



**Texas Pediatric Society**  
The Texas Chapter of the  
American Academy of Pediatrics  
INCORPORATED IN TEXAS



**Texas Senate Health and Human Services Committee**  
**Senate Bill 1310 by Senator Bob Hall**  
**March 31, 2021**

**On behalf of the:**  
**Texas Pediatric Society**  
**Texas Medical Association**  
**Austin Regional Clinic**  
**Texas Public Health Coalition**

Chair Kolkhorst, Vice Chair Perry, and committee members,

My name is Dr. Marjan Linnell, and I am a practicing pediatrician with Austin Regional Clinic, a group that serves Central Texas and encompasses primary care – family practice, pediatrics, and internal medicine – and 21 medical specialties. Thank you for the opportunity to testify on behalf of the Texas Pediatric Society, the Texas Medical Association, Austin Regional Clinic, and the 30-plus organizational members of the Texas Public Health Coalition – and as a mother to two wild but very sweet children. **We strongly oppose Senate Bill 1310 as it would create unnecessary burdens and take away from our ability to have open conversations with patients.**

Physicians and health care providers take very seriously the responsibility of informing patients and families about the risks and benefits of vaccines. **Current federal and state laws already ensure that patients and parents have the information they need to make decisions regarding vaccinations.** Under the National Vaccine Childhood Injury Act, physicians provide a Vaccine Information Statement to parents and patients before each dose of a vaccine is administered. These statements are resource documents produced by the Centers for Disease Control and Prevention (CDC). They are written in plain, easy-to-understand language and are available in more than 40 languages to ensure that information on risks and benefits of vaccines is accessible and understandable for families. Each Vaccine Information Statement has information about the disease the vaccine prevents, who the vaccine is recommended for, situations in which the vaccine is not recommended, risk associated with the vaccine, symptoms and conditions that would signify an allergic reaction, information about the National Vaccine Injury Compensation form, how to report an injury, and how to get additional information about vaccines.

Texas law reinforces federal guidelines and requires physicians and providers inform patients about the risks and benefits of vaccines and how to seek reimbursement for injuries related to certain vaccines. Again, this information is also in the Vaccine Information Statement provided to patients.

Physicians believe in open conversations rooted in facts and science as the foundation for informed decision making. We oppose state mandates dictating how we should hold these conversations with our patients. Just like many of you would object to mandated vaccines – we object to being forced to

accommodate the scare tactics of some vaccine-skeptical groups. Discussing medical decisions, including vaccinations, is the role and responsibilities of a physician, a role I take seriously as a mom and a pediatrician. **This physician commitment and the existing requirements ensure informed consent, and additional state laws and government regulation are unnecessary and burdensome.**

Mandating additional materials, including a list of vaccine ingredients and substances used during manufacturing, is not a benefit to patients. A list of highly technical, chemical compounds that may be used to help prevent bacterial contamination of the vaccine or that work as a stabilizer to protect the vaccine from heat or light is confusing. **This information does not contribute to patients' and parents' understanding of the risks and benefits of vaccinations, and may sow doubt about the efficacy and safety of vaccines by complicating patient understanding.** This is especially troubling now, when we need to be doing all we can to promote safe vaccination and guard against the ongoing COVID-19 pandemic. If parents have concerns about specific ingredients or a possible allergic reaction, they can ask their doctor about the ingredient or can find the ingredient list at the CDC website listed on the Vaccine Information Statement.

When I think about parents in my clinic trying to make sense of dozens of vaccine ingredients, I also think about the infant I cared for during my pediatric intensive care rotation as a resident. The infant was diagnosed with whooping cough, and though she was smiling and babbling when she came in, she deteriorated quickly and had to be put on a lung bypass machine. Sadly, she did not survive. I remember holding her sobbing mother while my own son kicked happily in my growing stomach. I worry about other babies like her, whose loving parents may be overwhelmed by confusing, long ingredient lists without context, leading to more deaths from vaccine-preventable illnesses, especially when we know these ingredients have been shown to be safe.

This bill also creates an additional administrative burden on physicians and clinics. This bill would require physicians and providers give families unwarranted paperwork with vaccine ingredient lists when administering a vaccine. Adding on dozens of mandatory pages to be printed for each well child visit creates a huge administrative burden on practices that would lead to decreased access and availability for patient care.

Communicating with patients and families is critical to developing and nurturing the patient-physician relationship. Physicians and providers take time to talk with families about vaccines and address questions. **Our goal is always to inform our patients and communicate with them in plain language about the benefits of vaccinations.**

Thank you for the opportunity to testify in opposition to SB 1310. For any questions or follow-up please contact Clayton Travis, director of advocacy and health policy, Texas Pediatric Society, at [Clayton.Travis@txpeds.org](mailto:Clayton.Travis@txpeds.org).