, MD, Salem OR
501. Douglas Thayer MD. Albany

From: robintittle@gmail.com
To: [JWMHS Exhibits](#)
Subject: In support of HB3063
Date: Monday, April 22, 2019 9:54:59 PM

Dear Joint Human Services Committee,

My name is Robin Tittle and I am an internal medicine physician at the Portland Veterans Administration Medical Center writing to urge your support of HB 3063, which seeks to remove the non-medical vaccine exemption from Oregon law.

I am not only a physician but also mom of two young children, 5 months and 2 years old. I am writing you today in both these roles to express my significant concern over the recent measles outbreak but more broadly over the high (and apparently increasing) percentage of families who have opted out of vaccinating their young children for non-medical reasons.

While this issue has been presented as a matter of personal choice, it is actually an issue of public health and public safety. I have to worry about where I take my 5 month old child because he is too young to be vaccinated. One of the key times in which we legislate to limit some people's freedoms is when they encroach on the freedom and safety of others, and this is one of those times.

In addition, as a physician, it worries me that by allowing parents to opt out of vaccines for their children, we are validating a belief system that has been debunked by extensive research. This is not a matter of differing opinions; there is significant scientific evidence to show the safety of vaccinations, and it is time that we stopped letting a small group of very vocal advocates of false ideas dominate the discussion.

Finally, I have had the humbling opportunity to work with healthcare professionals around the world, including colleagues currently working in Liberia and Mali. These countries see frequent and devastating outbreaks of diseases like measles, killing many young children. We too often forget what an enormous privilege it is to live in a country with a public health system that protects our whole population.

Vaccines save lives. Please support HB 3063!

Thank you,

Robin Tittle, MD MS
Assistant Professor, Oregon Health and Sciences University
Academic Hospitalist, Portland VA

From: [Rochelle Zins](#)
To: [JWMHS Exhibits](#)
Subject: Please vote NO on HB 3063
Date: Tuesday, April 23, 2019 7:39:59 PM

Where there is RISK, there must be CHOICE. HB 3063 violates our constitutional rights and the Nuremburg Code.

Sincerely,

Rochelle Zins

----- Forwarded message -----

From: **Rochelle Zins** <auroratattoo@gmail.com>
Date: Thu, Apr 4, 2019, 6:57 PM
Subject: Please vote NO on HB3063
To: <Rep.KimWallan@oregonlegislature.gov>

Hi Kim,

I am contacting you in reference to HB3063. This bill has been proposed requiring children to be fully vaccinated, without exception, or risk expulsion from their public or charter school. This bill also requires adults attending a state university, to be fully vaccinated in order to continue their education. I respectfully ask that you vote NO on this bill.

I am not a parent against vaccines; however, I believe it should be a parent's choice what goes into their child's body and how their child receives medical treatment. This bill is also a constitutional violation in which certain persons who decline vaccinations due to their religious beliefs would now have the State of Oregon infringing on those beliefs. This bill does not hold true to our Constitution and does not reflect our American values of liberty and justice.

I understand that a child may be homeschooled by their parents alone or online in order to avoid vaccination; however, any child that is homeschooled through enrollment in a charter school would also be required to be fully vaccinated. Many parents choose this option over standard public education to ensure their child is progressing appropriately in their education, participates in standardized testing, and has the resources/ support of an accredited teacher while enjoying the benefits of an individualized education at home. It makes no sense that these children also be required to be vaccinated.

This bill extends not just to children attending public school, but ANY child that wishes to participate in sports held at a public school facility. Even partially vaccinated children would not be allowed to attend ANY school function including a family member's graduation.

In addition, the timeline given to comply with these vaccination requirements is unrealistic for children that are completely unvaccinated. One could not possibly be able to fully complete the schedule of vaccinations safely in time for the start of the 2019-20 school year, especially with schedules that require 3 different injections spaced months apart. This is not even close to a sufficient grace period and puts many children at risk of further injury if parents are forced to comply.

Most families cannot afford to be a single income households and exclusively homeschool their children.

I also do not agree that adults should be required to be fully vaccinated in order to continue their education. As an adult your access to education, improving your life, and that of your family's life should not hinge on your

vaccination record. I have a personal history of cancer and would love to go back to school for my master's degree in Chemistry; however, due to the auto immune nature of the illness I am in remission from, I do not feel comfortable receiving boosters to the vaccinations I have received or becoming fully vaccinated to the ones I have not received.

I truly appreciate you taking the time to read this e-mail and consider the many consequences bill HB3063 would produce.

Sincerely,

Rochelle Zins

From: [Rose Chuong](#)
To: [JWMHS Exhibits](#)
Subject: Bill HB 3063 - SUPPORT
Date: Tuesday, April 23, 2019 7:14:35 AM

Dear Governor Kate Brown,

As a Medical Student at Oregon Health and Science University, I am writing on behalf of medical professionals everywhere, to urge action on non-medical exemptions from state immunization laws.

I am very concerned about the recent surge in vaccine preventable diseases such as measles. In 2018, there were 372 confirmed cases of measles; and already, this year, there have been close to 626 individuals confirmed with measles in 22 states. Indeed, Oregon and Southwest Washington have seen one of the largest recent outbreaks of measles in our country.

Vaccines protect the health of children and adults and save lives, especially those in our community who are most vulnerable. They prevent life-threatening diseases and certain forms of cancer.

Claims that vaccines are unsafe or may cause autism have been disproven by a robust body of medical literature including a recent Danish [study](#), published in the Annals of Internal Medicine, that shows that "MMR vaccination does not increase the risk for autism, does not trigger autism in susceptible children, and is not associated with clustering of autism cases after vaccination."

[Data](#) show that just for children born in the United States in 2009, routine childhood immunizations will prevent approximately 42,000 early deaths and 20 million cases of disease with savings of more than \$82 billion in societal costs.

Outbreaks of vaccine-preventable diseases have been linked to communities of unvaccinated and under vaccinated individuals.

We urge you to support House Bill 3063. We are counting on your support to take the necessary action to protect the health and welfare of patients in our state.

Yours truly,

Rose Chuong

Medical Student, Oregon Health & Science University

From: [Rowena Pool](#)
To: [JWMHS Exhibits](#)
Subject: Questions to consider for HB3063
Date: Tuesday, April 23, 2019 11:12:20 AM

Dear committee members,

As you are deciding on the fate of HB3063, I ask the committee to consider the following questions:

If your doctor said you shouldn't take the certain medication because of a pre-existing condition in your personal or family history, would you follow your doctor's recommendation?

What if the government said you must take the medicine regardless of your personal or family history because your condition doesn't match with the governments exclusion code?

Would you follow the advice of your doctor who knows yo, or the advice of the government agency?

If you were prescribed a medication that caused you to have: a progressive or unstable neurological disorder, or induced spasms, or caused you to have uncontrolled epilepsy, or uncontrolled seizures, or spike a high fever, or develop a progressive encephalopathy, or caused you to collapse or react in a shock-like state, or caused you to scream in pain for more than 3 hours, would you take that medicine again?

What if the government prohibited you from attending concerts, and sporting events, and plays, and from going to work unless you take the medicine again?
Would you surrender to the government?

Would you passively participate in the abortion, dismemberment and dissection of innocent babies so that you could take a medication for an illness that you don't have and may never get?

What if the government banned you from all social interactions with your peers until you agree to take medication that was derived from tissue of a healthy aborted baby?

Would you abstain from the medication until a moral alternative was available or would you take the medication under government duress?

Thank you for considering my questions. I trust that your committee will protect the rights, the freedom, and the duty of parents to make informed health care and moral decisions for their children.

Rowena Pool

541-619-1374

From: [Roxie Covell](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063 *** URGENT ***
Date: Wednesday, April 24, 2019 2:06:29 PM

Greeting and thank you for reading and considering my plea against HB3063.

I am emailing about the House Bill HB 3063 that would impose mandatory vaccinations. There are millions of children with genetic mutations who should not be vaccinated. The estimate is that 40% of the population has the MTHFR mutation which can cause people to have vaccine reactions. These are not tested for before children are vaccinated.

****MANY DO NOT KNOW THIS FACT****

Autism has reached 1 in 50 children now, and the CDC is under investigation for fraud about the issue. It is not settled by any means. New regulations are being proposed to force vaccinations on most of the population including pregnant women, when no vaccine has been tested on pregnant women or the effects on the developing fetus. Forced vaccinations without a choice or informed consent is not what this country is about. The very fact that there has been not one measles death in 10 years but there have been 87 deaths reported from the MMR vaccine.

Since only 10% of the injuries get reported, that number could be as high as 8700. Parents shouldn't have to choose to maim or injure their children to protect someone else's. You need both sides of the issue represented. I am against legislation that forces dangerous vaccines on the population.

No threat compares to or are as dangerous as the present coordinated attack against the God-given and civil rights of ordinary men, woman and children and physicians that are against mandatory vaccination for themselves and for their families based on personal, conscience, medical and/or religious rights, which are God-given, and reflected in Common Law, the U.S. Constitution, international law and Ecclesiasticall law.

This attack on our right to avoid vaccination is resulting in mental and physical harm to tens of thousands of vaccine-injured victims and is being orchestrated and carried out by the major vaccine pharmaceutical industry giants: Sanofi Pasteur, Pfizer, Merck, GlaxoSmithKline, through lackeys in legislative positions, both Republican and Democrat.”

Myself and my family appreciate your support in the form of action and your prayers for our successful mailing campaign in these difficult times that will soon define if our nation will go pro-mandatory or pro-choice on vaccines.

A reminder to those of Faith base the ingredients of aborted fetal DNA/blood reside in these vaccines are are a complete command to not ingest the blood of others. You will be cut off. Help us fellow Christians, Catholics, Jehovah Witnesses and those of the same affinity in honoring the Bibles commands and keeping our religious exemptions free from this mandatory apostasy.

Leviticus 17:14 14 For the life of every sort of flesh is its blood, because the life is in it. Consequently, I said to the Israelites: “You must not eat the blood of any sort of flesh because the life of every sort of flesh is its blood. Anyone eating it will be cut off.”

Genesis 9:4 4 Only flesh with its life—its blood—you must not eat.

Deuteronomy 12:23 23 Just be firmly resolved not to eat the blood, because the blood is the life, and you must not eat the life with the flesh.

Acts 15:28, 29 28 For the holy spirit and we ourselves have favored adding no further

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burden to you except these necessary things: to keep abstaining from things sacrificed to idols, from blood, from what is strangled, and from sexual immorality. If you carefully keep yourselves from these things, you will prosper. Good health to you!”



Virus-free. www.avast.com

From: [Roy Thomas](#)
To: [JWMHS Exhibits](#)
Subject: Public testimony HB 3063
Date: Tuesday, April 23, 2019 7:40:47 PM

Dear esteemed committee members,

My name is Roy Thomas and I live in Medford, Oregon. I am writing to you today as a father of a toddler and infant to ask you to vote NO on HB3063 and all amendments.

My wife and I have educated ourselves well on the benefits and risks of each vaccine offered. We've evaluated our child's personal risks of exposure as well as protective factors. It is our right and duty to make medical choices that are in the best interest of our children's safety and wellness. If we choose to exempt our children from one or several vaccines that we do not believe have adequately been proven safe, it is inappropriate for the state to hold public education hostage, particularly considering that some of the 31 required vaccines are for non-communicable diseases.

Additionally, I am concerned for the impact this bill will have on rural schools in our area and alternative charter schools, which I would be interested in my toddler attending in a few years. Currently there are 31,521 students whom this bill would impact. What about families like mine with young children not yet school-aged? What about all of the hundreds of thousands of children this bill will impact in Oregon over the next several years? Access to public education is a foundation for a healthy democracy should be protected!

Enacting mandatory vaccination is extreme government overreach and a violation of individual rights. Please protect philosophical and religious exemptions, medical informed choice and the right of informed parents to make the best choices for their children.

Thank you for your time and consideration.

Sincerely,

Roy Thomas

1700 Camellia Ave.

Medford, OR 97503
717-808-9969

My name is Ruth Martens.

I am a mother, grandmother, RN and a Christian.

I am asking you to vote NO on HB 3063.

This bill states “a child who is not immunized as required ... may not attend in person any school-related activities, events or meetings in which a child will share the same physical space as other individuals”. (Also see description of school in Section 4 of the bill.)

This raises some serious questions:

- 1) Does this mean children will be prohibited from attending church or “children’s activities” if the church also houses a state licensed preschool/daycare/school program on the premises?
- 2) Does this mean they will not be allowed to attend sports events, after school clubs, music programs, ceremonies, plays and many other things children love to do that are held at a school, a church or any place that houses a “school”? (Including activities their siblings are participating in.)
- 3) Does this mean children will be excluded from areas where field trips are taking place, even in areas of the capital when school groups are present? (This was discussed in the work session.)

It appears this bill will cause students to be segregated and stigmatized (due to negative attention) when excluded from classes, school functions, field trips, sibling’s events etc. and forced to be at home in isolation because they cannot participate in any face-to-face gatherings with classmates. Students will be restricted greatly in their interactions with others. They will be forced to give up their friends and not be able to develop new friendships.

It is known that children who are segregated are likely to have a whole host of mental health issues. They may be shunned and bullied resulting in an increased risk of depression and an increased risk of suicide.

Suicide is the number two cause of death for children in Oregon between the ages of 10-24. Over 100 children died from suicide in Oregon last year. This is the real health crisis in Oregon.

HB 3063 does not address these problems. I would like to know how the increased need for social and mental health services for school-age youth will be addressed both fiscally and in terms of moral repercussions if this bill passes.

From: [Ruth Nelson-Moore](#)
To: [JWMHS Exhibits](#)
Subject: HB 3063 testimonial
Date: Wednesday, April 24, 2019 11:49:38 PM

Dear The committee is Joint Subcommittee On Human Services,

My my name is Ruth Nelson-Moore and I'm writing on behalf of my family, which includes two daughters aged 5 and 11. I'm writing to testify against the passing of House Bill 3063. I love living in Oregon, I love living in the United States of America. Some things that I have grown to Value as a parent is my ability to choose what is right for my children and my family. I am not anti vaccinations. My children are partially vaccinated and I plan on completing their schedule, however I do not feel comfortable with the government telling me what I have to inject in them and when. This loss of parental control and medical freedom worries me greatly and could lead me to move out of this state that I love.

Can I urge you to consider the impact this bill will have on our state, our education system, I'm all the people employed in our Educational Systems, as people either move out of the state or begin home-schooling. I think there are other ways to work on this issue including vaccine education for vaccinated and unvaccinated children and their families as well as children who for medical reasons cannot receive a vaccination and who have immune compromised systems. There's a way to come together not out of fear but through education, I believe that it will be best for all Oregonians that this house bill will not pass and we can all work towards other Solutions.

Sincerely,
Ruth Nelson-Moore
Ashland, OR

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Ruth Nelson-Moore

Ruth Rhiannon Designs Jewelry Artist and Designer
Email: ruthrhiannondesigns@gmail.com
Phone: 541-292-1986

"Inspired by Nature"

From: [Ryan Hassan](#)
To: [JWMHS Exhibits](#)
Subject: House Bill 3063 Written Testimony
Date: Tuesday, April 23, 2019 11:19:31 AM

DATE February 23 2019
Support for HB 3063

Honorable Chair and Committee Members,

I am Dr. Ryan Hassan MD MPH, a pediatrician working at Oregon Pediatrics in Happy Valley, writing to urge your support of HB 3063, which seeks to remove the non-medical vaccine exemption from Oregon law.

The measles outbreak that started in an unvaccinated community in Clark County this January has so far led to over 60 children contracting the disease, almost 90% of whom are known to be unvaccinated, with most of the remaining having unverified vaccination status. As of this writing, 2 children whose parents vaccinated their children with the first dose of the MMR vaccine have also contracted the disease.

Children who have measles are at risk for potentially fatal complications such as pneumonia and encephalitis (infection of the brain). Even after they recover, these children will be at greater risk for infections for up to the next two years, due to the immune amnesia caused by the measles virus infecting the body's immune cells. Children under twelve months old who have been infected will be at risk for a condition called Subacute Sclerosing Panencephalitis. This is a progressive neurodegenerative disease that we cannot detect or prevent, that sometimes develops a decade or more after measles infection in infants, for which there is no cure. It is universally fatal.

If passed into law, HB3063 would require every child to be fully immunized prior to attending school in Oregon, unless there is a valid medical reason, such as being severely immunocompromised, that would render the vaccine potentially dangerous or ineffective. We know from experience that this kind of legislation will significantly increase childhood vaccination rates in the state, and reduce the risk that an unvaccinated child who contracts a vaccine-preventable disease will be able to spread that disease to others.

In my practice, I see many parents who choose not to protect their children with vaccines. They are usually intelligent, loving parents, guilty only of being conned by charlatans like Andrew Wakefield who prey on parental fears for profit. I do my best to address these fears with empathy and compassion and help parents make informed decisions about vaccinations. Despite my best efforts, though, many are still deceived by anti-vaccine propaganda. With this legislation, you have a chance to ensure that that propaganda is no longer allowed to endanger the children in our community who either cannot receive the vaccine or did not generate adequate immunity to the disease from the vaccine (1-15% of those vaccinated, depending on the vaccine). HB 3063 will help keep our children safe from unnecessary disease, hospitalization, and possibly death, and save hundreds of thousands of state tax dollars that will

otherwise be wasted on treating preventable-diseases.

Vaccines are the most well-studied, safe, effective, cost-saving, and life-saving medical treatment that mankind has ever created. Things that are more likely to seriously harm children

than vaccines include: Tylenol, antibiotics, "health supplements", gun injuries, car injuries, drowning, getting struck by lightning, eating processed foods, excess screen time, and, of course, living in a community with low vaccination rates.

Ryan Hassan MD MPH