

# Oppose SB 372

- 20 hours is not sufficient time to train for or gain experience to administer vaccines, especially to small children. It is well known that many injuries associated with receipt of vaccines are due to improper administration.

- Administration of vaccines to children without reviewing the child's medical chart, assessing contraindications, or evaluating the condition of the patient following the administration of the vaccine significantly increases the risk. Adverse reactions may be undetected and unreported to their primary care provider.

- The CDC Director clearly stated in the Congress that the only reason Covid vaccine was added to the childhood schedule was so it would be included in the Vaccines for Children program. There is compelling evidence that Covid vaccines confer more risk than benefit to patients aged 3-18. Pharmacists cannot accurately assess the risk versus benefit to pediatric patients. Decisions to give vaccines to children should be left with pediatricians working with the child's parents.

- There is no evidence that expanding the scope of providers licensed to administer vaccines to small children improves health outcomes for those children, while conversely there is apparent risk to children in doing so. There is strong evidence that the bill will do harm, thus it must be rejected.

Sincerely,  
Mark Meyerovich  
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