

ALAN CV 2022 053122.pdf

Uploaded by: Alan Vinitzky

Position: FAV

PERSONAL

Author, inventor, healer – passionate and caring – Alan R. Vinitzky has established a solid community and internet reputation as a quality primary care physician in pediatrics and internal medicine. His interests include assessing and treating the autonomic nervous system, preventing and curing chronic illness, sports, nutrition, behavior, and growth and development.

EDUCATION

1966-1970 B.S. Zoology, University of Maryland, College Park, Magna Cum Laude, Honors in Zoology and General Honors, Phi Beta Kappa
1970-1974 M.D., University of Pennsylvania School of Medicine, Philadelphia

RESIDENCIES

1974-1976 **Internal Medicine**, Upstate Medical Center, Syracuse, NY
1976-1978 **Pediatrics**, Children's Hospital of Philadelphia

BOARD CERTIFICATION - original

1977 American Board of Internal Medicine
1980 American Board of Pediatrics

EMPLOYMENT

1978-1979 *Hired as an associate Physician in a primary care setting*
Demonstrated skillful, sensitive handling of a diversity of patient health problems.
1979-1992 *Solo Practitioner* Established a solid reputation in the community as a provider of excellent care.
2001-2020 *Referral-based Practitioner*: special interest in autonomic dysfunction, chronic illnesses and conditions
1992-2001 *President, Vinitzky & Mizrahi Associates, Inc.*
Founded a 2-member physician corporation. Continued expert care, broadened interests and expanded services.

FACULTY POSITIONS

1980-2001 *Instructor, George Washington University for Children's Hospital National Medical Center*
1980-1995 *Instructor, Georgetown University Dept. of Community Medicine*
1985-1995 *Instructor, Georgetown University School of Nursing Nurse Practitioner Program*
2019 *Instructor, Purdue University Global, Master of Science in Nursing, Nurse Practitioner Program*

POSITIONS HELD

1982, 1985 **Chairman**, Department of Pediatrics, Shady Grove Adventist Hospital. Responsible for organizing the opening of in-house pediatrics coverage; overseeing the opening of the nursery.
1982, 1985 **Executive Committee**. Served with other medical department heads in hospital management.
1982-2007 **Pediatric Consultant**, The Maternity Center, Bethesda, MD (until center closed 6/30/07)
1986-1994 **Pediatric Review and Audit Committee**. Chart review for quality care. SGAH.
1979-2018 **Shady Grove Adventist Hospital, member, Active Staff** - Privileges in Pediatrics and Internal Medicine.
1980-1992 **Montgomery General Hospital**, Courtesy Staff, Pediatrics.
1980-1995 **Holy Cross Hospital**, Courtesy Staff, Pediatrics.
1986-1996 **Board of Directors, MCNET**. MCNET was a privately owned network of physicians in Montgomery County, Maryland. Decision-making and review of policy for the network.
1999-2001 **Board of Directors**, American Academy of Environmental Medicine
2002-2018 **Medical Education Committee**, member, Shady Grove Adventist Hospital
2013-2019 **Board of Directors**, Global Indoor Health Network
2015-2016 **Board of Directors**, Beautiful Mind Foundation

MEMBERSHIPS

- Montgomery County Medical Society
- Med Chi – Maryland State Medical Society
- American Academy of Environmental Medicine
- National Registry of Who's Who #122807, Life Member

- International Lyme and Associated Diseases Society

LECTURES, TEACHING & PUBLIC SPEAKING

- **“Enlightened Medicine”** - Radio talk show host - North American Broadcasting Company, October 1999-February 2000.
- **“Attention Deficit, Otitis, and Enuresis”** Woodmont Academy, Woodbine, MD, January 8, 2000.
- **“When the Environment Plays Tricks in Your Head”** NAMI (National Alliance for the Mentally Ill), Bethesda, MD, April 13, 2000.
- **“Brainstorm! - Air Quality Issues in Workers’ Compensation”** Maryland Workers’ Compensation Education Association, Ocean City, MD, September 25, 2000.
- **“Brainstorming Chemical Sensitivity”** Governor’s Pesticide Council, Annapolis, MD, September 25, 2002.
- American Academy of Environmental Medicine, Phoenix, AZ, November 1, 2003
 - **“The Accordion Reserve – a New Model for Assessing Environmental Health”**
 - **“Assessing and Treating the Autonomic Nervous System – the Accordion Reserve”**
- **“Tourette’s Syndrome - Thinking Outside the Box”** Tourette’s Syndrome of Greater Washington, February 29, 2004.
- **“The Autonomic Nervous System – Triggering Symptoms and How to Treat Them”** Chemical Sensitivity Diseases Association, May 22, 2004.
- **“Dynamic Intervention”** Integrative Medicine Conference on Anti-Aging, Las Vegas, May 15, 2005
- **“Dynamic Intervention” – Clinical Management of the Autonomic Nervous System”** Shady Grove Adventist Hospital Grand Rounds, March 2, 2006.
- **“Dynamic Intervention” – Clinical Management of the Autonomic Nervous System”** Perque, LLC Rockville MD, 2006.
- **“So Doc, How am I going to get better? Why is it taking so long?”** Chemical Sensitivity Diseases Association, March 31, 2007
- **“Comments on Safe Lawn Care” Capitol Steps, Washington, DC**, Launching www.safelawns.org, April 4, 2007
- **“Optimum Health vs. Stress – Battle for the Ages”** Perque, LLC, Fairfax, VA, September 26, 2007
- **“Stress in the City (and the Country)”** Health Studies Collegium, Leesburg, VA, November 3, 2007
- **“To Medicate or Not to Medicate”** Health Studies Collegium, Leesburg, VA, November 4, 2007
- **“Stress in the City (and the Country) – Methylation: Jewels of Redemption”** Shady Grove Adventist Hospital Grand Rounds, Rockville, MD, April 17, 2008
- **“Stress in the City (and the Country) – for Dummies”** Israeli Business Network, Rockville, MD, August 13, 2008
- **“Stress in the City (and the Country) – for Dummies”** CAMNET, Rockville, MD, September 24, 2008
- **“Stress in the City (and the Country) – for Dummies”** Perque, LLC, Rockville, MD, September 26, 2008
- **“Treat That Stress, Baby!”** Autism Summit, www.Thriive.com, April 30, 2010
- **“The Conundrum of Autonomic Healing – Methylation vs. Inflammation”** Shady Grove Adventist Hospital Grand Rounds, April 21, 2011
- **“A Chemical Reaction” – viewing and panel discussion, Gaithersburg, MD**, May 5, 2011
- **“The Conundrum of Autonomic Healing – Methylation vs. Inflammation”**
“Loosen the Noose of Chronic Illness and Aging”
“Case Studies – The Conundrum of Autonomic Healing”
Keynote Speaker, Health Centers for the Future, Chicago, IL, May 13, 2011
- **“The Conundrum of Autonomic Healing – Methylation vs. Inflammation”** **Keynote Speaker, International College of Applied Kinesiology, Orlando, FL**, June 3, 2011
- **“A Chemical Reaction” – viewing and panel discussion, Potomac, MD**, June 14, 2011
- **“New Horizons in Repair and Healing”**, Chemical Sensitivity Diseases Association, November 19, 2011
- **“Senior Moments”** – Chemical Sensitivity Diseases Association, March 29, 2014
- **“Simply Healing Chemical Sensitivities”** – Chemical Sensitivities Diseases Association, October 19, 2019
- **“Repair and Healing over the Spectrum”** – Interview for Global Autism Summit, December 4, 2020
- **“Mystery Case – What Would you Do Next?”** – Case of Autonomic Dysfunction in patient with post-Covid symptoms – SVT and Pericarditis. Presentation to DMV Functional Medicine Practitioner Group Meeting, Tysons Corner Center, McLean, VA 22102. 5/26/2022

BOOKS, PUBLICATIONS, & ARTICLES

- **“Health Care on the Move”** - written for a real estate magazine, an article emphasizing the stress of relocation on the individual and family.
- **TeleMed** - Interactive Information System. Authored topics on routine child and adult health care, pediatric rashes - diagnosis, fatigue, and respiratory illness.
- **“Why Sweat”** - a review article for a local news flyer, on the virtues of clearing chemicals from the body by exercise, nutrition, and detox sauna.
- **“Babies Grow Best in a Safe Environment”** - Maternity Center newsletter, Spring 2000.
- **“Your Autonomic Nervous System and What it Can Do for You”** - Maternity Center Newsletter, Summer 2003.
- **Energy – the Essence of Environmental Health** © Natalie Golos and Alan R. Vinitzky, M.D. 2004, AuthorHouse, Bloomington, IN
- **Putting the Pieces Together. Part I.** *Healthy Aging* 1(5):63-66, 2006.
- **Parts of the Puzzle. Part II.** *Healthy Aging* 1(6):75-78, 2006.
- Tobias H, Vinitzky AR, Bulgarelli RJ, Ghosh-Dastidar S, Colombo J. 2010. Autonomic nervous system monitoring of patients with excess parasympathetic responses to sympathetic challenges – clinical observations. *US Neurology* 5(2):62-66.
- McMahan SC, Hope J, Thrasher JD, Rea WJ, Vinitzky AR, Gray MR. 2012. Common toxins in our homes, schools and workplaces. http://globalindoorhealthnetwork.com/files/GIHN_position_statement.pdf
- Vinitzky AR, Parks RR. 2012. Bipolar Disorder, An Environmental and Nutritional Approach to Therapy, in *Advancing Medicine with Food and Nutrients*, 2nd Ed. Kohlstadt I, Ed. CRC Press, Boca Raton, FL. Ch. 32, pp. 595-614.

MEDIA APPEARANCES

- **“Safe Lawns and Landscapes”** Podcast, hosted by Paul Tukey, founder of www.safelawns.org, March 27, 2008
- **“Tom Roselle Live”**, hosted by Dr. Tom Roselle, DC, founder of Roselle Alternative Care Center, Fairfax, VA, June 1, 2008
- **“Protecting Your Health”**, hosted by Dr. Donald Robbins, DMD and Dr. Kathleen Boyle, www.WebTalkRadio.net, “Can you be healthy if your doctor doesn’t hear you?” April 18, 2010
 - **“A Chemical Reaction”**, 2010, producer Paul Tukey, Cameo from video of **“Comments on Safe Lawn Care”**, Capitol Steps, April 4, 2007
- **“New Treatments for Methylation and Chronic Illness”**, hosted by Neil Nathan, MD, *The Cutting Edge of Health and Wellness Today* <http://www.voiceamerica.com/episode/85541/new-treatments-for-methylation-and-chronic-illness>, May 29, 2015.

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- **“The Accordion Reserve”**, 1998, with Natalie Golos
- **“Playing with Your Aura”**, 1998, with Natalie Golos
- **“The Exercise Sandwich”**, 1999
- **“21st Century Miracle Treatment?”** 2004 (unpublished)

TRADEMARKS

- **“Illumivites”**, 2012
- **“MethyLift”**, 2013

PRODUCT NAME

“RescuMe”, 2013

INVENTION

- **“Reversing Autonomic Nervous System Dysfunction by Potentiating Methylation”**, Patent Application 2008/0045448

SB0914F WRITTEN TESTIMONY 022924.pdf

Uploaded by: Alan Vinitzky

Position: FAV



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INTERNAL MEDICINE

PEDIATRICS

ENVIRONMENTAL MEDICINE

February 26, 2024

Re: Senate Bill 914 FIRST PRESENTATION 2/29/24 1:00 PM

Written TESTIMONY IN FAVOR OF THIS BILL

Human Relations – Protections Against Discrimination – Genetic Procedures

I am a practicing Internist and Pediatrician who has an interest in the effects of the environment on a person's well-being. I have practiced continuously in Maryland since July 24, 1978.

With the unlocking of the genetic code, medical conditions have been identified that can be explained or confirmed by genetic testing.

The susceptibility of individuals to disease depends on their genetics and their interaction with their environment. For healthcare professionals who investigate these interactions, genetic testing is an invaluable technique that adds to making a previously unknown medical condition knowable.

The genetic discovery can contribute to understanding and modifications of treatments, and the consequences of treatments.

Each individual's genetic information is relatively unique and **personal**. That is much like having your assigned social security number. A person can voluntarily seek their genetic information with testing devices that discover one's ancestry. A person can freely disclose genetic information if it may be helpful in diagnosing a relative's medical condition.

On the other hand, to **REQUIRE** dispensing or releasing genetic information as a condition for their interaction with various organizations WOULD VIOLATE their INDIVIDUAL FREEDOMS.

Mis-use and mis-handling of genetic information by uninformed or misinformed persons in a powerful position could contribute to discrimination based on gender, or trans-gender, or medical conditions that may be classified as impairments under the Americans with Disabilities Act.

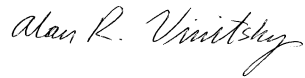
In addition, mis-use of genetic information could countermand the completion of an individual's application for school, employment, use of facilities, or ancestry.

By contrast, REFUSING to accept GENETIC TESTING SHOULD NOT BE A CRITERION when deciding an individual's status when evaluating an application.

Therefore, it is an individual's (or designated representative's) prerogative to choose to release genetic information. IT MUST NOT BE A REQUIREMENT that a person release genetic information as a condition for the individual's interaction with outside organizations.

Furthermore, that individual must not be penalized (or discriminated against) for CHOOSING TO MAINTAIN THEIR GENETIC INFORMATION PRIVATELY OR CHOOSING **NOT** TO DISCOVER their genetic information.

Respectfully submitted,

A handwritten signature in cursive script that reads "Alan R. Vinitsky".

Alan R. Vinitsky, M.D.

MDGenetic022924.pdf

Uploaded by: Dr. Craig Wax

Position: FAV

Testimony in Support of SB 914
Human Relations - Protections Against Discrimination – Genetic Procedures

Good day, I am Dr. Craig M. Wax, a family physician, sports and school physician, media host, former member of the National Physician Council on Healthcare Policy - Congressional Subcommittee and policy expert with 25 years of practical experience, in active private practice in New Jersey.

Thank you for the opportunity to provide testimony in support of SB 914; a bill introduced to protect the citizens of Maryland from being subject to discrimination based on their choice to refuse medical interventions that involve the use of a genetic procedure.[1]

The impact of genetic procedures has the potential to change lives for the better, worse, or end them. This cannot be overstated. All patients, especially the most vulnerable, infants, children pregnant women, elderly, minorities and the poor are at high risk for discrimination by entities based on their acceptance or refusal of genetic procedures.[2]

A basic tenet of the profession of medicine is the concept of informed consent. In short, physicians must not subject a patient to a medical procedure or modality without the patient's informed consent. *Adequate information about potential risks and absence of coercion are among the criteria required for proper consent to be obtained.*[3] People are free to accept or refuse under the law of the land.

Simply put, **SB914 protects the ability of patients in Maryland to be afforded their basic right to informed consent before being subject to medical interventions that involve the potential for genetic manipulation and/or the use of genetic material.** Mandates put undue stress on patients and also undue risk on institutions and government entities.

Why is this bill needed to protect the right to informed consent with these types of treatments?

1. To quote the United States National Institute of Health: "Genetic therapies hold promise to treat many diseases, but they are still new approaches to treatment and may have risks [including] certain types of cancer, allergic reactions, or damage to organs or tissues...." [4] Risks from certain types of genetic therapy may even be "passed to future generations, raising the stakes for any mistakes." [5] Given the uncertainty involved with these novel modalities, and inherent increased risks, the "adequate information" prong of informed consent requirements becomes especially important to guard.

2. It is axiomatic that if a patient is coerced into receiving a medical treatment the patient would otherwise not wish to receive, informed consent has not been obtained. In other words: "coercion invalidates consent." [6] Forcing individuals to receive medical treatment against their will cannot be justified, and it is especially problematic when the potential risks are substantial or unknowable as they are with genetic-related procedures.

It is important to note that there has been an increasing trend around the world, across the country, and specifically here in Maryland, to place various mandates to force certain medical interventions on employees, students, the military, and others. Sometimes mandates have even been imposed broadly and negatively impact the ability of citizens to participate in the most basic aspects of society. The bottom line is that **mandates equal coercion and coercion invalidates consent.** I urge you to adopt SB 914 to guard against this injustice and protect patients' rights. Thank you.

References

- [1] <https://mgaleg.maryland.gov/2024RS/bills/sb/sb0914f.pdf>
- [2] <https://www.newsweek.com/vaccine-mandates-will-have-disparate-impact-minorities-opinion-1619755>
- [3] <https://onlinelibrary.wiley.com/doi/10.1002/mus.1046>
- [4] <https://www.nhlbi.nih.gov/health/genetic-therapies/benefits-risks>
- [5] <https://www.nytimes.com/2020/10/31/health/crispr-genetics-embryos.html>
- [6] <https://www.myamericannurse.com/case-study-coerced-consent>

SB 914 Protection Against Discrimination - Genetic

Uploaded by: Dr. Gopi Vijaya

Position: FAV

SB 914

Testimony

My name is Dr. Gopi Vijaya, and I am a physicist by profession, and have been involved as a legislative advisor working for medical freedom in Utah for the past several years. I am speaking in support of SB914.

Biotechnology and Medicine are rapidly undergoing an unprecedented change, and new technologies that were the stuff of science fiction are quickly becoming realities over a few years or even months. In just over 20 years since the human genome was mapped out, we have had a slew of advances which seek to modify, alter, and transform the expression of genes for a variety of therapeutic and other purposes. Perhaps the most groundbreaking technology in genetic procedures is the one called CRISPR that led to the designer-baby controversy, which has already been used in China with the help of collaboration with Rice University.

As this wave advances, it is critical to keep in mind that in human rights, the right to your own genome is right up there with the right to your own body. Your genome is, so to speak, your “genetic body”. Just as no one can be discriminated against for the decisions they take that regard their own body, nobody should be discriminated against in any fashion if they choose *not* to undergo a genetic procedure. At the federal level, the importance of privacy of genetic information has already been enshrined, and this bill extends this and provides guardrails and includes a number of daily activities that *cannot* be a part of *any* discrimination. I believe the legislature play a crucial role in safeguarding these rights, and should favorably pass SB914. In doing so, they would be making sure that we remain masters of any advancing technology, and protect the citizenry from any negative social repercussions.

testimony Favorable SB914 discrim - 2024.pdf

Uploaded by: Emily Tarsel

Position: FAV

Emily Tarsell, LCPC

**2314 Benson Mill Road
Sparks, Maryland 21152
February 29, 2024**

Favorable SB 914 (HB1422)

Human Relations - Protections Against Discrimination - Genetic Procedures

Dear Chairman Smith and Judiciary Committee Members,

I am Emily Tarsell, a mother, licensed therapist and founder of Health Choice Maryland, a large grassroots non-profit organization that advocates for health choice and informed consent. We support **SB 914 (HB1422)** which adds an important protection against discrimination.

There is nothing more sacred than the right to control and decide what happens to one's own body. One should not be discriminated against for exercising that right.

We are witnessing an explosion in experimental genetic engineering processes which can impact one's health. Whether or not to undergo such treatments or participate in using them should always be a legally protected personal right. This bill should become law to ensure that each individual has the right to chose to decline any genetic procedure without being discriminated against.

Please vote **FAVORABLE** for **SB 914**. Thank you.

Emily Tarsell, LCPC

Maryland SB914 Testimony on Genetic Biologics Dr.

Uploaded by: Janci Lindsay

Position: FAV



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Maryland BILL SB 914 :Human Relations-Protections Against Discrimination-Genetic Procedures

Testimony by Janci C. Lindsay, PhD., Director of Toxicology and Molecular Biology, Toxicology Support. Services, LLC.

There are many reasons why individuals may wish to decline evolving genetic biologics. These must be protected in Maryland as an individual's right to have a choice as to what goes in their bodies.

1. Many of these genetic biologics technologies are still experimental and extensive toxicology, genotoxicity, carcinogenicity and reproductive toxicology studies on these products have not been done—AND ARE NOT REQUIRED for FDA Emergency Use Authorization EUA licensure in a Public Health Emergency.
2. “Genetic Biologics”, carry the long known risks of insertional mutagenesis leading to cancers like leukemias and lymphomas and also lethal auto immune reactions from the action of having “self-cells” express proteins which are the target of the immune system.
3. Religious reasons for refusal. These genetic technologies often utilize cell lines obtained from aborted human fetuses in order to either make or test the genetic biologics. This goes against the fundamental doctrines of many religions.
4. These technologies can integrate into and alter human DNA which also goes against many religious doctrines.
5. Current genetic biologics are plagued by plasmid DNA contamination as well as bacterial endotoxin. This contamination will increase the risk of the DNA integrating into the genome in an oncogenic manner.
6. Integration of genetic biologic DNA into the genomic DNA of an ovarian cell line was just shown last week by genomist Kevin McKernan.
7. DNA plasmids which contaminate the genetic biologics have human compatible sequences allowing them to replicate inside human cells. This was not intended and means there is no “OFF” switch to antigen production.

8. The Lipid nanoparticle technologies (LNPs) used to cloak and transport the genetic payload in these technologies goes to every cell in the body and even crosses the blood brain barrier. They preferentially go to fatty tissues such as the liver, pancreas, endocrine glands, brain and the ovaries and testes but also target to the heart.
9. It has been a long known risk to pass gene therapies/genetic biologics on to progeny if the gene therapy makes it to the testes or is given to a pregnant mother. The child has no informed consent.
10. These genetic biologics are showing evidence of inducing immune tolerance rather than an immune reaction against the target antigen. This will create epidemics of disease in highly inoculated individuals. We must pause the use of these until this is resolved.
11. The Genetic biologics may shed to other people and the environment and cause unintended transfection which can lead to dire health consequences and sidelines informed consent.

Selected References

- Gore, M. Adverse effects of gene therapy: Gene therapy can cause leukaemia: no shock, mild horror but a probe. *Gene Ther* 10, 4 (2003). <https://doi.org/10.1038/sj.gt.3301946>
- High KA. The risks of germline gene transfer. *Hastings Cent Rep.* 2003 Mar-Apr;33(2):3. PMID: [12760106](https://pubmed.ncbi.nlm.nih.gov/12760106/). [The risks of germline gene transfer - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/12760106/)
- Kaplan JM, Roy I. Accidental germ-line modifications through somatic cell gene therapies: some ethical considerations. *Am J Bioeth.* 2001 Fall;1(4):W13. PMID: 12862004. [Accidental germ-line modifications through somatic cell gene therapies: some ethical considerations - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/12862004/)
- [21 USC 360bbb-4b: Medical countermeasure master files \(house.gov\)](https://www.congress.gov/bills/114/360/sections/360bbb-4b)
- Banoun H. mRNA: Vaccine or Gene Therapy? The Safety Regulatory Issues. *Int J Mol Sci.* 2023 Jun 22;24(13):10514. doi: 10.3390/ijms241310514. PMID: 37445690; PMCID: PMC10342157.
- Nancy M. P. King. "Accident & Desire: Inadvertent Germline Effects in Clinical Research." *The Hastings Center Report*, vol. 33, no. 2, 2003, pp. 23–30. *JSTOR*, <https://doi.org/10.2307/3528151>.
- Section 564 FD&C Act. Note that the EUA pathway should not be confused with the "Expanded Access Use" regulatory pathway which is often colloquially referred to as an "emergency use". The expanded access is an investigational pathway and is regulated in the same manner as all normal drug approvals. (21 CFR 312.310-320)
- 21 USC 360bbb-3(k): If a product is the subject of an authorization under this section, the use of such product within the scope of the authorization shall not be considered to constitute a clinical investigation for purposes of section 355(i), 360b(j), or 360j(g) of this title or any other provision of this chapter or section 351 of the Public Health Service Act [42 U.S.C. 262].

testimony sb 914.pdf

Uploaded by: Jeremy Snavelly

Position: FAV



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February 21, 2024

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**JOURNAL OF AMERICAN
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Lawrence R. Huntoon, M.D., Ph.D.
Editor-In-Chief

Statement in Support of SB 914 - Protections Against Discrimination – Genetic Procedures

Thank you for the opportunity to submit a statement in support of SB 914.

The Association of American Physicians and Surgeons – AAPS – is a non-partisan professional association of physicians in all types of practices and specialties across the United States. Since 1943, AAPS has been dedicated to the highest ethical standards of the Oath of Hippocrates and to preserving the sanctity of the patient-physician relationship and the practice of private medicine. Our motto, “omnia pro aegroto” means “all for the patient.”

In the AAPS Patient Bill of Rights, it is affirmed that patients must have “the right to refuse medical treatment.” In addition, the AAPS Code of Medical Practice states that it is “inimical to the interests of the patient and the public ... and destructive to the professional nature of medical practice ... to pressure patients to accept [unwanted] medical care.”

SB 914, by protecting patients from discrimination for refusing certain types of treatment, aligns with these principles espoused by AAPS that are also enshrined in foundational concepts of medical ethics like requirements of informed consent.

It is also important to note that therapies that involve genetic manipulation, while holding potential promise, are currently still largely experimental. “We are out on the far edge of experimentation,” warned New York University ethicist Arthur Caplan when asked about the recent death of a 27-year-old involved in a study involving a gene-editing technique.

Thus, it is exceedingly critical to protect patients’ right to refuse such medical treatments, without harming their ability to participate in society, given the increased risks and currently unknown and unknowable side-effects.

In summary, SB 914 should be adopted. Please stand up for patients and approve this important legislation.

Respectfully submitted,

Jeremy Snavelly
Director of Regulatory Affairs
jeremy@aapsonline.org

Written testimony SB914 ALC.pdf

Uploaded by: Maria Lorenzo-Chang

Position: FAV

February 25, 2024

Dear Members of the Judicial Proceedings Committee,

My testimony is in support of SB914. There are well-established discrimination laws against basic, innate individual traits such as race, gender, and religion. Gene integrity is not an exception. Imposing a procedure which can artificially cause such a deep level of constitutional change is discrimination against the right of individuals to preserve their genetic integrity.

Another aspect is the inherent risks of a genetic procedure. Technology in the field of genetics is developing at a fast pace and comes with great unknowns and serious potential risks, which are usually not detected in short clinical trials and take years to detect. Not assessing risks comprehensively is not an implication of the absence of such risks. For example, the following is an excerpt from a New York Times article on CRISPR, gene editing technology. Crispr-Cas9 "can cause serious side effects in the cells of human embryos, prompting them to discard large chunks of their genetic material, a new study has found." "The consequences of these errors can be quite serious in some cases, said Dieter Egli, a geneticist at Columbia University and an author of the study." "We are often used to hearing about papers where Crispr is very successful," said Nicole Kaplan, a geneticist at New York University who was not involved in the study. "But with the amount of power we hold" with this tool, Dr. Kaplan said, it is crucial "to understand consequences we didn't intend." This exemplifies why the application of a genetic procedure should be an informed choice without penalization or discrimination for declining. No genetic procedure should be a condition for education, work, or access to daily life activities.

Throughout history, medical products have been taken off the market or warnings have been placed after years of harm to many. Oftentimes, trusting individuals are left incapacitated, unable to have a functional life, and with great suffering and financial burden. Unfortunately, these cases are not anecdotal.

The majority of children and adults have chronic conditions. Therefore, more than ever, a bill like SB914 is needed to protect an already susceptible population from further harm.

Sincerely,

Alejandra Lorenzo-Chang

Maryland resident

malorenzochang@hotmail.com

References

New York Times article

<https://www.nytimes.com/2020/10/31/health/crispr-genetics-embryos.html>

Study

[https://www.cell.com/cell/fulltext/S0092-8674\(20\)31389-1](https://www.cell.com/cell/fulltext/S0092-8674(20)31389-1)

010395.pdf

Uploaded by: Marsha Blakeslee

Position: FAV

Dear Members of the Judicial Proceedings Committee:

My name is Dr. Marsha Blakeslee and I am an Internist, practicing in the state of Maryland for the past 30 years. I care for adult patients who come from a myriad of backgrounds and are seeking preventive care and care for an array of medical disorders. The goal is to tailor medical care and recommendations for each individual, knowing that each patient has an underlying special genetic make-up, a unique presentation of that genetic makeup and a unique value system that informs their approach to their own health. In other words, a "one-size-fits all" medical approach is ill advised.

The counsel I provide to my patients is informed by their family history, risks for medical disorders, current medical disorders and medications, lifestyle patterns and their personal value systems. One of the bedrocks of the patient-physician relationship is the concept of informed consent, meaning, the discussion and acceptance or rejection of the risks, benefits, and alternatives to any medical procedure. Bodily autonomy requires that a person can ultimately decide what treatments or procedures they will or will not accept, without fear of any form of discrimination.

Though they hold promise for the future, genetic therapy technology suffers from a range of potential risks. These risks have been seen in research trials over the years. These include off-target effects, where the therapy affects other parts of the human body in an unintended negative way; the potential development of autoimmune disorders since the body recognizes the therapy as a foreign protein; and ultimately, the unknown long-term and generational impact of altering the genetic structure and function of a human.

After appropriate informed consent, an individual may choose to receive or decline genetic materials, therapy, treatment or procedures. No person should face discrimination in any place of public accommodation, educational arena, or employment or place of work, for declining to accept the use of genetic materials into their body in the form of a therapy, treatment, or procedure.

I support SB914 to protect Maryland residents from all forms of discrimination related to their personal medical decisions and I thank you for allowing me the time to share my concerns.

Dr. Marsha Y. Blakeslee

SB914 Favorable Love Maryland PAC.pdf

Uploaded by: MEGAN MONTGOMERY

Position: FAV

SB914

Favorable

Love Maryland PAC

Chair, Vice Chair and members of the Judicial Proceedings Committee,

Good afternoon, my name is Megan Montgomery and I write as the Chair of the Love Maryland PAC to testify favorably for SB914. The Love Maryland PAC is a consumer advocacy organization who advocates for the citizens of Maryland and does not represent any corporate interests. The PAC supports allowing the citizens of Maryland true informed consent for procedures that would alter the human genome, which includes the right to refuse these procedures without penalty.

This mRNA technology is still in its infancy, and we do not know the long-term effects of multiple overlapping gene manipulations that are not tested together- each product will only be tested independently. These new technologies should not be forced, nor should Maryland citizen's be coerced in any form, to take this technology.

I hope that you vote favorably on SB914. Thank you for your time.

SB914.pdf

Uploaded by: Mike McKay

Position: FAV

MIKE MCKAY
Legislative District 1
Garrett, Allegany, and Washington Counties



James Senate Office Building
11 Bladen Street, Room 416
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410-841-3565 • 301-858-3565
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Mike.McKay@senate.state.md.us

Judicial Proceedings Committee
Executive Nominations Committee

THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

Senate Bill 914 – Human Relations – Protections Against Discrimination – Genetic Procedures

February 26, 2024

Dear Chairman Smith, Vice Chairman Waldstreicher, and Members of the Committee,

The purpose of the bill is to prohibit discriminatory practices against any individual who refuses to undergo a genetic procedure. This relates to education, public accommodation, commercial leasing, housing, employment, State personnel actions, and by specific individuals who are licensed by the Maryland Department of Labor. I thank you all for your time and ask for a favorable vote.

Sincerely,

A handwritten signature in black ink, appearing to read "Mike McKay".

Senator Mike McKay

Representing the Appalachia Region of Maryland

Serving Garrett, Allegany, and Washington Counties

Testimony of Steven O'Connor Supporting SB914.pdf

Uploaded by: Steven O'Connor

Position: FAV

Testimony of Steven O'Connor in Support of SB914

Staff Attorney, National Health Freedom Action

Good afternoon Committee Members,

My name is Steven O'Connor, and I am a staff attorney with National Health Freedom Action. I am here to support SB914, banning discrimination based on refusal to undergo a genetic procedure.

Technological developments are outpacing our regulations and ethical guidelines, and this bill will allow us to stay ahead of these changes.

Current Maryland law already both prohibits discrimination and protects genetic privacy; SB914 protects *genetic integrity* and fills a gap in the current laws.

In 1969 the Maryland Commission on Human Relations was established and empowered to investigate racial discrimination. This Commission served to enforce the Maryland Public Accommodations Law, Discrimination in Housing Law, and the Fair Employment Practices Law.

After two years of effort by Governor Parris N. Glendening, in 2001 discrimination based on sexual orientation was banned and gays and lesbians were added to those protected under Maryland law. Today, race, sex, color, creed, national origin, marital status, sexual orientation, age, gender identity, and disability are categories for which discrimination is disallowed.

Separately, in 2022 Maryland enacted law prohibiting all public schools, and nonpublic schools that receive state funds, from discriminating based on race, ethnicity, color, religion, sex, age, national origin, marital status, sexual orientation, gender identity, or disability.

Also in 2022, HB866 was passed. This bill, sponsored by Delegate Qi, protects Genetic Information Privacy. This bill regulates the use of genetic data by direct-to-consumer genetic testing companies. So, Maryland law prohibits discrimination and also protects genetic privacy.

SB914 would amend the discrimination laws of Maryland to add refusal of a genetic procedure to the list of protected classes. It adds to the current Education

Article and applies to public schools and nonpublic schools that receive state funds.

It also adds to the State Government Article to define Genetic Procedures to include those that may either: “add, remove, alter, activate, change, or cause mutation in an individual’s DNA or other genetic materials” or “replace, supersede, or bypass a normal function of an individual’s DNA or other genetic materials.”

In addition to education, discrimination would be disallowed in public accommodations, employment, residential housing, and state personnel matters.

SB914 is an essential supplement to Maryland’s genetic privacy and discrimination laws. It protects genetic integrity, by codifying the right to refuse a genetic procedure. It would not inhibit or prevent anyone from getting a genetic procedure if they want one.

State law already protects against bias in important life activities upon various categories. Just as we believe it is wrong to discriminate based on those categories, it is likewise wrong to do so based on a decision to maintain one’s genetic integrity.

Tanya Carmona Daniels Febr 28 24.pdf

Uploaded by: Tanya Carmona Daniels

Position: FAV

February 28, 2024

Dear Members of the Judicial Proceeding Committee,

This letter is in support of SB914. We are a group of parents of children with autism. Our children were not born with autism. It is clear to us that medical and/or environmental factors negatively impacted our children, who otherwise did not show any signs of autistic characteristics pre-intervention. Many of us have proof of it. Some of these medical procedures have been tested in clinical trials for only five days pre-licensure. As acknowledged by medical experts, this period is not sufficient to determine autoimmune issues or neurological disorders that arise from these interventions. No child should be exposed to such adverse risks and deprived from living the life that they were intended to live to the fullest extent. Families are left with an insurmountable task, monetary expense, and devastation. Had we been fully informed about the risks, we, as parents, would have made a different choice.

We vehemently believe that no children should be required to be subjected to a genetic procedure, the artificial alteration of their genetic constitution, as a condition to access education or other activities in their lives. It has the potential of posing an adverse, maybe even lethal, life-changing risk.

Today, as legislators, you have the opportunity to prevent the harm of many children and protect the innate health with which they were born with your vote in favor of bill SB914.

Thank you,

Tanya Carmona Daniels
In representation of Group of Parents of Children with autism

Tibbals_ SUPPORT SB 914_ HB 1422_ Human Relations

Uploaded by: Trudy Tibbals

Position: FAV

SB 914/ HB 1422: Human Relations - Protections Against Discrimination
- Genetic Procedures: Please SUPPORT this bill!!

Dear Judicial Proceedings Committee Chair Smith, Vice Chair Waldstreicher, and all other esteemed Committee Members:

I encourage you all to SUPPORT this bill!!

Per the bill's wording: "...AN ENTITY SUBJECT TO THIS SECTION MAY NOT DISCRIMINATE AGAINST ANY INDIVIDUAL BECAUSE OF THE INDIVIDUAL'S REFUSAL TO UNDERGO A GENETIC PROCEDURE..."

This is a very important bill for the health and safety of all people as well as their freedom of choice!!

Please especially note page **3**, under "**Article - State Government**", beginning at line 6 (F) "GENETIC MATERIALS" MEANS:

(1) DEOXYRIBONUCLEIC ACID, RIBONUCLEIC ACID, CHROMOSOMES, OR GENES WHICH MAY BE ANALYZED TO:

- (I) DETECT HERITABLE DISEASES OR CONDITIONS;
- (II) IDENTIFY CARRIERS; OR
- (III) ESTABLISH A CLINICAL DIAGNOSIS; OR

(2) PROTEINS, ENZYMES, OR OTHER MOLECULES ASSOCIATED WITH A GENETIC PROCESS WHICH MAY BE MODIFIED, REPLACED IN WHOLE OR IN PART, SUPERSEDED, OR BYPASSED IN FUNCTION BY A HEALTH OR MEDICAL PROCEDURE.

(G) "GENETIC PROCEDURE" MEANS A THERAPY, TREATMENT, OR MEDICAL PROCEDURE THAT MAY:

- (1) ADD, REMOVE, ALTER, ACTIVATE, CHANGE, OR CAUSE MUTATION IN AN INDIVIDUAL'S DNA OR OTHER GENETIC MATERIALS; OR
- (2) REPLACE, SUPERSEDE, OR BYPASS A NORMAL FUNCTION OF AN INDIVIDUAL'S DNA OR OTHER GENETIC MATERIALS."

I, as a private citizen of Maryland, certainly **do not want** an "entity" to be in charge or, or, frankly, anywhere near my DNA, genes, chromosomes, for any reason, but

especially not to detect diseases or conditions or to establish any clinical diagnosis. I would want to be in charge of those things myself, in consultation with my doctors.

I also **do not want** any “entity” to be in charge of, or anywhere near any “genetic procedure” that may “(1) ADD, REMOVE, ALTER, ACTIVATE, CHANGE, OR CAUSE MUTATION”... in my “...DNA OR OTHER GENETIC MATERIALS; OR (2) REPLACE, SUPERSEDE, OR BYPASS A NORMAL FUNCTION OF” my “DNA OR OTHER GENETIC MATERIALS.” Those genetic procedures should be something that I am in charge of, in consultation with my doctors.

It is a very dangerous thing when an entity, be it governmental or private enterprise, dictates what genetic procedures an individual must undergo!! Luckily, **this bill protects the genetic integrity of ALL people** from having to undergo genetic procedures that may be harmful to the individual. Think about the ramifications of an entity making these decisions and NOT the individual. One very important ramification is that the genetic procedures that an entity may require an individual to undergo may be very dangerous to the overall health of that individual. No entity should be making a decision for an individual that affects their very health! Those decisions should be up to the individual in consultation with his/her doctors. Only the individual and his/her doctors know the intricacies of that individual’s health situation. It is the very **fundamental right** to direct one’s own health and to make decisions for one’s own health that is at stake here!! We must preserve that fundamental right!!

Thank you for your courtesy and cooperation in SUPPORTING this very important bill!!

Trudy Tibbals
A Very Concerned other and Maryland Resident

Support for bill HB1422_SB0914 - Tori M - Outlook.

Uploaded by: Victoria Millsaps

Position: FAV

 Delete  Archive  Report  Reply  Zoom     ...

Support for bill HB1422/SB0914

Tori M <tbyrd14@hotmail.com>

Wed 2/28/2024 5:28 PM

To: steve.johnson@house.state.md.us <steve.johnson@house.state.md.us>;
andre.johnson@house.state.md.us <andre.johnson@house.state.md.us>

Bcc: joseline.pena.melnyk@house.state.md.us
<joseline.pena.melnyk@house.state.md.us>; bonnie.cullison@house.state.md.us
<bonnie.cullison@house.state.md.us>; tiffany.alston@house.state.md.us
<tiffany.alston@house.state.md.us>; heather.bagnall@house.state.md.us
<heather.bagnall@house.state.md.us>; harry.bhandari@house.state.md.us
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<steve.johnson@house.state.md.us>; anne.kaiser@house.state.md.us
<anne.kaiser@house.state.md.us>; ken.kerr@house.state.md.us
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<lesley.lopez@house.state.md.us>; ashanti.martinez@house.state.md.us
<ashanti.martinez@house.state.md.us>; Matt.Morgan@house.state.md.us
<Matt.Morgan@house.state.md.us>; Teresa.Reilly@house.state.md.us
<Teresa.Reilly@house.state.md.us>; samuel.rosenberg@house.state.md.us
<samuel.rosenberg@house.state.md.us>; kathy.szeliga@house.state.md.us
<kathy.szeliga@house.state.md.us>

I want to express my support for this common sense bill HB1422/SB0914. As someone who experience that discrimination during the covid vaccine debacle and my husband almost losing his job due to refusing mrna vaccines, I support any measure to ensure this does not happen again.

Victoria Millsaps

SB 914 - JPR - MDH - LOO.pdf

Uploaded by: Jason Caplan

Position: UNF



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

February 29, 2024

The Honorable William C. Smith Jr.
Chair, Judicial Proceedings Committee
2 East Miller Senate Office Building
Annapolis, MD 21401-1991

RE: Senate Bill 914 – Human Relations – Protections Against Discrimination – Genetic Procedures – Letter of Opposition

Dear Chair Smith and Committee members:

The Maryland Department of Health (the Department) respectfully submits this letter of opposition for SB 914 – Human Relations – Protections Against Discrimination – Genetic Procedures. This bill aims to prohibit discrimination based on an individual’s refusal to undergo a genetic procedure in education, public accommodations, commercial leasing, housing, and employment, and by certain licensed or regulated persons.

SB 914 defines the term “genetic materials” to include ribonucleic acid, which is often abbreviated as “RNA”. The bill also defines the term “genetic procedure” as “a therapy, treatment, or medical procedure that may (1) add, remove, alter, activate, change, or cause mutation in an individual’s DNA or other genetic materials; or (2) replace, supersede, or bypass a normal function of an individual’s DNA or other genetic materials.”

The Department acknowledges the use of similar language in a Utah bill that was signed into law in 2022.¹ This language has been used to argue against the requirement of mRNA vaccinations, describing mRNA vaccines as “genetic materials” due to their RNA composition. Additionally, under the definitions in this bill, the administration of a mRNA vaccine could be considered a “genetic procedure”, resulting in a prohibition on employers from mandating mRNA vaccinations.²

The Department strongly supports vaccination as one of the most effective public health achievements over the last century and opposes the limitations on vaccination that this bill could be seen to impose on a wide range of settings. Furthermore, the federal Genetic Information Nondiscrimination Act already prohibits discrimination based on genetic information in health

¹ S.B. 144 Genetic Privacy Amendments. <https://le.utah.gov/~2022/bills/static/SB0144.html>

² National Health Freedom Coalition. UTAH Genetic Testing Privacy Act Amended. <https://nationalhealthfreedom.org/utah-genetic-testing-privacy-act-amended>

insurance and employment, including hiring, firing, job placement or promotion decisions.³ Therefore, the Department respectfully opposes this bill.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,

A handwritten signature in blue ink, appearing to read "LH Scott", is enclosed within a faint, light blue rectangular border.

Laura Herrera Scott, M.D., M.P.H.
Secretary

³ See 42 U.S.C. Ann., §§ 2000ff *et. seq.*; PROHIBITING EMPLOYMENT DISCRIMINATION ON THE BASIS OF GENETIC INFORMATION, <https://uscode.house.gov/view.xhtml?path=/prelim@title42/chapter21F&edition=prelim> (last accessed February 27, 2024)

SB 914. MCCR - Human Relations - Protections Again

Uploaded by: Glendora Hughes

Position: INFO



State of Maryland Commission on Civil Rights

Respect...Integrity...Effective Communication

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Officers
Executive Director
Alvin O. Gillard

Deputy Director
Cleveland L. Horton II

General Counsel
Glendora C. Hughes

February 29, 2024

Senate Bill 0914 – Human Relations - Protections Against Discrimination - Genetic Procedures

POSITION: Letter of Information

Dear Chairperson Smith, Vice Chairperson Waldstreicher, and Members of the Senate Judicial Proceedings Committee:

The Maryland Commission on Civil Rights (“MCCR”; “The Commission”) is the State agency responsible for the enforcement of laws prohibiting discrimination in employment, housing, public accommodations, health services and state contracts based upon race, color, religion, sex, age, national origin, marital status, familial status, sexual orientation, gender identity, **genetic information**, physical and mental disability, and source of income.

SB 914 seeks to prohibit discrimination based on an individual’s refusal to undergo a genetic procedure in education, public accommodations, commercial leasing, housing, and employment and by certain licensed or regulated persons. This would add “refusal to undergo a genetic procedure” to a list of protected classes in the State’s anti-discrimination statute.

SB 914 endeavors to prevent discrimination for an individual’s refusal to undergo a genetic procedure. State Government Article, Title 20 currently prohibits employers from requesting or requiring a genetic test or providing genetic information as a condition of employment or determining benefits. Specifically, State Government Article, § 20-606 already prohibits an employer from discriminating against an employee for the individual’s genetic information, refusal to submit to a genetic test or make available the results of a genetic test. The protections cover a wide range of employer activities and decision-making responsibilities including hiring, discharging, compensation, terms, conditions, privileges, segregation, limitations, classifications, and the status of their employment. The harm SB 914 seeks to prevent is already accounted for in our current employment discrimination law.

Additionally, the current definition of genetic information and genetic testing are outlined in the State’s Insurance Article, §27-909. SB 914 seeks to include and define “genetic materials” and “genetic procedure.” The definitions overlap in many ways with current definitions; however, this bill expands the scope by adding confusing specificity. For

“Our vision is to have a State that is free from any trace of unlawful discrimination.”

example, “Genetic materials” restates the current definition of genetic information but with additional specificity.

Genetic information currently includes chromosomes, genes, gene products, which can be broken down into smaller subparts which are outlined in this bill’s “genetic materials” definition as DNA, RNA, chromosomes, or genes. Genetic information currently covers therapeutic and diagnostic purposes, but the bill outlines a couple of specific diagnostic purposes such as detection of heritable diseases or conditions, to identify carriers, or to establish a clinical diagnosis.

Currently, genetic testing is defined as a laboratory test of human chromosomes, genes, or gene products that is used to identify the presence or absence of inherited or congenital alterations in genetic material that are associated with disease or illness. “Genetic procedure” is defined as any therapy, treatment, or medical procedure that may add, remove, alter, activate, change, or cause mutation in an individual’s DNA or other genetic materials. Additionally, it includes anything that could replace, supersede, or bypass a normal function of an individual’s DNA or other genetic materials. SB 914 as drafted may cause confusion for employers looking for guidance.

Further, SB 914 is not applicable to all the State’s anti-discrimination categories outlined in the bill. The protections concerning genetics are needed in employment settings because there was significant evidence that genetics was being used to screen applicants and employees out of jobs. The Commission has not received any reports of genetic abuse in commercial leasing, public accommodations, or housing.

Finally, “refusal to undergo genetic procedure” is not a class of persons to include in these sections of Title 20 but is more like an unlawful employment practice in violation of the already included “genetic information”. It may be more appropriate to amend SB 914 to include the term genetic procedures only in the unlawful employment discrimination definition section, SGA, §20-601 (f) and (g) if employees in the State are being asked or required to undergo such actions by their employers.

For these reasons, the Maryland Commission on Civil Rights urges considerations of our concerns regarding SB 0914. Thank you for your time and consideration of the information contained in this letter. The Maryland Commission on Civil Rights looks forward to the continued opportunity to work with you to improve and promote civil rights in Maryland.