

3147

Kathy Cooper

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IRRC

**From:** BK Garden Variety <belnick9@aol.com>  
**Sent:** Sunday, May 08, 2016 2:18 PM  
**To:** IRRC; cfindley@pa.gov  
**Subject:** Immunization Regulations

2016 MAY -9 AM 9: 28

W. Nicholas Knisely, DEd  
3711 Leyland Drive  
Mechanicsburg, PA 17050

May 7, 2016

Cynthia Findley, Director, Division of Immunization  
Department of Health  
625 Forster Street  
Health and Welfare Building, Room 1026,  
Harrisburg, PA 17120

Dear Ms. Findley,

Comments for proposed immunization regulations to 28 PA Code Ch. 23:  
# 3147 from the PA Department of Health  
# 3146 from the PA Department of Education

As a former school administrator, I appreciate the work required to run a school efficiently. I support changing the reporting deadline from October 15 to December 31. Please consider allowing schools 60 days instead of the proposed five days for both the provisional period and transfer students.

The evidence of immunity section in the proposed Annex A is confusing. I propose that a standard form be created listing each state mandated vaccine separately as well as medical and religious exemptions. Additionally, the polio vaccine should be changed from activated to inactivated.

I oppose your proposal requiring parents to receive an official variella diagnosis from the medical profession. I feel that Chicken Pox can easily be identified by parents thus not burdening them with additional costs of a medical diagnose.

I am opposed to adding the 12th grade meningitis and 7th grade Tdap vaccine as they carry an increased possibility of injury or death as stated in the 1986 National Childhood Vaccine Injury Act. These vaccines are currently available to those who desire them for their children.

In 2014 only 16 cases of meningitis were diagnosed in Pennsylvania. The annual anticipated expense to family, insurances and taxpayers for the vaccine is over \$16,000,000. The serogroup B, accounting for more than 50% of the cases, is not included in this vaccine. For such a rare disease, with possible severe reactions as listed on the vaccine manufacturer package inserts, it seems unwise to mandate this vaccine. Legislators did not act on previously introduced legislation requiring the vaccine. I feel the Department of Health should not try to circumvent their decision.

According to a February 2016 publication by the American Academy of Pediatrics, the current pertussis vaccine is offering little protection after 2-3 years. Requiring an additional pertussis vaccine, which cannot be administered without the inclusion of diphtheria and tetanus, is unnecessary. This vaccine is readily available to those parents who want it for their children.

Given the parental links to vaccines and the unreliability of the CDC to conduct unbiased studies, no additional vaccines should be mandated.

Please contact me when the official regulations are released.

Sincerely,

W. Nicholas Knisely, DEd