

HB1040: Health Occupations - Pharmacists - Administration of Vaccinations
OPPOSE
Love Maryland PAC

Dear Chair Pendergrass, Vice Chair Pena-Melnyk, and Distinguished Members of the Health and Government Operations Committee,

Our organization is very concerned about this bill and its potential impacts on the safety of children in our state and citizens that get prescriptions filled at pharmacies.

This bill came before the committee last session (HB530), with a minimum age of 9. It received an Unfavorable Report from the committee. Lowering the minimum age to 3-years-old only makes the bill more concerning and dangerous.

- Young children are not vaccinated like adults. They have a complicated “recommended” schedule by the CDC that requires an assessment to determine actual vaccine appropriateness. Issues such as allergies, diagnoses (autoimmunity, immune system dysfunction, immune system suppressing drugs), current health status, and previous adverse reactions to vaccinations are just some of the things that pediatricians consider before determining what vaccine a child should have in a visit. They do not go by a checklist. At well-visits, pediatricians perform a full physical examination and have the child’s entire medical and vaccination history, which they use to determine vaccine appropriateness. Pharmacists do not have this expertise.
- No one is liable if a pharmacist gives an inappropriate vaccine, or if they administer it incorrectly into a tiny 3-year-old arm. The Federal 1986 National Childhood Vaccine Injury Act removed liability from vaccine makers as well as the provider that administers the vaccine.
- If this bill were to become law, children would never go to see the pediatrician again. Pediatric well visits include a thorough physical exam and screenings for physical, mental and developmental milestones. These screenings allow referrals to help children who are showing signs of developmental struggles or other health diagnoses.
- Last year, the New York Times profiled the chaos that is occurring in American pharmacies. It is dangerous to have pharmacists stop filling a prescription every time a child gets in line for vaccinations.

<https://www.nytimes.com/2020/01/31/health/pharmacists-medication-errors.html>

- SIRVA (Shoulder Injury Related to Vaccine Administration) injuries have increased since people have started getting vaccines in pharmacies. This is a huge risk for a 3-year-old child who will not sit still and has a very small arm.
- Pharmacies want to give more vaccines to increase revenue. Per the attached article by pbahealth, “If you want to add profit to your bottom line, increase the number of immunizations that you’re doing.” Schaefer said. “Every single immunization that you do adds to your bottom line. There are no exceptions.” Currently, Pharmacists at major retail pharmacies, have quotas for the number of flu shots they must give and they are offered bonus incentives from their employers. Children’s healthcare must be based on examination, assessment, and diagnosis... not quotas and bonuses.

We respectfully ask, the Committee for an Unfavorable Report, especially this session when it is so difficult for citizens to testify.

Love Maryland PAC
Silver Spring, MD