



December 6, 2021

Dear Chair Peterson, Vice Chair Cirino, and Ranking Senator Craig,

I am writing in opposition to HB218. I trust that others will address the safety and efficacy of mRNA vaccines and the adequacy of US Food and Drug Administration's Emergency Use Authorizations. I will, therefore, focus on the Bill's overly broad exemptions.

Permitting an individual to claim an exemption due to a medical contraindication based on a written statement signed by a physician who has a physician-patient relationship with the individual is insufficient. Physicians may, unfortunately, misunderstand the valid medical contraindications. Experience with childhood vaccination requirements has also demonstrated that some unprofessional physicians may provide such written statements for patients who are not in fact eligible. See, for example, Dyer O. California's medical board investigates doctors who write many vaccine exemptions. *BMJ*. 2019;367:l6231 available at <https://www.bmj.com/content/367/bmj.l6231>. At a minimum, institutions should be permitted to administratively review such statements, request supplemental information when necessary, and reject invalid requests.

While exemptions based on sincere religious beliefs that can be accommodated without undue burden should be permitted, permitting exemptions based on personal conscience documented in a written statement is also too broad. Having studied requests for religious exemptions to requirements to receive the influenza vaccine, see Antommaria AH, Prows CA. Content analysis of requests for religious exemptions from a mandatory influenza vaccination program for healthcare personnel. *J Med Ethics*. Jun 2018;44(6):389-391, we found that requests may be based on erroneous information. For example, individual may object to receiving the influenza vaccine because they falsely believe that this vaccine was developed or is produced using fetal cell lines. With respect to the COVID-19 vaccines, individuals may incorrectly believe that they contain pork products. Such exemption requests are not sound, and institutions should be permitted to request additional information from those seeking exemptions and reject requests based on demonstrably false empirical claims.

I urge you to oppose this bill because, in part, of its unduly broad exceptions which undermine essential public health goals.

Sincerely,

Armand H. Matheny Antommaria, MD, PhD