

Linda Gemmell

Opposition testimony HB 559

May 23, 2018

Chairman Huffman, Vice chair Gavarone, ranking member Antonio and honorable members of the house committee. Thanks you for allowing me to speak to you today concerning my objections to House Bill 559.

My name is Linda Gemmell. I am a registered nurse with 33 plus years of experience.

I worked from 1984 until 1990 at Nationwide Children's (then Columbus Children's Hospital) on a busy surgical unit for children of all ages.

Autoimmune diseases such as Type one diabetes, Crohn's disease, and ulcerative colitis were all rare diseases. Celiac disease was a condition we only saw as a test question for our nursing exams. Ragweed was the only common allergy I would see listed on a History and Physical. Children rarely took medication. In the years I worked there I saw one patient with autism. One. I also saw one set of conjoined (Siamese) twins to give you some perspective

Chicken pox and rotavirus were common. I remember having to be tested at least once after a potential measles exposure. That was not a problem since I had most all childhood infections and have natural lifelong immunity.

Sometime in the 1990s, the local Dairy Queen near my home in Westerville---Rep Gonzales district...was featured in a national magazine article about a child with a peanut allergy. The magazine might have been Woman's Day or Better Homes and Gardens. I kept thinking...no peanut butter for a small child....what would you do? A friend gave me the magazine ---here was the Dairy Queen right by my home in a national magazine! (I have brought hard copies of all my sources today but I have not been able to locate this article. I checked at the Westerville library, the Historical section no luck. Perhaps Rep Gonzalez or someone else remembers this also).

Today, a school located directly across the street from this very same Dairy Queen does not permit any food to be brought into the school to celebrate a student's birthday. This is required because they have too many students with food allergies. Today we have a whole school in Westerville just for Autistic children. Autoimmune diseases are skyrocketing. Children have increased rates of type one diabetes, asthma, and even psoriasis, eczema and arthritis. Parents carry epi pens! A friend told me that on a recent trip for 8<sup>th</sup> graders to Washington DC that at least one half of the children were taking some type of prescription medications.

This has happened in one generation! I am convinced we must spend more time on finding out what is causing this epidemic of sick children and less time worrying about infections that were nothing more

than a nuisance in previous generations. I do NOT know if all this is related to the terrific increase in vaccinations.

But...I do know that when I first looked at the 2016 schedules and compared them to the 1980s I was shocked. 24 vaccines in the first year of life! There is money to be made in vaccines. The pharmaceutical company has noted in some reports to have made over 34 billion on vaccines alone.

And I do know.....These are the same pharmaceutical companies that convinced us that opioids were safe and effective in the 1990s. "Safe and effective". "Tested". "The science was settled". By this time I was working in an adult hospital. One of the Adult Hospital Medicare reimbursement bonus programs or 'quality indicators' (similar to the Quality of care bonus pediatricians receive) was tied to how patient reported their pain was controlled. Pain was considered 'The 5<sup>th</sup> vital sign'. I knew early on this had to be a farce. We had patients leaving the hospital to walk across the street to smoke a cigarette, walking back, then taking an elevator to the 9<sup>th</sup> floor and demanding intravenous opioid pain medication. Patients having sex in their hospital room but demanding IV opioid drugs.

Then we had the innocent patients who received prescriptions for pain medication at discharge. They promptly filled the scripts but never used them. They may have set on a bathroom shelf for years until a curious child or grandchild found them.

Even a murmur of perhaps we are creating drug addicts was met with 'pain is what the patient says it is'. The hospital hired staff to work as 'pain monitors'. Pain monitors audited charts and quizzed patients as to whether they were getting the medication they demanded.

Remember, a lot of reimbursement money depended on this. Giving this tremendous amount of opioids was not one of my proudest moments. But like others in the medical field, I had a child to raise, debt. I just had to keep my mouth shut and *hope all the experts knew what they were doing*.

Of course we all know how that turned out. We are in the midst of a heroin epidemic.

Today, I am a wound care nurse. There are days when my entire day may be spent caring for devastating IV drug abscesses, wounds caused by drug addiction.

Doctors administering vaccines should be discussing the risks and benefits to all of their patients already. The AAP National Vaccine Advisory Committee Standards of Care #7 clearly states that:

"Health care professionals should allow sufficient time with parents to discuss the benefits of vaccines, the diseases they prevent, and any known risks from vaccines. They are also required by law to give a VIS sheet (a vaccine information sheet) to parents or guardians at each visit".

Clearly, this bill is unnecessary if Doctors are already following their own standards of care, and schools are reporting the information that has been required for years.

I sincerely believe that in addition to this standard of care, patients and families should be receiving:

- Product inserts rather than just VIS forms.
- When discussing risks, they should make a copy of the VAER sheet available. (Vaccine Adverse events form). Parents would be able to review the most common adverse reactions other patients have noted

- Parents/guardians should be notified that by law (1986) that the physician, his/her office staff, and the pharmaceutical maker of the drug accepts absolutely NO responsibility for any bad outcomes.
- Parents should be informed of the VICF (vaccine injury compensation fund). They should be notified how much of the 3.75 billion dollars of payout for injuries have been given for the particular vaccines they are offering that day
- Parents should also be informed of the amount of "Quality of care bonus" the doctor will be receive for administering vaccinations. They should also be familiar with what rates of vaccination the Doctor needs to obtain to receive his or her bonus.
- Doctors should be forbidden from firing parents when they refuse to vaccinate according to schedule. If they are allowed to fire a parent for refusing a hepatitis vaccine, for example, will they also be allowed to refuse to see a patient with active hepatitis? Would these children be allowed to attend school?

I had never heard of the VICF or the VAERS reporting system until 2016 when I started learning more about the flu shot mandates. I have asked fellow healthcare coworkers. None of them have either. Yes, it is written at the bottom of the VIS for the flu shot that is mandated for all health care workers to receive.

I would be honored to work with the legislatures on a bill that would contain the above bullet points.

I sincerely believe this bill is a strong arm bullying tactic only to force parents to comply or be promptly removed from physician practices. This bill is a subtle sneak into removing any religious or philosophical exemption for a parent. This bill is a subtle attempt to take away parents' rights.

Nowhere in this bill does it contain language to reassure parents that they will not be removed from the Doctors practice--'fired' ---or forced to sign letters that they are putting their children's lives in danger and may be reported to Child Protective Services. Many speakers in the proponent testimony clearly stated they would NEVER wish to remove parents' rights to exemptions. Yet, this is just what the AAP has stated is their objective. Doctors have used terms like 'parents should be hung' or 'jailed' if they refuse to vaccinate. A recent dentist in Pennsylvania sent a parent a letter implying he was going to call Child Protective Services if the parent did not bring the child in for a dental check-up.

I sincerely believe this bullying would most impact single parents and those with lower incomes. It is easier to bully a single parent, and it would be much harder to find a new physician across town if you did not have a car and had to rely on public transportation.

I would like to lastly note as an RN currently employed as a wound care nurse that I would NEVER object to caring for any type of wound or infection. I care for flesh eating bacteria, draining pus filled wounds, rashes of unknown origin and much more. I would NEVER hesitate to care for someone because they had not had a vaccine. My immunity is my responsibility. I would NEVER hesitate to care for a patient that had a different religious view than mine. I would NEVER attempt to persuade a patient to adopt my religious beliefs. That is un-American.

Parents need a bill to protect them from medical practitioners who would attempt this type of strong arm bullying behavior NOT HB 559.

Sincerely,

*Linda Gemmell*