Good Morning honorable members of the House Human Services Committee and Chair Ruby. I am here to advocate for the proposed legislation that would ensure we begin to track correlation with death and time from inoculation.

The government's role in promoting vaccination is significant, as taxpayer dollars are often used in marketing and encouraging vaccination campaigns, federal government assumes all liability from manufacturers. They fund the research. It looks as if we have our own bills to fund research on new drugs and biologics. With this involvement comes a responsibility to address the potential adverse outcomes.

The Vaccine Adverse Event Reporting System (VAERS) remains the sole national mechanism for reporting vaccine injuries in the United States. However, VAERS is dangerously flawed, with significant underreporting of incidents, as highlighted in studies like "Electronic Support for Public Health: Validated Case Finding and Reporting for Notifiable Diseases Using Electronic Medical Data", where it finds that less than 1% of vaccine injuries are ever reported, and only around 10% of severe injuries are ever recorded. We've seen orthopedic surgeon's injured so badly by the covid 19 shot that he could no longer work. When he filed the VAERS report, it was listed as a "Mild" injury. This is how major problems are buried.

This underreporting is exacerbated by a lack of awareness among healthcare providers about how to file reports, coupled with insufficient education for patients on the risks associated with vaccines. I'd ask any people in opposition to major reform in vaccine safety practices if they have ever tried to file a vaers report. Or even mentioned it to a patient.

The National Childhood Vaccine Injury Act of 1986 further complicates this scenario. By removing liability from vaccine manufacturers, the Act shifted responsibility to a no-fault federal compensation program. Alongside this, the government was mandated to report to Congress on ongoing safety monitoring and improvements. Disturbingly, recent court findings have shown that these reports have not been made in over 30 years, indicating a severe lapse in oversight and accountability.

Given that the government actively spends taxpayer money to market vaccines, it should bear some responsibility for the injuries that occur. Here's how a dedicated state government website could address these issues:

**Transparency:** With public funds used to promote vaccines, transparency about potential risks is not just ethical but necessary. This website would provide comprehensive, evidence-based information on vaccine injuries.

**Education**: It would educate both healthcare providers and the public on recognizing, understanding, and reporting vaccine injuries through VAERS, despite its acknowledged flaws. Detailed guidance on how to report would encourage more accurate and comprehensive reporting.

<u>Public Trust:</u> By openly acknowledging vaccine injuries and providing education, we can foster trust in public health initiatives. This trust is essential for maintaining high vaccination rates necessary for herd immunity.

<u>Support for Affected Individuals:</u> The website would offer clear pathways to resources like the National Vaccine Injury Compensation Program (VICP), supporting those affected by vaccine injuries, particularly since manufacturers are not liable under the 1986 Act.

<u>Monitoring and Improvement</u>: Enhanced reporting could lead to better safety monitoring, potentially driving improvements in vaccine formulations, administration practices, and public <u>health policy, fulfilling the government's neglected reporting duties.</u>

In conclusion, I saw too many people on our intake forms, when we ask "when was the last time you felt well" and they write "since my covid shot". Some of them are no longer here.

And no one is tracking this in a way that isn't just going to bury it and move on.

This same technology, being approved under emergency declaration, with extremely poor checks and balances, to the point where the Pfizer fought to hide the actual data from the research for 75 years, is now being used for multiple other inoculations. Now with "assumed safety profile" that doesn't truly exist.

I strongly urge this committee to support this legislation for the sake of transparency, accountability, and the health of our state's residents. Thank you for considering this vital matter.

Dr. Steve Nagel, DC

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## References:

"Electronic Support for Public Health: Validated Case Finding and Reporting for Notifiable Diseases Using Electronic Medical Data" - This study can be searched for on scholarly databases like PubMed or Google Scholar.

Information on the National Childhood Vaccine Injury Act of 1986 can be found through government websites like the CDC or HHS, or through legal databases discussing the Act's implications.