Providence Health & Services 4400 N.E. Halsey St., Building 2 Suite 599 Portland, OR 97213 www.providence.org/oregon



February 18, 2019

Sen. Laurie Monnes Anderson, Chair Senate Committee on Health Care

RE: Senate Bill 649

Chair Monnes Anderson and Members of the Committee,

Providence Health & Services provides primary care services to thousands of Oregonians in our clinics every year. Ensuring timely vaccinations for our patients is one of the most effective tools we have to prevent disease in our communities.

Information about medical procedures and vaccines are essential to ensure that patients (and their parents/guardians) are active participants in their health care journey. Our providers are strong advocates for ensuring patients have timely, accurate, understandable and actionable information concerning their health. Providing information that is extraneous to these four goals can create confusion for patients and their families and reduce the focus on information that does meet these objectives. Providence is very concerned that the required information in Senate Bill 649 will reduce the clarity of current information provided to patients and runs the potential of significant new amounts of paper being provided to patients without added value.

Today, providers are required by federal law to present the Centers for Disease Control Vaccine Information Statement on each vaccine prior to its administration to the patient. These one page pieces of paper (2-sided) are created by the CDC for 28 different vaccines. The CDC translates these documents into up to 51 different languages. The document provides very clear, easy to understand instructions to patients about the reason to receive the vaccine, who shouldn't receive the vaccine, potential side effects, vaccine schedule, risks, what to do if there is a problem, the national vaccine injury compensation program and where to learn more about the vaccine. The document helps to guide conversations with patients and answer their questions because it was designed for patients.

The other required documents in Senate Bill 649 are not designed for patients, but instead designed for providers. These documents are more likely to create confusion instead of understanding. Provided in bulk to all patients for all vaccines, these documents will increase the flood of paper patients receive at their visit without increasing the value of the information they receive.

Providence Health & Services urges the committee not to proceed with Senate Bill 649 as it will increase confusion and costs.

Sincerely,

Jessica Adamson

Director, Government Relations - Oregon

Providence Health & Services

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VACCINE INFORMATION STATEMENT

MMR (Measles, Mumps, and Rubella) Vaccine: What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Measles, mumps, and rubella are viral diseases that can have serious consequences. Before vaccines, these diseases were very common in the United States, especially among children. They are still common in many parts of the world.

Measles

- Measles virus causes symptoms that can include fever, cough, runny nose, and red, watery eyes, commonly followed by a rash that covers the whole body.
- Measles can lead to ear infections, diarrhea, and infection of the lungs (pneumonia). Rarely, measles can cause brain damage or death.

Mumps

- Mumps virus causes fever, headache, muscle aches, tiredness, loss of appetite, and swollen and tender salivary glands under the ears on one or both sides.
- Mumps can lead to deafness, swelling of the brain and/or spinal cord covering (encephalitis or meningitis), painful swelling of the testicles or ovaries, and, very rarely, death.

Rubella (also known as German Measles)

- Rubella virus causes fever, sore throat, rash, headache, and eye irritation.
- Rubella can cause arthritis in up to half of teenage and adult women.
- If a woman gets rubella while she is pregnant, she could have a miscarriage or her baby could be born with serious birth defects.

These diseases can easily spread from person to person. Measles doesn't even require personal contact. You can get measles by entering a room that a person with measles left up to 2 hours before.

Vaccines and high rates of vaccination have made these diseases much less common in the United States.

2 | MMR vaccine

Children should get 2 doses of MMR vaccine, usually:

- First dose: 12 through 15 months of age
- Second dose: 4 through 6 years of age

Infants who will be traveling outside the United States when they are between 6 and 11 months of age should get a dose of MMR vaccine before travel. This can provide temporary protection from measles infection, but will not

give permanent immunity. The child should still get 2 doses at the recommended ages for long-lasting protection.

Adults might also need MMR vaccine. Many adults 18 years of age and older might be susceptible to measles, mumps, and rubella without knowing it.

A third dose of MMR might be recommended in certain mumps outbreak situations.

There are no known risks to getting MMR vaccine at the same time as other vaccines.

There is a combination vaccine called **MMRV** that contains both chickenpox and MMR vaccines. MMRV is an option for some children 12 months through 12 years of age. There is a separate Vaccine Information Statement for MMRV. Your health care provider can give you more information.

Some people should not get this vaccine

Tell your vaccine provider if the person getting the vaccine:

- Has any severe, life-threatening allergies. A person who has ever had a life-threatening allergic reaction after a dose of MMR vaccine, or has a severe allergy to any part of this vaccine, may be advised not to be vaccinated. Ask your health care provider if you want information about vaccine components.
- Is pregnant, or thinks she might be pregnant. Pregnant women should wait to get MMR vaccine until after they are no longer pregnant. Women should avoid getting pregnant for at least 1 month after getting MMR vaccine.
- Has a weakened immune system due to disease (such as cancer or HIV/AIDS) or medical treatments (such as radiation, immunotherapy, steroids, or chemotherapy).
- Has a parent, brother, or sister with a history of immune system problems.
- Has ever had a condition that makes them bruise or bleed easily.
- Has recently had a blood transfusion or received other blood products. You might be advised to postpone MMR vaccination for 3 months or more.



- Has tuberculosis.
- Has gotten any other vaccines in the past 4 weeks. Live vaccines given too close together might not work as well.
- Is not feeling well. A mild illness, such as a cold, is usually not a reason to postpone a vaccination. Someone who is moderately or severely ill should probably wait. Your doctor can advise you.

4

Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of reactions. These are usually mild and go away on their own, but serious reactions are also possible.

Getting MMR vaccine is much safer than getting measles, mumps, or rubella disease. Most people who get MMR vaccine do not have any problems with it.

After MMR vaccination, a person might experience:

Minor events:

- Sore arm from the injection
- Fever
- Redness or rash at the injection site
- Swelling of glands in the cheeks or neck

If these events happen, they usually begin within 2 weeks after the shot. They occur less often after the second dose.

Moderate events:

- Seizure (jerking or staring) often associated with fever
- Temporary pain and stiffness in the joints, mostly in teenage or adult women
- Temporary low platelet count, which can cause unusual bleeding or bruising
- Rash all over body

Severe events occur very rarely:

- Deafness
- Long-term seizures, coma, or lowered consciousness
- Brain damage

Other things that could happen after this vaccine:

- People sometimes faint after medical procedures, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting and injuries caused by a fall. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.
- Some people get shoulder pain that can be more severe and longer-lasting than routine soreness that can follow injections. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions to a vaccine are estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/



What if there is a serious problem?

What should I look for?

 Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a **severe allergic reaction** can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would usually start a few minutes to a few hours after the vaccination.

What should I do?

• If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 and get to the nearest hospital. Otherwise, call your health care provider.

Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not give medical advice.



The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382 or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

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How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
- Call 1-800-232-4636 (1-800-CDC-INFO) or
- Visit CDC's website at www.cdc.gov/vaccines

Vaccine Information Statement

MMR Vaccine



VACCINE INFORMATION STATEMENT

Varicella (Chickenpox) Vaccine:

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

Why get vaccinated?

Varicella (also called chickenpox) is a very contagious viral disease. It is caused by the varicella zoster virus. Chickenpox is usually mild, but it can be serious in infants under 12 months of age, adolescents, adults, pregnant women, and people with weakened immune systems.

Chickenpox causes an itchy rash that usually lasts about a week. It can also cause:

- fever
- tiredness
- loss of appetite
- headache

More serious complications can include:

- skin infections
- infection of the lungs (pneumonia)
- inflammation of blood vessels
- swelling of the brain and/or spinal cord coverings (encephalitis or meningitis)
- blood stream, bone, or joint infections

Some people get so sick that they need to be hospitalized. It doesn't happen often, but people can die from chickenpox. Before varicella vaccine, almost everyone in the United States got chickenpox, an average of 4 million people each year.

Children who get chickenpox usually miss at least 5 or 6 days of school or childcare.

Some people who get chickenpox get a painful rash called shingles (also known as herpes zoster) years later.

Chickenpox can spread easily from an infected person to anyone who has not had chickenpox and has not gotten chickenpox vaccine.

2 Chickenpox vaccine

Children 12 months through 12 years of age should get 2 doses of chickenpox vaccine, usually:

- First dose: 12 through 15 months of age
- Second dose: 4 through 6 years of age

People 13 years of age or older who didn't get the vaccine when they were younger, and have never had chickenpox, should get 2 doses at least 28 days apart.

A person who previously received only one dose of chickenpox vaccine should receive a second dose to complete the series. The second dose should be given at least 3 months after the first dose for those younger than 13 years,

and at least 28 days after the first dose for those 13 years of age or older.

There are no known risks to getting chickenpox vaccine at the same time as other vaccines.

There is a combination vaccine called **MMRV** that contains both chickenpox and MMR vaccines. MMRV is an option for some children 12 months through 12 years of age. There is a separate Vaccine Information Statement for MMRV. Your health care provider can give you more information.

Some people should not get this vaccine

Tell your vaccine provider if the person getting the vaccine:

- Has any severe, life-threatening allergies. A person who
 has ever had a life-threatening allergic reaction after a dose
 of chickenpox vaccine, or has a severe allergy to any part
 of this vaccine, may be advised not to be vaccinated. Ask
 your health care provider if you want information about
 vaccine components.
- Is pregnant, or thinks she might be pregnant. Pregnant women should wait to get chickenpox vaccine until after they are no longer pregnant. Women should avoid getting pregnant for at least 1 month after getting chickenpox vaccine.
- Has a weakened immune system due to disease (such as cancer or HIV/AIDS) or medical treatments (such as radiation, immunotherapy, steroids, or chemotherapy).
- Has a parent, brother, or sister with a history of immune system problems.
- Is taking salicylates (such as aspirin). People should avoid using salicylates for 6 weeks after getting varicella vaccine.
- Has recently had a blood transfusion or received other blood products. You might be advised to postpone chickenpox vaccination for 3 months or more.
- · Has tuberculosis.



- Has gotten any other vaccines in the past 4 weeks. Live vaccines given too close together might not work as well.
- Is not feeling well. A mild illness, such as a cold, is usually not a reason to postpone a vaccination. Someone who is moderately or severely ill should probably wait. Your doctor can advise you.

4 Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of reactions. These are usually mild and go away on their own, but serious reactions are also possible.

Getting chickenpox vaccine is much safer than getting chickenpox disease. Most people who get chickenpox vaccine do not have any problems with it.

After chickenpox vaccination, a person might experience:

Minor events:

- Sore arm from the injection
- Fever
- Redness or rash at the injection site

If these events happen, they usually begin within 2 weeks after the shot. They occur less often after the second dose.

More serious events following chickenpox vaccination are rare. They can include:

- Seizure (jerking or staring) often associated with fever
- Infection of the lungs (pneumonia) or the brain and spinal cord coverings (meningitis)
- Rash all over the body

A person who develops a rash after chickenpox vaccination might be able to spread the varicella vaccine virus to an unprotected person. Even though this happens very rarely, anyone who gets a rash should stay away from people with weakened immune systems and unvaccinated infants until the rash goes away. Talk with your health care provider to learn more.

Other things that could happen after this vaccine:

- People sometimes faint after medical procedures, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting and injuries caused by a fall. Tell your doctor if you feel dizzy or have vision changes or ringing in the ears.
- Some people get shoulder pain that can be more severe and longer-lasting than routine soreness that can follow injections. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions to a vaccine are estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

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What if there is a serious problem?

What should I look for?

 Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a **severe allergic reaction** can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would usually start a few minutes to a few hours after the vaccination.

What should I do?

• If you think it is a **severe allergic reaction** or other emergency that can't wait, call 9-1-1 and get to the nearest hospital. Otherwise, call your health care provider.

Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not give medical advice.

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The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382 or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

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How can I learn more?

- Ask your health care provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit CDC's website at www.cdc.gov/vaccines

Vaccine Information Statement

Varicella Vaccine



VACCINE INFORMATION STATEMENT

Polio Vaccine

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Vaccination can protect people from **polio**. Polio is a disease caused by a virus. It is spread mainly by personto-person contact. It can also be spread by consuming food or drinks that are contaminated with the feces of an infected person.

Most people infected with polio have no symptoms, and many recover without complications. But sometimes people who get polio develop paralysis (cannot move their arms or legs). Polio can result in permanent disability. Polio can also cause death, usually by paralyzing the muscles used for breathing.

Polio used to be very common in the United States. It paralyzed and killed thousands of people every year before polio vaccine was introduced in 1955. There is no cure for polio infection, but it can be prevented by vaccination.

Polio has been eliminated from the United States. But it still occurs in other parts of the world. It would only take one person infected with polio coming from another country to bring the disease back here if we were not protected by vaccination. If the effort to eliminate the disease from the world is successful, some day we won't need polio vaccine. Until then, we need to keep getting our children vaccinated.

2 | Polio vaccine

Inactivated Polio Vaccine (IPV) can prevent polio.

Children

Most people should get IPV when they are children. Doses of IPV are usually given at 2, 4, 6 to 18 months, and 4 to 6 years of age.

The schedule might be different for some children (including those traveling to certain countries and those who receive IPV as part of a combination vaccine). Your health care provider can give you more information.

Adults

Most adults do not need IPV because they were already vaccinated against polio as children. But some adults are at higher risk and should consider polio vaccination, including:

- people traveling to certain parts of the world,
- · laboratory workers who might handle polio virus, and
- health care workers treating patients who could have polio.

These higher-risk adults may need 1 to 3 doses of IPV, depending on how many doses they have had in the past.

There are no known risks to getting IPV at the same time as other vaccines.

3

Some people should not get this vaccine

Tell the person who is giving the vaccine:

- If the person getting the vaccine has any severe, life-threatening allergies.
 - If you ever had a life-threatening allergic reaction after a dose of IPV, or have a severe allergy to any part of this vaccine, you may be advised not to get vaccinated. Ask your health care provider if you want information about vaccine components.
- If the person getting the vaccine is not feeling well. If you have a mild illness, such as a cold, you can probably get the vaccine today. If you are moderately or severely ill, you should probably wait until you recover. Your doctor can advise you.

4

Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of side effects. These are usually mild and go away on their own, but serious reactions are also possible.

Some people who get IPV get a sore spot where the shot was given. IPV has not been known to cause serious problems, and most people do not have any problems with it.



Other problems that could happen after this vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting and injuries caused by a fall. Tell your provider if you feel dizzy, or have vision changes or ringing in the ears.
- Some people get shoulder pain that can be more severe and longer-lasting than the more routine soreness that can follow injections. This happens very rarely.
- Any medication can cause a severe allergic reaction.
 Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

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What if there is a serious problem?

What should I look for?

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Signs of a **severe allergic reaction** can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

• If you think it is a **severe allergic reaction** or other emergency that can't wait, call 9-1-1 or get to the nearest hospital. Otherwise, call your clinic.

Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not give medical advice.

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Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at **www.hrsa.gov/vaccinecompensation**. There is a time limit to file a claim for compensation.

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How can I learn more?

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- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
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Vaccine Information Statement Polio Vaccine

7/20/2016

42 U.S.C. § 300aa-26

