

Chairman Lipps, Vice Chair Holmes, Ranking Member Russo, and Members of the House Health Committee, thank you for the opportunity to provide proponent testimony on House Bill 248.

My name is Emily Welsh and I am a Registered Nurse. I have a Masters Degree in Nursing, and have been an emergency department nurse since 2014. The reason I support House Bill 248 is because three of the core tenants of healthcare ethics in the United States of America involves informed consent, medical autonomy, and healthcare privacy. In the midst of a pandemic, the call for disregard of these tenants for the 'greater good' can be compelling for some. However, the longitudinal effects of such a policy will cause more harm than the seemingly beneficial impact of blanket mandates. There are no two individuals that have identical medical backgrounds, therefore there cannot be a one-size-fits-all process for managing any condition. When a nurse or provider comes in contact with a patient, there are a multitude of factors that impact the decision making of caring for that patient. The patient's age, gender, medical history, surgical history, allergies, social history, vital signs, medication reconciliation, presenting illness/chief complaint, and physical exam... are just some of the factors that determine how best to care for that patient. These issues do not dissipate in the presence of a pandemic or consideration for recommendation of a medicine, including a vaccine.

Anecdotally, I can tell you I personally know people that have had significant long-term health complications from getting the COVID-19 vaccine after having recovered from contracting the virus: such as heart failure, blood clots, autoimmune disorders, and chronic migraines. To force people to choose between losing their livelihood or potential detrimental health effects from a medical intervention that potentially was unnecessary is barbaric. Anecdotally, I can also tell you that I personally developed symptoms of COVID-19 on December 3, 2020 and tested positive December 7, 2020. I contracted COVID-19 through working on the frontlines in an emergency department. I followed all the precautions that were recommended. Anyone that knows me will tell you that I am annoyingly persistent with following policy and protocol. And yet, I contracted the virus. I also have long-term post-infection effects. I, to this day, cannot smell anything (aside from a handful of moments of fleeting scents that dissipated quickly), I also have high heart rate with simple activities such as walking or standing (ranging from 110-160), and I have intermittent episodes of low oxygen levels (hypoxia). I have had a thorough work-up completed by my primary physician and obtained a cardiologist; I'm told eventually I will likely recover. Should I be forced to introduce another variable that could further complicate my health? For the sake of compliance with an encompassing mandate? I have heard the argument that it is unknown how long natural immunity persists. I can tell you

that as of August 11, 2021, I tested positive for both IgM and IgG antibodies for COVID-19. However, despite all this, I am slated to be fired from my job, where I worked through this entire pandemic, if I do not comply with a mandate to join the ranks of the vaccinated. I will not comply with this mandate. It is claimed that individuals can file for exemptions from this order, however, no human being should be subjected to forcibly divulging their personal health information, their personal religious beliefs, nor their personal medical decisions to their employer and be debased to plead for their right to medical autonomy, healthcare privacy, nor religious freedom while being stripped of their right to informed consent.

Allowing employers, agencies, and/or schools to discriminate against any human that cannot or will not get a medical treatment, such as a vaccine, is deplorable. While it is true that the longevity of natural immunity nor vaccine-induced immunity is not known, it is unreasonable and irresponsible to proceed based on fear, uncertainty and irrationality. Historically, individuals that have recovered from a virus, would not be encouraged to be inoculated with the vaccine for that virus. The absence of monitoring antibodies prior to inoculation in regard to COVID-19 is bewildering. The data will be forever contaminated. Insisting that all people receive a vaccine, without regard to their prior infection or consideration of their unique health history/risks, is malpractice. Ostracizing people from society based on their individual medical history is a crime. We cannot allow Ohio to engage in authoritarian policies.

Ohioans need their elected representatives to stand up for their individual rights over the rights of corporations, agencies, and institutions. Remember who you were elected to serve and the constitution you pledged an oath to uphold. It is imperative that you protect the citizens of this state by passing House Bill 248 with alacrity.

Thank you once again for this opportunity to provide testimony on the need for and urgency of enacting House Bill 248.

Sincerely,

Emily C. M. Welsh, MSN, RN