

Kathy Cooper

3146

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IRRC

From: kim bonneau <coki21@hotmail.com>
Sent: Wednesday, May 04, 2016 1:50 PM
To: IRRC
Subject: Comments concerning proposed regulations to 28 PA Code Ch.23

2016 MAY -4 PM 1:54

Kim Bonneau
426 Bluebuff Rd
King of Prussia, PA 19406

Re: Comments concerning proposed regulations to 28 PA Code Ch.23:

#3147 from the PA Department of Health

#3146 from the PA Department of Education

Dear Members of the PA Independent Regulatory Review Commission:

Thank you for taking the time to read my comments in regards to the proposed vaccination regulations. I have a few concerns regarding the proposed changes highlighted below.

1. Decreasing the provisional period for students.

I do not disagree with shortening the provisional period. However I strongly believe that 5 days is not enough time for students to "catch up" with the required vaccinations. A sixty-day period is a reasonable amount of time for parents to schedule appointments for any vaccines they may have missed. Also if a student is sick this allows time to recover from illness so that they can receive the proper vaccinations. Shortening the Provisional Period to 5 days may also cause a delay in a child's education because parents may not be unable to take time off of work immediately to file an extension.

2. Proof of natural immunity for chicken pox must now be provided by a doctor, physician's assistant, or nurse practitioner.

I disagree with this proposed regulation. For the record, when I was a child in the 1980's having the chicken pox was a right of passage. I am not aware of anyone in my community, school, or family seriously injured from the chicken pox virus. In addition, children whose mothers have had chickenpox are not very likely to catch it before they are 1 year old. If they do catch the chicken pox virus, they often have mild cases. This is because antibodies from their mothers' blood help protect them. Before the Varicella Vaccine the chicken pox virus effected approximately 4 million children per year, with only 100 deaths annually. Unlike the vaccine, lifelong immunity is obtained upon contracting the virus naturally.

I know many children that have naturally acquired the chicken pox virus and none of those cases were verified by a doctor, physicians assistant or nurse practioner. In addition, is the DOH proposing that parents parade their "contagious" children into a medical office to receive a confirmation? Asking to prove immunity for a non deadly virus is an unnessary provision.

3. Meningococcal vaccine for students entering 12th grade.

I strongly disagree with this provision. In the spring of 2015 Senate Bill SB797 was introduced to mandate this vaccine for students entering 12th grade. The bill stalled because our elected officials listened to their constituents and did not see the necessity of such a mandate. Meningococcal meningitis is exceedingly rare. There were only about 390 cases in the U.S. last year. Also those students who chose to go to college are not required to get a meningitis vaccine or can file for an exemption.

4. Eliminating separate listings for combination vaccines, such as the MMR, TDAP and DTAP

I strongly disagree with this provision. It is very misleading to list vaccinations in their combination form. Many parents are NOT aware that combination vaccinations are actually multiple vaccinations in one dosage. They should remain listed individually. It is still optional to receive some combination vaccines separately and this will ensure accuracy in reporting.

Lastly, I recommend inclusion of 028 Pa.Code 23.84, to be included in the required student vaccination information distributed to parents and students.

Thank you for taking the time to read my comments and concerns.

Sincerely,

Kim Bonneau