

Testimony to Senate Health & Welfare

S.71 – An act relating to the administration of immunizations by pharmacists Thursday, February 23, 2017

Good morning, thank you for inviting me to testify on S.71. My name is Stephanie Winters, I am here today as the executive director of the American Academy of Pediatrics Vermont Chapter, and the Vermont Academy of Family Physicians, and on behalf of Vermont Medical Society as the public health policy specialist.

Along with the many clinical factors Dr. Davis described, there are some further concerns we have with S.71 and the administration of immunizations to children in a pharmacy setting.

First, this bill would not require a pharmacist to provide any documentation to the individual's personal physician to include in the medical record. In the interest of patient safety, however, we must avoid fragmentation of care. The ability of pharmacists to execute the physical task of administering vaccines safely is less of an issue than their ability to deal with the consequences of an adverse reaction presented after the pharmacy closes.

This bill also raises serious questions such as - Will the pharmacist have ALL of the child's records? How will the pharmacist ascertain which immunizations the child needs? Would the pharmacist require the parent to produce a copy of the record? Would physician's offices get mid-day calls to "tell us what the child needs", Would the pharmacist be required to use the immunization registry? Would they see all children regardless of insurance?

Finally, even if the pharmacist administers the vaccine well, enters it into the immunization registry, and reports it to the child's physician, when a child receives an immunization outside the physician's practice this is a missed opportunity for a physician to form a relationship, discuss numerous other issues, and possibly diagnose an unrelated illness.

Thank you and I would be happy to answer any questions.