

**PRESENTATION OF THE
BOARD OF PHARMACY**

TO THE HOUSE COMMITTEE ON
CONSUMER PROTECTION & COMMERCE

TWENTY-NINTH LEGISLATURE
Regular Session of 2017

Tuesday, March 28, 2017
2:00 p.m.

TESTIMONY ON SENATE BILL NO. 514, S.D. 1, RELATING TO HEALTH.

TO THE HONORABLE ROY M. TAKUMI, CHAIR,
AND MEMBERS OF THE COMMITTEE:

My name is Lee Ann Teshima, Executive Officer for the Board of Pharmacy ("Board"). I appreciate the opportunity to submit testimony on Senate Bill No. 514, S.D. 1, Relating to Health, which would authorize pharmacists to administer the Tdap (tetanus, diphtheria, pertussis), meningococcal, influenza and the human papillomavirus vaccines, to persons between eleven and seventeen years of age, pursuant to Hawaii Revised Statutes ("HRS") section 461-11.4.

The Board supports this bill and would like to emphasize that pursuant to HRS 461-11.4, in order to administer this vaccine, the pharmacist must:

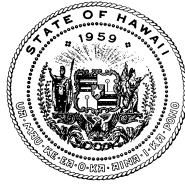
- Have a valid prescription and verify that the prescriber or the prescriber's authorized agent is the patient's medical home. This ensures that the patient was examined by the primary care physician who, working in collaboration with the family, oversees the acute, chronic and preventive health needs of the patient in a comprehensive, coordinated, and continuous fashion;

- Have completed a training program approved by the Accreditation Council of Pharmacy Education prior to administering the vaccine;
- After any vaccination is administered, immediately provide to the patient a vaccination record including the patient's name, date of birth, type of vaccine administered and the date and location it was administered; and
- Provide, within seventy-two hours to the medical home and within five business days to the department of health immunization registry, the same information provided to the patient pursuant to subsection (b) as well as the name of the vaccine administered, manufacturer, lot number and expiration date, method of administration and anatomical site of administration.

In regards to the training that is required to administer a vaccine to a minor, the course must be approved by the Accreditation Council of Pharmacy Education ("ACPE"). ACPE is a non-profit accreditation national agency recognized by the Council on Higher Education Accreditation and the U. S. Department of Education. The ACPE is also the Board's recognized approved provider for pharmacists' continuing education ("CE"). The approved pharmacy-based immunization delivery CE course offered by the American Pharmacists Association is approved by the ACPE for 12-contact hours of the self-study component and 8 hours of live training that is required for the completion of the certificate training program. In addition to the initial training program, pharmacists who administer a vaccine to a minor must also complete a training program every other biennial renewal period and submit proof of completion of the board approved course. Pharmacists who have completed the initial

pharmacy-based immunization delivery CE course are listed on the Board's webpage. This allows the public to see which pharmacists at which pharmacy have completed the training in order to administer a vaccine to a minor.

Thank you for the opportunity to present testimony in support of Senate Bill No. 514, S.D. 1.



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of S.B. 514 S.D. 1
RELATING TO HEALTH**
REPRESENTATIVE ROY M. TAKUMI, CHAIR
HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE
Hearing Date: March 28, 2017 Room Number: 329

1 **Fiscal Implications:** None for the Department.

2 **Department Testimony:** The Department is supportive of S.B. 514 S.D. 1 as it may help to
3 improve human papillomavirus (HPV) and other adolescent vaccination rates in Hawaii by
4 increasing access to adolescent immunizations as well as potentially increasing available vaccine
5 supply for the pediatric population, statewide.

6 HPV vaccination is of special concern because it is an important public health measure that
7 protects against cancers caused by HPV. In 2015, according to U.S. Centers for Disease Control
8 and Prevention National Immunization Survey, Teen data, HPV vaccine series completion rates
9 for girls aged 13–15 years in Hawaii are estimated to be 44% (CI±11) and for males aged 13–15
10 years, 29% (CI±10). These rates are well below the Healthy People 2020 target of 80% coverage
11 levels for males and females aged 13–15 years.

12 HPV vaccine differs from other immunizations recommended for adolescents aged 11–12 years
13 (Tdap, MCV4, influenza) in that multiple doses (total number required is dependent upon the age
14 at which vaccination is initiated and the child's health status) administered within a 6-month
15 period are required for series completion. Hawaii's poor HPV vaccination rates and the
16 complexity of the HPV immunization schedule indicate development of additional approaches to
17 vaccination, such as the creation of opportunities for increased collaboration between the
18 medical home and pharmacists proposed by this measure, should be encouraged to enhance
19 access to HPV vaccine for Hawaii's keiki.

- 1 It should be noted, this measure would currently benefit only those with private insurance as
- 2 pharmacists/pharmacies do not participate in the Hawaii Vaccines For Children Program, which
- 3 supplies vaccines for administration to Medicaid/MedQuest-eligible patients.
- 4 Thank you for your consideration of this important health topic and for the opportunity to testify.



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
House Committee on Consumer Protection & Commerce
March 28, 2017 at 2:00 p.m.

by
Carolyn Ma, PharmD, BCOP
DEAN
UH Hilo – Daniel K. Inouye College of Pharmacy

SB 514 SD1 – RELATING TO HEALTH

Chair Takumi, Vice Chair Ichiyama, and members of the Committee:

My name is Carolyn Ma, and I am the Dean for the UH Hilo Daniel K. Inouye College of Pharmacy (DKICP). The college fully supports this bill that will allow registered pharmacists trained and certified in vaccine administration to administer the Human Papilloma Virus vaccine to 11-14 year old patients.

In relation to this bill, the DKICP, via the certified American Pharmacists Association (APHA) course, provides training in immunization administration in the first professional year. Student pharmacists are expected to apply these skills in their experiential rotation courses throughout the remaining three years of training and also in numerous community health screening and immunization events. Courses in oncology, contraception, reproductive pharmacology and women's health, and pediatrics are taught in the 3rd professional year. Education is provided throughout the four year professional curriculum on medication assessment and therapeutic recommendations via related laboratory tests and subjective/objective findings related to disease and drug therapy. A similar curriculum is presented in all U.S. accredited (ACPE) colleges of pharmacy.

The DKICP has also provided training to practicing pharmacists through their training program via the Hawai'i Pharmacists Association. **Please note that all immunizing pharmacists and students pharmacists MUST be certified in BLS or Basic Life Support if they are immunizing. BLS allows for cardiopulmonary resuscitation (CPR) of adults, children and infants and also for intervention of choking. In addition, immediate access to epinephrine must be available at any site of vaccination.**

There is recommended monitoring post-administration of observation for 15 minutes due to an adverse reaction of fainting. Via the Vaccine Adverse Events Reporting System (VAERS) there has only been one report of fainting reported in Hawai'i since the Gardasil 9 vaccine was released. VAERS allows for self-reporting, however, the CDC and FDA state limitations to the VAERS system in that since it is a self-reporting

system, there may be reporting bias and inconsistent data quality and completeness, and that report of an AE does not necessarily attribute causality to the vaccine. As well, the data base does not have a non-vaccinated portion for comparison.²

There is concern regarding the declining rate of uptake of the HPV vaccine. In a recent survey of incoming freshmen performed at UH Mānoa and UH Hilo campuses 22% and 5%, respectively, have been fully vaccinated.¹ Students who had not received at least one of three shot series were 69% and 78% respectively.¹ The recommended age of vaccination is at age 11-12 years of age.

A secondary issue that accompanies this age group is that due to cost of the vaccine, many physicians or provider offices will not carry the HPV vaccine, thus sending a 11-13 year old patient with a prescription to a pharmacy. Upon dispensing, the patient would need to return to the provider for administration. This may pose problems in the case of rural distances but more importantly that the proper transportation and storage of the HPV vaccine requires specific cold chain storage and verification of this cannot be assured once the vaccine is in the possession of the patient.

Statistics from APHA/NASPA State Immunization Laws/Rules (Jan. 2015) show that 23 states allow pharmacists to immunize in all ages for HPV. Pharmacists have in the last 20 years become the largest body of health professionals to make a significant impact on vaccination uptake. Given our training and accessibility, pharmacists can provide significant impact in the battle against this virus that may cause a number of cancers in both men and women.

Thank you for the opportunity to testify on behalf of SB 514 SD1.

¹ Corpuz, SA. Assessing Human Papillomavirus (HPV) & Human Papillomavirus Vaccination among University of Hawai'i at Manoa and University of Hawai'i at Hilo Freshmen. Office of Public Studies, University of Hawai'i at Manoa

² <https://wonder.cdc.gov/controller/datarequest/D8;jsessionid=A1FDBC9299B0602E211BFED8D5E1779F>



American Cancer Society
Cancer Action Network
2370 Nu`uanu Avenue
Honolulu, Hawai`i 96817
808.432.9149
www.acscan.org

House Committee on Consumer Protection and Commerce
Representative Roy Takumi, Chair
Representative Linda Ichiyama, Vice Chair
Members of the Committee

SB 514, SD1 – RELATING TO HEALTH

Cory Chun, Government Relations Director – Hawaii Pacific
American Cancer Society Cancer Action Network

Thank you for the opportunity to provide testimony in support of SB 514, SD1, which allows pharmacists to provide the human papillomavirus (HPV), Tdap (tetanus, diphtheria, pertussis), meningococcal, or influenza vaccine to individuals between the age of 11 to 17 with a valid prescription.

The American Cancer Society Cancer Action Network (ACS CAN) is the nation's leading cancer advocacy organization. ACS CAN works with federal, state, and local government bodies to support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem.

ACS CAN strongly believes in preventing cancer before it develops and in detecting cancer early, when it is more easily treated. We support policies that remove barriers to care and increase access to cancer screening and early detection services.

HPV's are a group of more than 150 related viruses and HPV infections are very common - nearly 80 million people in the US are currently infected with HPV.ⁱ Each year, approximately 30,700 men and women are diagnosed with cancers caused by the human papillomavirus (HPV).ⁱⁱ HPV causes over 90 percent of cervical cancers, 69 percent of vulvar cancers, 75 percent of vaginal cancers, 63 percent of penile cancers, 91 percent of anal cancer, and 72 percent of oropharyngeal cancers.ⁱⁱⁱ

Vaccines are available to help prevent infection by certain types of HPV and some of the cancers linked to those types. All HPV vaccines help prevent infection by HPV-16 and HPV-18. These 2 types cause about 70% of all cervical cancers and pre-cancers, as well as many cancers of the anus, penis, vulva, vagina, and throat^{iv}. The HPV vaccine produces the strongest immune response in preteens. To work best, the HPV vaccines should be given at age 11 or 12.

Since the first HPV vaccine was recommended in the US in 2006, prevalence of some types of HPV infections have declined by nearly two-thirds among teenage girls aged 14-19 and over a third among women 20-24 years old.^v Despite the vaccine's ability to prevent most cervical, vaginal, vulvar, penile, anal, rectal, and oropharyngeal cancers, vaccination rates remain very low. Only 52 percent of girls and 36 percent of boys in Hawaii are fully vaccinated from HPV.

The HPV vaccine can prevent multiple types of cancer that will reduce Hawaii's cancer burden. ACS CAN urges the committee to pass this legislation as it will help increase vaccination uptake, ultimately reducing cancer incidence and mortality in the state of Hawaii.

Thank you for the opportunity to provide testimony on this important issue.

ⁱ Centers for Disease Control and Prevention. *Genital HPV infection – fact sheet*. Updated May 19, 2016. Accessed June 2016. <http://www.cdc.gov/std/HPV/STDFact-HPV.htm#a7>.

ⁱⁱ Viens LJ, Henley J, Watson M, Markowitz LE, Thomas CC, Thompson TD, et al. Human Papillomavirus-Associated Cancers – United States, 2008-2012. *MMWR*. 2016; 65(26): 661-66.

ⁱⁱⁱ Centers for Disease Control and Prevention. *The link between HPV and cancer*. Updated September 30, 2015. Accessed June 2016. <http://www.cdc.gov/hpv/parents/cancer.html>.

^{iv} American Cancer Society. HPV Vaccines. Updated July 13, 2016. Accessed February 2017. <https://www.cancer.org/cancer/cancer-causes/infectious-agents/hpv/hpv-vaccines.html>.

^v Markowitz LE, Liu G, Hariri S, Steinau M, Dunne EF, Unger ER. Prevalence of HPV after introduction of the vaccination program in the United States. *Pediatrics*. 2016; 137(2):e20151968.

**American Congress of Obstetricians and Gynecologists
District VIII, Hawaii (Guam & American Samoa) Section**

Greigh Hirata, MD, FACOG, Chair
94-235 Hanawai Circle, #1B
Waipahu, Hawaii 96797



To: Committee on Consumer Protection and Commerce
Representative Roy Takumi, Chair
Representative Linda Ichiyama, Vice Chair

DATE: Tuesday, March 28, 2017
TIME: 2:00 PM
PLACE: Conference Room 329

FROM: Hawaii Section, ACOG
Dr. Greigh Hirata, MD, FACOG, Chair
Dr. Jennifer Salcedo, MD, MPH, MPP, FACOG, Vice-Chair
Lauren Zirbel, Community and Government Relations

Re: SB514, SD1, (HSCR1101) Relating to Pharmacists administering HPV vaccines to patients between 11 to 17 years of age

Position: Support

Dear Representatives Takumi, Ichiyama and Committee Members:

The American Congress of Obstetricians and Gynecologists, Hawaii Section (Hawaii ACOG) supports SB 514 allowing Pharmacists to administer HPV vaccines to patients between 11-17 years of age.

HPV is associated with multiple cancers, including anogenital cancer (including cervical, vaginal, vulvar, penile, and anal), oropharyngeal cancer, and genital warts. The HPV vaccination can significantly reduce the incidence of anogenital cancer and genital warts.

The Centers for Disease Control and Prevention and the American College of Obstetricians and Gynecologists recommend routine vaccination with HPV vaccine for girls and boys. The 9-valent HPV vaccine is recommended by the Advisory Committee on Immunization Practices and was licensed by the U.S. Food and Drug Administration in December 2014 for girls and boys aged 11–12 years. Compared with other vaccines recommended in the same age bracket, HPV vaccination rates in the United States are unacceptably low. Safety data for all three HPV vaccines are reassuring. According to the Vaccine Adverse Events Reporting System, more than 60 million doses of HPV vaccine have been distributed, and there are no data to suggest that there are any severe adverse effects or adverse reactions linked to vaccination. The HPV vaccine is a proven

way to prevent future cancers, and the Legislature has the ability to protect the future health of Hawaii's keiki by passage of this legislation.

We feel that this bill will increase patient access while not endangering our patient's health.

Mahalo for the opportunity to testify, and for your support of Hawaii Adolescent Health.

Reference: Human papillomavirus vaccination. Committee Opinion No. 641. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2015;126:e38-43.

Representative Roy Takumi, Chair
Representative Linda Ichiyama, Vice Chair
House Committee on Consumer Protection & Commerce

Tuesday, March 28, 2017
Conference Room 329; 2:00 PM

RE: Senate Bill 514 SD1 – Relating to Health – In Support

Aloha Chair Takumi, Vice Chair Ichiyama and members of the Committee:

CVS Health is pleased to reiterate our support of Senate Bill 514 SD1 which authorizes pharmacists to administer the human papillomavirus (HPV), Tdap (tetanus, diphtheria and pertussis), meningococcal, or influenza vaccine to persons between eleven and seventeen years of age.

The HPV vaccine targets the human papillomavirus, which is the most common sexually transmitted virus in the United States. The HPV vaccine targets four strains of the virus that are responsible for approximately 70 percent of cervical cancers and 90 percent of genital warts cases. Also, SB 514 SD1 expands the scope of practice for pharmacists to include vaccinations for tetanus, diphtheria and pertussis (aka Tdap); meningitis and the flu / influenza to this same age group. As a result, once enacted, this bill will help increase access to these important medications and reduce incidence of infectious diseases.

Highlighting just one of its positive public health impacts, SB 514 SD1 helps address a critical issue by allowing children to be vaccinated against HPV. According to the Centers for Disease Control and Prevention (CDC), every year within the United States over 30,000 people are diagnosed with cancer caused by HPV. Over a third of those cases are cervical cancer, which is the second leading cause of cancer deaths among women worldwide. In over 90 percent of cases, cervical cancer is caused by HPV. The vaccine can prevent up to 70 percent of these cases, but only if it is administered before exposure to the virus.

The CDC recommends that girls and boys should receive the vaccination at 11 or 12 years of age, not only to vaccinate children before exposure to HPV, but also because the response to the vaccine is better at this age than older ages. Studies have shown that the vaccine is effective for at least ten years, and there is no evidence that protection is weakened over time. Once enacted, this bill will allow children to receive this important vaccine as recommended by the CDC, the leading national public health institute in the country.

CVS Health supports appropriate expansion of professionally licensed pharmacists' scope of practice as it relates to administering these vaccines. This bill addresses a legitimate health care need which can be better met through Hawaii's licensed pharmacists. We therefore believe SB 514 SD1 has the potential to be a long-term positive for the people of Hawaii.



Longs Drugs

CVS Health operates as the largest pharmacy chain in Hawaii under our Longs Drugs banner. Our nearly 3,000 CVS Health colleagues in Hawaii working across the enterprise offer our patients and clients in the Aloha State a wide range of comprehensive, integrated pharmacy and health operations statewide including: Pharmacy Benefit Management (PBM) services (CVS Caremark), Specialty Pharmacy (CVS/specialty), Mail-Order & Retail Pharmacy (CVS/pharmacy/Longs Drugs), and Retail Health Clinics (CVS/minute clinic).

Mahalo for the opportunity to submit testimony.

Respectfully,

A handwritten signature in cursive script that reads "Eric P. Douglas".

Eric P. Douglas

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 27, 2017 10:14 AM
To: CPCtestimony
Cc: puyemoto@gmail.com
Subject: *Submitted testimony for SB514 on Mar 28, 2017 14:00PM*

SB514

Submitted on: 3/27/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Patrick Uyemoto	Hawaii Pharmacists Association	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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An Independent Licensee of the Blue Cross and Blue Shield Association

March 28, 2017

The Honorable Roy M. Takumi, Chair
The Honorable Chris Todd, Vice Chair
House Committee on Consumer Protection and Commerce

Re: SB 514, SD1 – Relating to Health

Dear Chair Takumi, Vice Chair Todd, and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify in support of SB 514, SD1 which authorizes pharmacists to prescribe and administer the human papillomavirus (HPV) vaccine to persons between eleven and seventeen years of age and specifies requirements pharmacists must meet prior to administering the HPV vaccine.

HMSA supports SB 514, SD1 in as much as the specific service being covered herein is consistent with pharmacists' appropriate training and education. The HPV vaccination protects against the most common strains of HPV that have been found to cause cervical and other cancers. Young women when inoculated with this vaccination will be protected against the HPV strains that cause 70% of cervical cancer cases. As of 2007, the HPV vaccine became a standard immunization, meaning it is 100% covered for HMSA members. SB 514, SD1 would increase access to this vaccine for young women and men and help reduce the incidence of HPV and the associated risk of cancers.

Thank you for allowing us to testify in support of SB 514, SD1.

Sincerely,

Mark K. Oto
Director, Government Relations.

To: Hawaii State House of Representatives Committee on Consumer Protection and
Commerce
Hearing Date/Time: Tuesday, Mar. 28, 2017, 2:00 p.m.
Place: Hawaii State Capitol, Rm. 329
Re: Testimony of Planned Parenthood Votes Northwest and Hawaii in support of S.B.
514, SD1, relating to Health

Dear Chair Takumi and Members of the Committee,

Planned Parenthood Votes Northwest and Hawaii (“PPVNH”) writes in support of S.B. 514, SD1, which seeks to authorize pharmacists to prescribe and administer a full range of vaccines, including the human papillomavirus (“HPV”) vaccine, to persons between eleven and seventeen years of age.

PPVNH is dedicated to protecting and promoting the sexual and reproductive health of Hawaii’s people and we support S.B. 514 because it will help to prevent HPV-related cancers. In our health centers, we see firsthand the sometimes devastating effects of HPV on our patients.

According to the Center for Disease Control and Prevention, HPV infects approximately 79 million people in the United States with 14 million new cases each year. HPV is so common that nearly all sexually-active men and women will get at least one type of HPV at some point in their lives. There is no cure for HPV, only treatment for related health problems.

Authorizing pharmacists to provide the HPV vaccination to 11-year-olds corresponds with the recommendations of the CDC and will help to reduce cervical and other cancer rates. The CDC recommends routine vaccinations for all youth between the ages of 11 and 12. Yet, too few adolescents in Hawaii are receiving HPV vaccines, which results in more cases of HPV and cervical and other cancers and diseases.

We can do better to protect their health and while we can’t protect our youth from everything, we can help to protect them from cancer in the future by passing S.B. 514.

Thank you for this opportunity to testify in support of this important measure.

Sincerely,
Laurie Field
Hawaii Legislative Director and Public Affairs Manager

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 27, 2017 8:34 AM
To: CPCtestimony
Cc: hlusk@chowproject.org
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/27/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Heather Lusk	The CHOW Project	Support	No

Comments: Thank you for the opportunity to testify in support of SB 514. I am writing in support of this bill because it will allow our families more access to healthcare and disease prevention. This bill would allow pharmacists to administer a full range of immunizations to adolescents aged 11-17. This bill authorizes pharmacists to administer the human papillomavirus, meningococcal, influenza, tetanus, diphtheria, and pertussis vaccines to persons ages eleven through seventeen years of age. Pharmacists are authorized by written instructions of a licensed physician or advanced practice registered nurse with prescriptive authority to coordinate and work together for the protection of their patients. Pharmacists are required to complete a training program approved by the Accreditation Council of Pharmacy Education and submit that certification to the Board prior to administering any vaccine to adolescents aged 11-17. I support these revisions to the bill, especially since the purpose of this bill is to improve the overall health of persons within Hawaii and to reduce the incidence of infectious disease through vaccination. The pharmacists in Hawaii have the training and infrastructure to administer these shots. To vaccinate, they all face a rigorous curriculum and certification process. Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods. Pharmacies are in a position to increase adolescent vaccination uptake in Hawaii. Thank you for your consideration. Heather Lusk

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Aloha Chair Takumi, Vice Chair Ichiyama, and House Committee members, thank you for this opportunity to provide testimony on SB514 SD1.

I am writing in **support of this bill** because it will allow our families more access to **healthcare and disease prevention.**

This bill would allow pharmacists to administer a full range of immunizations to adolescents aged 11-17. This bill authorizes pharmacists to administer the human papillomavirus, meningococcal, influenza, tetanus, diphtheria, and pertussis vaccines to persons ages eleven through seventeen years of age. Pharmacists are authorized by written instructions of a licensed physician or advanced practice registered nurse with prescriptive authority to coordinate and work together for the protection of their patients.

Pharmacists are required to complete a training program approved by the Accreditation Council of Pharmacy Education and submit that certification to the Board prior to administering any vaccine to adolescents aged 11-17.

I support these revisions to the bill, especially since the purpose of this bill is to improve the overall health of persons within Hawaii and to reduce the incidence of infectious disease through vaccination.

The pharmacists in Hawaii have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawaii.

Mahalo for your consideration!

Patrick Uyemoto, Pharm.D.
Clinic Pharmacy Manager
Times Pharmacy
808.675.8755
Patricku@times-supermarket.com

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 27, 2017 10:13 AM
To: CPCtestimony
Cc: puyemoto@gmail.com
Subject: *Submitted testimony for SB514 on Mar 28, 2017 14:00PM*

SB514

Submitted on: 3/27/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Patrick Uyemoto	Times Pharmacy	Support	Yes

Comments:

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SanHi Government Strategies

Gary M. Slovin
Mihoko E. Ito
R. Brian Tsujimura

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DATE: March 27, 2017

TO: Representative Roy Takumi
Chair, Committee on Consumer Protection and Commerce
Submitted Via Capitol Website

RE: **S.B. 514, S.D.1 – Relating to Health**
Hearing Date: Tuesday, March 28, 2017 at 2:00 p.m.
Conference Room: 329

Dear Chair Takumi and Members of the Committee on Consumer Protection and Commerce:

We submit this testimony on behalf of Walgreen Co. (“Walgreens”). Walgreens operates stores at more than 8,200 locations in all 50 states, the District of Columbia, and Puerto Rico. In Hawaii, Walgreens now has 20 stores on the islands of Oahu, Maui, and Hawaii.

Walgreens **supports** S.B. 514, S.D.1, which authorizes pharmacists to administer the human papillomavirus, Tdap, meningococcal, and influenza vaccines to persons between eleven and seventeen years of age with a valid prescription.

Currently, the law permits pharmacists to administer vaccines to persons between the ages of fourteen and seventeen. Lowering the age at which pharmacists are allowed to administer the HPV, Tdap, meningococcal and influenza vaccines would expand access to these important vaccines because of the convenience and accessibility of pharmacies, where no appointment is required, compared to physician offices. Grouping these vaccines together also will help to improve immunization rates in this age group, and will make it more convenient to obtain them.

Pharmacist Training

Pharmacists are trained within the scope of their practice to provide injections and vaccinations to children as young as 3 years old. Walgreens pharmacists follow the

Gary M. Slovin
Mihoko I. Ito
R. Brian Tsujimura
C. Mike Kido
Tiffany N. Yajima
Matthew W. Tsujimura

American Pharmacists Association immunization training procedure which is recognized by the Centers for Disease Control. The training involves a 20 hours of instruction which covers vaccine immunology, vaccine schedules, patient screening, adverse events, patient consultation, documentation and record keeping, administration techniques and strategies to increase immunization rates.

Walgreens Pharmacies

Walgreens pharmacies have consultation areas or private health rooms, which are equipped with the necessary tools and supplies to administer immunizations. In addition, Walgreens' policy is to maintain an agreement with a protocol physician who allows pharmacists to administer immunizations under his/her name. This protocol agreement outlines authorized immunizations, adverse event management and any reporting requirements, if applicable. Walgreens pharmacists must also be CPR certified via the American Red Cross in order to provide immunizations.

Walgreens' policy is to administer immunizations to children age 7 years and older, where state law allows for it. Walgreens also notifies a patient's primary care physician so that the patient's medical records are kept together and up to date.

Many Other States Have Expanded Access to Vaccines in Pharmacies

Many states (over half) have no age restrictions for when pharmacists can administer vaccines. In addition to moving towards lowering age restrictions, many states are also authorizing pharmacists to take a greater role in screening, recommending, and prescribing vaccines. Nearly all states, including Hawaii, now allow pharmacists to administer all or almost all vaccines.

As trusted and highly accessible health care providers, pharmacists are well-positioned to increase public access to immunizations. Allowing pharmacists to provide the preventative vaccines in S.B. 514, S.D.1 would align with an already well-established standard of practice across the country.

For the above reasons, we encourage this committee to pass the measure. Thank you for the opportunity to submit testimony in support of this bill.

March 25, 2017

To: Representative Roy Takumi (Chair of House Consumer Protection & Commerce Committee), Representative Linda Ichiyama (Vice Chair of House CPC Committee) and House CPC Committee members

From: Cheryl Toyofuku, Pearl City, HI

Re: Opposition to SB514 – Authorizing pharmacists to administer the HPV, meningococcal, influenza, tetanus, diphtheria, pertussis (TDaP) vaccines to ages 11 to 17

Hearing: Tuesday, March 28, 2017 at 2:00 p.m., Room 329

I am a mother, grandmother, registered nurse and health advocate and I strongly oppose SB514. Here are my reasons:

On the HPV (human papillomavirus) and the HPV vaccine:

- HPV (human papillomavirus) is a commonly sexually transmitted infection and there are more than 100 known HPV types, the majority of which are not harmful. HPV is naturally cleared from the body within 2 years by more than 90 percent of those who become infected.
- The HPV vaccine contains 3 horrific ingredients with potential for long term, serious health consequences: polysorbate 80 (known to cause infertility in mice, anaphylactic-like reactions and immune system problems in humans), aluminum (neuro-toxin) and sodium borate (also known as borax found in rat poison, pesticides, flame retardants and laundry detergent; interferes with sperm production & male fertility when given to animals at high doses). CDC lists the ingredients, but does not list what each ingredient does. This site explains: <http://www.offtheradar.co.nz/vaccines/52-gardasil-ingredients.html>
- After Gardasil was licensed and three doses recommended for 11-12 year old girls and young women, there were thousands of reports of sudden collapse with unconsciousness within 24 hours: seizures; muscle pain and weakness; disabling fatigue; Guillain Barre Syndrome (GBS); facial paralysis; brain inflammation; rheumatoid arthritis; lupus; blood clots; optic neuritis; multiple sclerosis; strokes; heart and other serious health problems, including death, following receipt of Gardasil vaccine. Using the MedAlerts search engine, as of Sept. 30, 2015, there were a total of 37,474 vaccine reaction reports made to the federal Vaccine Adverse Events Reporting System (VAERS) associated with Gardasil vaccinations, including 209 deaths. <http://www.nvic.org/Vaccines-and-Diseases/HPV.aspx>
- The HPV vaccine may increase the risk of cervical cancer and pre-cancerous lesions in girls who may already have one of the 9 HPV viruses in the vaccine. To clarify, the vaccine actually raises the risk of cervical cancer for anyone exposed to the virus before they were vaccinated. Yet, there are no plans to screen patients to determine if they already have the virus prior to vaccination.
- The vaccine has not been proven to prevent cervical cancer. There are many strains of HPV and the Gardasil HPV vaccine has 9 types. The prescribing information states, "*Gardasil-9 has not been demonstrated to protect against disease from vaccine and non-vaccine HPV types to which a person has been previously been exposed through sexual activity.*" It is also unknown how long the HPV vaccine protection lasts. Consequently, youth entering adulthood, along with their parents are lulled into a false sense of security.
- The HPV vaccine has not been researched and tested in children under 15 years old, yet it is being required for children as young as 11 years old or those entering 7th grade. It is marketed aggressively to preteens and their parents by the vaccine manufacturer, including the lobbying of state legislators to require it for young children to get another vaccine "just in case" in order to prevent cervical cancer. Cervical cancer is most prevalent at 40 years of age or older. Does giving a HPV vaccine to an eleven year old child really lower the incidence of cervical cancer much later in their lives, when it is unknown how long the vaccine protection lasts? This vaccine

is completely unnecessary with serious safety and effectiveness concerns and definitely should not be a school requirement.

On the Tetanus, Diphtheria Toxoids and Acellular Pertussis (Tdap) Vaccine:

- The Tdap vaccine contains the diphtheria & tetanus toxoids and Pertussis antigens, also aluminum and formaldehyde.
- According to the Adacel product insert, adverse events include headache, hypotension, anaphylaxis, paresthesia, fainting, convulsion and Guillain-Barre Syndrome.

On Meningococcal Vaccine (Menactra, Menveo, Menomune, Bexsero, Trumenba):

- Some ingredients in the various M vaccines contain: formaldehyde, detergent, ammonium sulfate, thimerisol in multi-dose vials (mercury – neurotoxic), aluminum, polysorbate 80.
- According to product insert of Menactra, adverse events include headache, fainting, vomiting, fever, seizure, convulsion, anaphylaxis, difficulty breathing, Guillain Barre Syndrome.

On pharmacists prescribing and administering the HPV vaccine to children ages 11 to 17:

The decision to vaccinate or NOT to vaccinate against HPV is a private medical matter requiring adequate informed consent, accurate education on HPV and the vaccine side effects, benefit & risk information, counseling and follow-up. This is the same for the other vaccines.

- The busy retail setting of many pharmacies will not provide the care and attention during and after vaccine administration compared to a medical office or clinic and without appropriate personnel and equipment to monitor any subsequent vaccine emergency. Busy chains, like CVS can fill several hundreds of prescriptions daily, with potential vaccine administration errors endangering the health of a child, simply for the sake of convenience. This is not quality health care to any of our keiki.
- In the package insert of the HPV-9 vaccine, the manufacturer acknowledges the most common and immediate side effects following the administration of an HPV vaccine: *“Because vaccines may develop syncope, sometimes resulting in falling with injury, observation for 15 minutes after administration is recommended. Syncope, sometimes associated with tonic-clonic movements and other seizure-like activity, has been reported following HPV vaccination. When syncope is associated with tonic-clonic movements, the activity is usually transient and typically responds to restoring cerebral perfusion by maintaining a supine or Trendelenberg position.”* This can cause chaos, liability issues and a potential for a child’s life-time of disability.
- The extent of ACPE Immunization training for pharmacists includes: a 20 hour in-home course, two practice injections, barely addresses emergency scenarios or the reporting of adverse reactions to VAERS which is the national database collection of adverse reactions. This should be alarming to pharmacists who have deep concerns regarding the safety and effectiveness of vaccines, especially the new HPV-9 vaccine.

Please **DO NOT pass SB 514** out of your committee and **protect our keiki** from these questionable vaccinations, especially in a busy pharmacy setting that is inadequate for the health and well-being of our young children. The increasing vaccine schedule is profitable for the vaccine manufacturers, pediatric associations and its members, pharmacies, etc., but not for our children. Concerns about vaccine safety and effectiveness has escalated over the years, especially since manufacturers and those administering vaccines were freed from all liability resulting from vaccine injury and death.

From: mailinglist@capitol.hawaii.gov
Sent: Sunday, March 26, 2017 10:05 PM
To: CPCtestimony
Cc: dawn@pitreart.com
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/26/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Dawn Poiani	Individual	Oppose	No

Comments: I Oppose bill SB 514 SD1 due to the fact that it contains the HPV vaccine as one of the vaccines that a pharmacist can administer. This bill is promoting a vaccine that is highly controversial for its safety. Why would the state of Hawaii want to continue to promote a vaccine that the risks may clearly outweigh the benefits. Most people with HPV never develop symptoms or have health problems. Most HPV infections (9 out of 10) go away by themselves within two years (CDC). This vaccine does not necessarily prevent cervical cancer and many serious side affects are possible. The best way to prevent cervical cancer is regular Pap smears. Additionally it may give a false sense of security. In the FDA reporting study, of the 15,705 individuals who were administered GARDASIL 9 and had safety follow-up, 354 reported a serious adverse event; representing 2.3% of the population and of the 7,378 individuals who were administered GARDASIL and had safety follow-up, 185 reported a serious adverse event; representing 2.5% of the population. Four GARDASIL 9 recipients each reported at least one serious adverse event that was determined to be vaccine-related. The vaccine-related serious adverse reactions were pyrexia, allergy to vaccine, asthmatic crisis, and headache. The American College of Pediatricians (The College) is committed to the health and well-being of children, including prevention of disease by vaccines. It has recently come to the attention of the College that one of the recommended vaccines could possibly be associated with the very rare but serious condition of premature ovarian failure (POF), also known as premature menopause. There have been two case report series (3 cases each) published since 2013 in which post-menarcheal adolescent girls developed laboratory documented POF within weeks to several years of receiving Gardasil, a four-strain human papillomavirus vaccine (HPV4).^{1,2} Adverse events that occur after vaccines are frequently not caused by the vaccine and there has not been a noticeable rise in POF cases in the last 9 years since HPV4 vaccine has been widely used. Drug Watch Gardasil Lawsuits in the U.S. Though hundreds of Americans have sued over Gardasil, only about half of these lawsuits are ever heard by a judge. However, some suits have been successful. In 2013, VICP reported that it had awarded \$5,877,710 to 49 plaintiffs, after finding that those Americans had been injured by Gardasil. Gardasil Lawsuits Abroad Gardasil lawsuits are not limited to the U.S. On July 27, 2016 in Japan, 63 plaintiffs filed a class action lawsuit against the Japanese

government and drug makers Merck and GlaxoSmithKline. The suit cited multiple physical problems, including headaches, extreme tiredness and trouble moving, after the plaintiffs had been given HPV vaccines. Attorneys are seeking compensation of over \$140,000 per plaintiff. The outcome of this lawsuit is pending. The Japanese government promoted HPV vaccines in 2009, but in 2013 redacted its recommendation following anecdotal reports of adverse effects. Postural Orthostatic Tachycardia Syndrome (POTS) The autoimmune disease POTS may be triggered by HPV vaccines. POTS — which is present in 170 in 100,000 persons — is marked by an abnormally large heart rate increase that occurs when a person assumes an upright position. One study showed that POTS manifested three to five times more frequently in HPV vaccine recipients than in recipients of another vaccine that is commonly given to American youth, Varivax (which protects from Varicella virus). Additionally, medical professionals have provided anecdotal evidence of this link after witnessing patients acquire POTS following HPV vaccination. Please oppose this bill for the safety of our Keiki
<http://www.acpeds.org/wordpress/wp-content/uploads/1.26.16-New-Concerns-about-the-HPV-vaccine.pdf> <https://www.drugwatch.com/hpv-vaccines>
<https://www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM426457.pdf>

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From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 27, 2017 10:48 PM
To: CPCtestimony
Cc: keri.oyadomari@gmail.com
Subject: *Submitted testimony for SB514 on Mar 28, 2017 14:00PM*

SB514

Submitted on: 3/27/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Derek Tengan	Individual	Support	No

Comments:

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Chair Takumi, Vice Chair Ichiyama, and House Committee members, thank you for this opportunity to provide testimony on SB514 SD1.

I am writing in **support of this bill** because it will allow our families more access to healthcare and disease prevention.

This bill would allow pharmacists to administer a full range of immunizations to adolescents aged 11-17. This bill authorizes pharmacists to administer the human papillomavirus, meningococcal, influenza, tetanus, diphtheria, and pertussis vaccines to persons ages eleven through seventeen years of age. Pharmacists are authorized by written instructions of a licensed physician or advanced practice registered nurse with prescriptive authority to coordinate and work together for the protection of their patients.

Pharmacists are required to complete a training program approved by the Accreditation Council of Pharmacy Education and submit that certification to the Board prior to administering any vaccine to adolescents aged 11-17.

I support these revisions to the bill, especially since the purpose of this bill is to improve the overall health of persons within Hawaii and to reduce the incidence of infectious disease through vaccination.

The pharmacists in Hawaii have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawaii.

Thank you for your consideration.

V/R,
Elliot Dixon

Mar 28, 2017
Conference Room 229

House Committee on Consumer Protection & Commerce

To: Representative Roy Takumi, Chair
Representative Linda Ichiyama, Vice Chair

From: Forrest Batz, PharmD
Kea'au, HI

Re: Testimony in Support of SB 514 SD1, Relating to Health

Aloha Chair Takumi, Vice Chair Ichiyama, and House Committee members,

I am writing in **strong support of SB514 SD1 to improve access to healthcare and disease prevention for Hawai'i families.**

This bill would allow pharmacists to administer a full range of immunizations to adolescents aged 11-17. This bill authorizes pharmacists to administer the human papillomavirus, meningococcal, influenza, tetanus, diphtheria, and pertussis vaccines to persons ages eleven through seventeen years of age. Pharmacists are authorized by written instructions of a licensed physician or advanced practice registered nurse with prescriptive authority to coordinate and work together for the protection of their patients.

Pharmacists are required to complete a training program approved by the Accreditation Council of Pharmacy Education and submit that certification to the Board prior to administering any vaccine to adolescents aged 11-17.

I support these revisions to the bill, especially since the purpose of this bill is to improve the overall health of persons within Hawai'i and to reduce the incidence of infectious disease through vaccination.

Pharmacists in Hawai'i have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawai'i.

Mahalo for the opportunity to provide this testimony and for your consideration.

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 27, 2017 10:47 PM
To: CPCtestimony
Cc: keri.oyadomari@gmail.com
Subject: *Submitted testimony for SB514 on Mar 28, 2017 14:00PM*

SB514

Submitted on: 3/27/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Keri Oyadomari	Individual	Support	No

Comments:

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From: mailinglist@capitol.hawaii.gov
Sent: Friday, March 24, 2017 6:13 PM
To: CPCtestimony
Cc: kglick@wheelchair-kauai.com
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/24/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Kevin Glick	Individual	Support	No

Comments: SB 514 seeks only to provide increased access to one of the few vaccines known to protect a person from contracting cancer. Pharmacists have shown themselves to be able to provide a variety of life saving vaccines across the USA for many years. This bill is not meant to supplant a physicians care but to provide increased access for patients who can not initiate or complete their scheduled injections for any one of a number of reasons. Please pass this bill out of committee.

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I oppose SB514

Aloha Chair Representative Takumi and Members of the House Consumer Protection and Commerce Committee,

SB 514 has been referred to your CPC Committee:

Authorizes pharmacists to administer the human papillomavirus, Tdap (tetanus, diphtheria, pertussis), meningococcal, or influenza vaccine to persons between eleven and seventeen years of age. Specifies requirements pharmacists must meet prior to administering these vaccines in a retail setting.

1. The chaotic nature of pharmacies do not allow retail pharmacists the luxury of properly monitoring patients for adverse reactions or assessing emergency situations, in between the filling prescriptions.

2. Gardasil-9, with 9 HPV types, has even greater risks of side effects than the discontinued Gardasil-4 and should not be administered in any retail pharmacy setting due to the increased potential adverse reactions, and liabilities for immunizing pharmacists.

3. After Gardasil was licensed and three doses recommended for 11-12 year old girls and young women, there were thousands of reports of sudden collapse with unconsciousness within 24 hours as well as seizures; muscle pain and weakness; disabling fatigue; Guillain Barre Syndrome (GBS); facial paralysis; brain inflammation; rheumatoid arthritis; lupus; blood clots; optic neuritis; multiple sclerosis; strokes; heart and other serious health problems, including death, following receipt of Gardasil vaccine.

4. Vaccines carry real risks for some people. See Virginia Capitol hearing clip below where they discuss the 3.6 billion dollars in injury claims paid out by our government (funded by us...the taxpayer) because vaccine manufacturers are free from all liability. This \$3.6 Billion is with an estimated only 1-10% of all vaccine injuries even reported.

https://m.youtube.com/watch?feature=youtu.be&v=6JQ8r_pdopk

4. ACPE Immunization training is a 20 hour in-home course that includes one live eight hour session. During this live class, only two practice injections, one subcutaneous and one intramuscular, are required to receive credit for the ACPE training in addition to passing an in-home online test. This is the extent of the immunization training by pharmacists.

They are not qualified to handle these type of side effects. They are not physicians and also do not have the time to do proper family history or other appropriate screening procedures to assess for possible vaccine adverse events. This is basically advocating for "fast food" type healthcare, and our keiki deserve better.

Sincerely,
Kim Haine

From: mailinglist@capitol.hawaii.gov
Sent: Friday, March 24, 2017 4:49 PM
To: CPCtestimony
Cc: lbuencon@gmail.com
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/24/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Lee Buenconsejo-Lum	Individual	Support	No

Comments: Chair Takumi, Vice Chair Ichiyama, and House Committee members, thank you for this opportunity to provide testimony on SB514 SD1. I am writing in support of this bill because it will allow our families more access to healthcare and disease prevention. This bill would allow pharmacists to administer a full range of immunizations to adolescents aged 11-17. This bill authorizes pharmacists to administer the human papillomavirus, meningococcal, influenza, tetanus, diphtheria, and pertussis vaccines to persons ages eleven through seventeen years of age. Pharmacists are authorized by written instructions of a licensed physician or advanced practice registered nurse with prescriptive authority to coordinate and work together for the protection of their patients. Pharmacists are required to complete a training program approved by the Accreditation Council of Pharmacy Education and submit that certification to the Board prior to administering any vaccine to adolescents aged 11-17. I support these revisions to the bill, especially since the purpose of this bill is to improve the overall health of persons within Hawaii and to reduce the incidence of infectious disease through vaccination. The pharmacists in Hawaii have the training and infrastructure to administer these shots. To vaccinate, they all face a rigorous curriculum and certification process. Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods. Pharmacies are in a position to increase adolescent vaccination uptake in Hawaii. Thank you for your consideration.

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From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 27, 2017 3:18 PM
To: CPCtestimony
Cc: loisjyoung@gmail.com
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/27/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Lois J Young	Individual	Oppose	Yes

Comments: First of all there is no safe vaccine. Why? Everyone's body type differs in reaction to the neuro toxins found in vaccine formulas. Vaccines should be an individual choice not a mandate or herd immunization process. Educational materials provided for the patient should be available and spelled out clearly, NOTING that the pharmaceutical company, the doctor, the pharmacist, health professional are not liable for any vaccine injuries incurred. Vaccine injuries result in a financial burden for the individual and their family. I STRONGLY OPPOSE sd 514 allowing pharmacists to administer vaccines, especially HPV/Gardasil. It is a known fact that HPV/GARDASIL has been banned or criminal law suits filed against the manufacturer, in Japan, France Denmark, India due to adverse reactions to the shot. These governments choose to protect their citizens until the pharmaceuticals get it right. There are 2 known side effects: complex regional pain syndrome (CRPS),¹ which causes sensory and motor dysfunction, including severe skin and bone pain; and postural orthostatic tachycardia syndrome (POTS)² which increases heart rate abnormally and causes dizziness, fainting, chest pain, headache and weakness. The third is death. Which leads me to this bill authorizing pharmacists to administer vaccines. Administering vaccines in a retail setting gives the appearance that they are as safe as buying drugs over the counter, when in reality vaccines are not safe. I believe they do not have the facility or extensive training to respond to CRPS or POTS. When an ambulance is called in such case, it won't be good for business when a patient is writhing on their retail floor in pain or dies. I believe a medical facility is the best place for shots to be administered. Let the pharmacist dispense medication and leave the shots to a well-trained clinic. Please vote NO on SB 514. thank you, Lois Young 808/753-3089

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From: mailinglist@capitol.hawaii.gov
Sent: Saturday, March 25, 2017 4:12 AM
To: CPCtestimony
Cc: morenom@hawaii.edu
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/25/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
MARIA MORENO-CHOW	Individual	Support	No

Comments: Chair Takumi, Vice Chair Ichiyama, and House Committee members, thank you for this opportunity to provide testimony on SB514 SD1. I am writing in support of this bill because it will allow our families more access to healthcare and disease prevention. This bill would allow pharmacists to administer a full range of immunizations to adolescents aged 11-17. This bill authorizes pharmacists to administer the human papillomavirus, meningococcal, influenza, tetanus, diphtheria, and pertussis vaccines to persons ages eleven through seventeen years of age. Pharmacists are authorized by written instructions of a licensed physician or advanced practice registered nurse with prescriptive authority to coordinate and work together for the protection of their patients. Pharmacists are required to complete a training program approved by the Accreditation Council of Pharmacy Education and submit that certification to the Board prior to administering any vaccine to adolescents aged 11-17. I support these revisions to the bill, especially since the purpose of this bill is to improve the overall health of persons within Hawaii and to reduce the incidence of infectious disease through vaccination. The pharmacists in Hawaii have the training and infrastructure to administer these shots. To vaccinate, they all face a rigorous curriculum and certification process. Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods. Pharmacies are in a position to increase adolescent vaccination uptake in Hawaii. Thank you for your consideration. Maria Moreno-Chow, APRN, MSN morenom@hawaii.edu

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From: mailinglist@capitol.hawaii.gov
Sent: Saturday, March 25, 2017 9:45 PM
To: CPCtestimony
Cc: foodsovereignty@gmail.com
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/25/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Mitsuko Hayakawa	Individual	Oppose	No

Comments: Aloha Chair Takumi and Members of the Consumer Protection and Commerce Committee, Please oppose SB514 and delay making decisions on vaccines as there is more and more evidence of its potential dangers to the health of our keiki. Instead of allowing medical professionals to more easily administer vaccines, we should be demanding a complete and thorough investigation on the CDC and questionable safety studies. Mahalo. Mitsuko Hayakawa

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From: mailinglist@capitol.hawaii.gov
Sent: Sunday, March 26, 2017 5:41 PM
To: CPCtestimony
Cc: rkorph@gmail.com
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/26/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Ronald Okamura, PharmD	Individual	Support	No

Comments: According to a survey conducted by the UNITY Consortium, teens aged 13 - 18 say they trust pharmacist more than any source of health information besides parents and physicians. This bill will authorize pharmacist to administer human papilloma virus, meningococcal, influenza, tetanus, diphtheria and pertussis vaccine to persons 11-17 years of age. With their School of Pharmacy education, training, and ACPE credentials, pharmacist are competent to administer vaccines to help improve vaccination coverage and prevent disease among adolescents and young adults. Pharmacists are increasingly recognized as members and providers of the immunization neighborhood.

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From: mailinglist@capitol.hawaii.gov
Sent: Friday, March 24, 2017 6:52 PM
To: CPCtestimony
Cc: rontthi@gmail.com
Subject: *Submitted testimony for SB514 on Mar 28, 2017 14:00PM*

SB514

Submitted on: 3/24/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Ronald Taniguchi, Pharm.D.	Individual	Support	No

Comments:

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To: The House Committee on Consumer Protection and Commerce

RE: SB514 SD1

Date: March 28, 2017 Conference Room 329 at 2pm.

I am a registered Pharmacist in Honolulu writing in OPPOSITION of SB514 SD1. I have no financial ties to any organization, pharmaceutical company, or conflict of interest and therefore, I speak only from a position of concern for the SAFETY of our children.

I continue to be amazed at why the dangers of vaccines especially the HPV continue to be ignored. As a health care provider I am a liaison between the patient and the doctor. I have grave concerns with SB514 SD1 especially when I would be the one to have to deal with the consequences if a child suddenly collapses in the pharmacy. The fact that I could hide behind the National Vaccine Injury Compensation Program and not be held liable for any vaccine related injury or death, does not quell my concerns or my duty to protect the children.

SAFETY, not convenience should be the ONLY consideration given before passing this bill. The only advantage retail pharmacies offer to a patient is convenience when administering any vaccination, including the HPV vaccine, outside of a physician's office or clinic setting. Thus, this committee should weigh the Risks against the Benefits. Do not pretend to claim there is a benefit of allowing pharmacists to provide these vaccines in a retail setting if the information and studies provided to you on HPV go unread. One thing this committee should know about the HPV vaccine is that clinical safety trials on this vaccine were conducted on 15 year-olds, NOT 11 year olds. Safety for 11 year olds have not been demonstrated. This bill is not considering the child's safety if it is going to allow HPV to be given in a public area rather than a controlled environment such as a physician's office where sufficient medical personnel is immediately available for a child who may need emergency care. There will be none in the pharmacy.

If convenience is the only benefit this bill offers, again this committee is not putting the child's welfare first. While the DTap, Meningococcal and Flu vaccines are all associated with adverse reactions, I will focus on the HPV vaccine since it carries the greatest risk of all.

SB 514 SD1 claims that by allowing pharmacists to administer the HPV vaccine in children between the ages of 11 and 17, the "incidence of infectious disease and cervical and other cancers will be reduced." This is a false statement since no clinical trials have been conducted demonstrating HPV's effectiveness against cervical cancer. The original trials for Gardasil were only 21 months long, far too short to demonstrate any effectiveness against anything, especially cervical cancer. As you know, cervical cancer usually develops in for a woman in her 50's not in her teens.

It is generally known that over 70 to 90 percent of all HPV infections can resolve without any intervention, therefore the legislature's promotion of this dangerous vaccine as a solution to cervical cancer and other cancers is not only inaccurate but irresponsible.

ACPE IMMUNIZATION TRAINING:

ACPE Immunization training is a 20 hour in-home course that includes one live eight hour session that glosses over the in-home materials. During this live class, only TWO practice injections, one

subcutaneous and one intramuscular, are required to receive credit for the ACPE training in addition to passing an in-home online test. This is the extent of the immunization training.

The training barely reviews the adverse reporting events to VAERS, the national database collecting adverse reactions, thus leaving the patient without any recourse. Every vaccine product just as every drug comes with a risk. However, the 1986 National Childhood Vaccine Injury Act gives all vaccine manufacturers immunity from any civil litigation from any vaccine injury. Patients cannot sue the manufacturer, or anyone else for a faulty vaccine product resulting in a vaccine injury. No other industry in the United States, except for the vaccine manufacturers, is indemnified by the US government against any vaccine injury claims related to vaccine products.

ACPE Immunization training barely addresses emergency scenarios or any proper procedures for any adverse event, only that Epi-pens should be available for patients experiencing anaphylaxis. Yet, despite minimal CPR and OSHA training requirements, pharmacists in retail settings are not equipped to address adverse reactions or emergency situations because their primary practice does NOT include emergency scenarios that are often seen in a medical or clinical setting. This can unnecessarily endanger the health of child, simply for the sake of convenience. This is not providing quality health care to anyone.

PHARMACY SETTING:

Pharmacies are very busy places filled with impatient customers and sick patients waiting for their prescriptions. Many chains require prescriptions be completed within an average of 15 to 20 minutes beginning from the time the prescription is dropped off to the time it is up by the patient. This 15 to 20 minutes also applies to the administration of any vaccine.

While the 15-20 minute wait time for completing the prescription process may be an ideal scenario for collecting pharmacy metrics, it does not reflect reality. The retail setting can be one of the most chaotic places to receive a vaccination. This should not only be concerning to patients but especially parents who want their child vaccinated against HPV. Patients will not receive the same type of care and attention during and after a vaccine administration in a retail pharmacy setting compared to a medical office or clinic since these places are specifically set up with the appropriate personnel and equipment to properly monitor patients during any medical procedure including vaccinations and any subsequent emergency.

All major chain pharmacies such as CVS, Walgreens, Walmart, and Costco are very busy with phone calls, customers, patients waiting for prescriptions, and countless distractions which can and have led to vaccination administration errors. Neither the state nor the Board of Pharmacy collect this information.

Pharmacists work on average of 8 to 10 hour shifts with little to no break other than lunch, which may consist of eating in the back of the pharmacy while still open for business.

Pharmacists work standing the entire shift which can be exhausting both mentally and physically, especially if there is no scheduled "over-lap" with a second pharmacist.

Busy chains such as CVS can fill several hundreds of prescriptions per day with a minimum of 1 to 2 pharmacists on duty.

Pharmacists are usually physically and mentally fatigued, stressed and pressured to a point where a patient receiving a vaccination during these times can result in administration errors including giving the

wrong vaccine, inappropriate spacing of vaccines, and duplicate vaccinations, sometimes due to situations beyond their control or knowledge.

The chaotic nature of pharmacies can put a child at risk since pharmacists do not have the luxury of properly monitoring patients for adverse reactions or assessing emergency situations, in between the filling prescriptions. This is a potential scenario for disaster. If an adverse event occurs to even one child, it will be one too many.

HPV-4 VACCINE Facts:

The HPV-4 vaccine was “fast-tracked” through the FDA in 2006 under an Accelerated Approval process, where the vaccine was approved after 21 months of clinical trials instead of the scheduled 4 years. The long-term side effects of this vaccine are unknown.¹ These trials were also too short to determine any protective effects against cervical cancer.

Antibodies due to the HPV vaccine show that antibody titers against HPV-18 show that after 5 years, antibody titers are immeasurable.² Thus an 11 or 12 year old child vaccinated against HPV will not have any measurable protection at 16 to 17 years of age or beyond.

The American College of Pediatricians state on their website that “the overwhelming majority (76%) of VAERS reports since 2006 with ovarian failure, premature menopause, and/or amenorrhea are associated solely with Gardasil®.”³

There are no clinical trials showing that the HPV vaccine can prevent cervical cancer or is more effective than Pap screening.⁴

Although aluminum adjuvants have been shown to be a cause of “autoimmune/inflammatory syndrome,” related to various irregular immune responses, aluminum, the adjuvant found in Gardasil, was used as a placebo in Gardasil vaccine trials.⁵ The findings showed that the Gardasil vaccine resulted in 245 serious adverse reactions compared to 218 adverse reactions from aluminum in girls 9 through 26, thus Gardasil was just as “safe” as its aluminum adjuvant.⁶

Gardasil-9 now has double the amount of the neurotoxic aluminum adjuvant, 500mcg, and is recommended for girls and boys from the ages of 9 through 26.⁷ Now, there is greater potential for autoimmune/inflammatory syndrome, cognitive decline and other neurological conditions in these young persons, girls and boys alike. This will dramatically increase the chances of an adverse event in the pharmacy setting.

HPV VACCINE SIDE EFFECTS:

Gardasil was not studied in children with health problems or in combination with all other vaccines routinely given to American adolescents, such as Tdap and meningococcal vaccines.⁸ Yet these vaccines are often given together according to the pediatric immunization schedule.

After Gardasil was licensed and three doses recommended for 11-12 year old girls and young women, there were thousands of reports of sudden collapse with unconsciousness within 24 hours seizures; muscle pain and weakness; disabling fatigue; Guillain-Barre Syndrome (GBS); facial paralysis; brain inflammation; rheumatoid arthritis; lupus; blood clots; optic neuritis; multiple sclerosis; strokes; heart

and other serious health problems, premature menopause, infertility including death, following receipt of Gardasil vaccine.⁹

As of September 1, 2015, there had been 295 claims filed in the federal Vaccine Injury Compensation Program (VICP) for injuries and deaths following HPV vaccination, including 13 deaths and 282 serious injuries.¹⁰

Using the MedAlerts search engine, as of Sept. 30, 2015, there were a total of [37,474](#) vaccine reaction reports made to the federal Vaccine Adverse Events Reporting System (VAERS) associated with Gardasil vaccinations, including [209](#) deaths.¹¹

Potential Pharmacy and Pharmacist Liabilities and Conflict of Interests:

Merck, the HPV-9 vaccine manufacturer, acknowledges in its package insert the most common and immediate side effects following the administration of an HPV vaccine are the following:

Because vaccinees may develop syncope, sometimes resulting in falling with injury, observation for 15 minutes after administration is recommended. Syncope, sometimes associated with tonic-clonic movements and other seizure-like activity, has been reported following HPV vaccination. When syncope is associated with tonic-clonic movements, the activity is usually transient and typically responds to restoring cerebral perfusion by maintaining a supine or Trendelenburg position.¹²

No pharmacist in a retail setting will be able to provide the necessary medical attention for a young child who develops syncope and accidentally hits his or her head on the counter, chair or some object while fainting. In addition to fainting, along with a potential concussion, tonic-clonic movements and other seizure like activities can arise as true emergency situations.

At the same time, while the parents are present, the chaos and liability issues can be magnified and intensified. The expectations of having a single pharmacist address this potential emergency scenario, while running the pharmacy, and all of the other activities that continue regardless of an emergency, is an unrealistic expectation where ultimately, the child pays the price, just for the extra convenience of vaccinating in a pharmacy.

Most, if not all pharmacy chains immunize because it is highly lucrative since reimbursements for vaccinations are many times higher than that for filling a regular prescription. While there are Pharmacists who will vaccinate any person who asks for a vaccine, there are also Pharmacists who have deep concerns regarding the safety and efficacy of vaccines, especially the new HPV-9 vaccine. Pharmacy chains do not encourage pharmacists to discuss any potential adverse reactions to vaccinations that are not part of the limited information presented on the CDC's Vaccine Information Statement.¹³ The VIS does not adequately present the additional side effects that girls have experienced including **potential sudden collapse with unconsciousness, seizures, muscle pain and weakness; disabling fatigue; Guillain-Barre Syndrome (GBS); facial paralysis; brain inflammation; rheumatoid arthritis; lupus; blood clots; optic neuritis; multiple sclerosis; strokes; heart and other serious health problems, premature menopause, infertility, AND death, following receipt of Gardasil vaccine.**¹⁴ Permanent and debilitating life-long disabilities are a real possibilities with

this vaccine. I sincerely hope this committee take the time to seriously review the literature on this vaccine before passing such a bill.

Even the American College of Pediatricians admitted in January 2016 that they have seen an “overwhelming majority (76%) of VAERS reports since 2006, showing girls with ovarian failure, premature menopause, and/or amenorrhea are associated solely with Gardasil®. “¹⁵

Every parent expects a Pharmacist to present the necessary information needed to make an informed decision and to weigh the benefits and risks, especially from a dangerous vaccine such as Gardasil-9. What grandparent would want to be robbed of having grandchildren if they knew in advance that the Gardasil vaccine could cause a daughter to be infertile and unable to bear children, resulting from a Gardasil vaccination?

Yet, there is a clear conflict of interest where the Pharmacist is caught between the Parent’s right to know and the employer’s profits. HB 676 cannot truly have the child’s best interests in mind.

While it would be ideal for pharmacists to provide the following counselling information, it is not on the Vaccine Information Statement. Even Merck, the vaccine manufacturer, openly recommends the following from its own Gardasil-9 package insert which in some cases are illogical when compared to the talking points used by the CDC:

PATIENT COUNSELING INFORMATION ¹⁶

Advise the patient to read the FDA-approved patient labeling (Patient Information).
Inform the patient, parent, or guardian:

- Vaccination does not eliminate the necessity for women to continue to undergo recommended cervical cancer screening. Women who receive GARDASIL 9 should continue to undergo cervical cancer screening per standard of care.
- Recipients of GARDASIL 9 should not discontinue anal cancer screening if it has been recommended by a health care provider.
- GARDASIL 9 has not been demonstrated to provide protection against disease from vaccine and non-vaccine HPV types to which a person has previously been exposed through sexual activity.
- Since syncope has been reported following HPV vaccination sometimes resulting in falling with injury, observation for 15 minutes after administration is recommended.
- Vaccine information is required to be given with each vaccination to the patient, parent, or guardian.
- Provide information regarding benefits and risks associated with vaccination.
- Safety and effectiveness of GARDASIL 9 have not been established in pregnant women. A pregnancy registry is available. Women exposed to GARDASIL 9 around the time of conception or during pregnancy are encouraged to register by calling 1-800-986-8999.
- It is important to complete the full vaccination series unless contraindicated.
- Report any adverse reactions to their health care provider.

SB514 SD 1 puts Pharmacists in the middle, forcing us to be responsible for any HPV related vaccine-injury experienced by a young child that could result in a life-time of disability. A retail setting is not the ideal place for any vaccination especially if the goal of vaccination is promoting the health and wellbeing of young children.

Forcing Pharmacists to vaccinate young children, for whom there is no medical or health related information, other than that provided by the parent, SB 514 SD1 is an unconscionable and irresponsible act by all legislators supporting this bill.

Even the manufacturer states that the HPV-9 vaccine is no better than preventing cervical cancer than annual Pap smears. How can supporters of SB 514 SD1 claim Pharmacists can reduce incidence of overall HPV related diseases when their own statement is so one-sided?

I DO NOT support SB514 SD1. I have a duty and a conscience to do what is right for all patients and SB514 SD1 is not right for any patient in any pharmacy.

SAFETY should be the impetus for passing this bill, not convenience!

Respectfully,

T. Ocampo, RPh, MBA

¹ Food and Drug Administration (FDA), "Fast track, Accelerated Approval and Priority Review." (2016) Available at: <http://www.fda.gov/ForPatients/Approvals/Fast/ucm405399.htm> (Accessed: 5 February 2017).

² D. M. Harper and K. B. Williams, "Prophylactic Hpv Vaccines: Current Knowledge of Impact on Gynecologic Premalignancies," *Discovery Medicine* 10, no. 50 (2010): 7-17

³ *New concerns about the human Papillomavirus vaccine* (2016) Available at: <https://www.acpeds.org/the-college-speaks/position-statements/health-issues/new-concerns-about-the-human-papillomavirus-vaccine> (Accessed: 5 February 2017).

⁴ L. Villa, R. L. Costa, C. A. Petta, R. P. Andrade, J. Paavonen, O. E. Iversen, S. E. Olsson, J. Hoyer, M. Steinwall, G. Riis-Johannessen, A. Andersson-Ellstrom, K. Elfgren, G. Krogh, M. Lehtinen, C. Malm, G. M. Tamms, K. Giacoletti, L. Lupinacci, R. Railkar, F. J. Taddeo, J. Bryan, M. T. Esser, H. L. Sings, A. J. Saah, and E. Barr, "High Sustained Efficacy of a Prophylactic Quadrivalent Human Papillomavirus Types 6/11/16/18 11 Virus-Like Particle Vaccine through 5 Years of Follow-Up," *British Journal of Cancer* 95, no. 11 (2006): 1459-1466.

⁵ Tomljenovic, L. and Shaw, C., "Not too fast or Not Too Slow: The FDA's Approval of Merck's HPV Vaccine Gardasil" 40 *J.L. Med & Ethics* 677.

⁶ Merck & Co., Gardasil Product Sheet, Date of Approval 2006, <http://www.fda.gov/ohrms/dockets/ac/06/briefing/2006-4222B3.pdf>

⁷ *Human Papillomavirus (HPV) information - diseases and vaccines* (2012) Available at: <http://www.nvic.org/Vaccines-and-Diseases/HPV.aspx> (Accessed: 5 February 2017).

⁸ Ibid.

⁹ Ibid.

¹⁰ Ibid.

¹¹ Ibid.

¹² CBER/FDA (2016) *HIGHLIGHTS OF PRESCRIBING INFORMATION* for Gardasil 9, Human Papillomavirus 9-Valent Vaccine, Available at: <http://www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM426457.pdf> (Accessed: 5 February 2017).

¹³ <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/hpv.pdf>

¹⁴ Ibid.

¹⁵ *New concerns about the human Papillomavirus vaccine* (2016) Available at: <https://www.acped.org/the-college-speaks/position-statements/health-issues/new-concerns-about-the-human-papillomavirus-vaccine> (Accessed: 5 February 2017).

¹⁶ Ibid.

CPCtestimony

From: thaddeus pham <tediousmonkey@gmail.com>
Sent: Friday, March 24, 2017 4:00 PM
To: Rep. Roy Takumi; Rep. Linda Ichiyama; CPCtestimony
Subject: Support for SB 514 SD1

Chair Takumi, Vice Chair Ichiyama, and House Committee members, thank you for this opportunity to provide testimony on SB514 SD1.

I am writing in **support of this bill** because it will allow our families more access to healthcare and disease prevention.

This bill would allow pharmacists to administer a full range of immunizations to adolescents aged 11-17. This bill authorizes pharmacists to administer the human papillomavirus, meningococcal, influenza, tetanus, diphtheria, and pertussis vaccines to persons ages eleven through seventeen years of age. Pharmacists are authorized by written instructions of a licensed physician or advanced practice registered nurse with prescriptive authority to coordinate and work together for the protection of their patients.

Pharmacists are required to complete a training program approved by the Accreditation Council of Pharmacy Education and submit that certification to the Board prior to administering any vaccine to adolescents aged 11-17.

As a public health professional and concerned citizen, I support these revisions to the bill, especially since the purpose of this bill is to improve the overall health of persons within Hawaii and to reduce the incidence of infectious disease through vaccination.

The pharmacists in Hawaii have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawaii.

Thank you for your consideration.

Thaddeus Pham
1013 Prospect Street, #518
Honolulu, HI 96822

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 27, 2017 10:50 AM
To: CPCtestimony
Cc: geesey@hawaii.edu
Subject: Submitted testimony for SB514 on Mar 28, 2017 14:00PM

SB514

Submitted on: 3/27/2017

Testimony for CPC on Mar 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Yvonne Geesey	Individual	Support	No

Comments: please support, mahalo!

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

**TESTIMONY IN SUPPORT OF SB514 SD1
RELATING TO HEALTH**

I am writing in support of SB514 SD1, which allows pharmacists to administer ACIP recommended vaccines, including the human papillomavirus (HPV) vaccine, to persons between eleven and seventeen years of age. Each year, approximately 30,700 men and women are diagnosed with cancers caused by HPV.

The HPV vaccine protects against infection and the cancers caused by HPV, which includes most cervical, vaginal, vulvar, penile, anal, rectal, and oropharyngeal cancers. Despite the vaccine's ability to prevent these cancers, vaccination rates remain very low. Only 42 percent of girls and 28 percent of boys in the US are fully vaccinated from HPV.

As an individual that wants to reduce the incidence of cancer in our state, I urge you to support of SB514 SD1, which allows pharmacists to administer ACIP recommended vaccines, including the human papillomavirus (HPV) vaccine, to persons between eleven and seventeen years of age.

Keima Lyn Macaracog
Print Name

Honolulu, Hawaii 96818
City Zip Code

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Sylvia Lee

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Kathleen Bareisziis

Print Name

Waiānae, Hawaii 96792

City

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Janna Aquinaldo

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Honolulu, Hawaii 96819

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Sydney Chun

Print Name

Pearl City Hawaii 96782

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Chelsea Corpuz

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Kahului

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Courtney Mae Corpuz
Print Name

Kapuni, Hawaii 96732
City Zip Code

**TESTIMONY IN SUPPORT OF SB514 SD1
RELATING TO HEALTH**

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Stacie Saito
Print Name

Kahului, Hawaii 96732
City Zip Code

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RELATING TO HEALTH**

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Mani Kanna
Print Name

Kalaeo, Hawaii 96741
City Zip Code

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RELATING TO HEALTH**

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Shamae Medrano
Print Name

Kahului, Hawaii 96732
City Zip Code

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Amanda Lee
Print Name

Honolulu, Hawaii 96819
City Zip Code

**TESTIMONY IN SUPPORT OF SB514 SD1
RELATING TO HEALTH**

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Kaylee Mauda
Print Name

Waipahu, Hawaii 96797
City Zip Code

**TESTIMONY IN SUPPORT OF SB514 SD1
RELATING TO HEALTH**

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Angela Lee

Print Name

Honolulu

City

, Hawaii

96818

Zip Code

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RELATING TO HEALTH**

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Manjie Ann Retnado

Print Name

Keaanu

City

, Hawaii

96749

Zip Code

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RELATING TO HEALTH**

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Venus Godbout
Print Name

Wahiawa, Hawaii 96786
City Zip Code

**TESTIMONY IN SUPPORT OF SB514 SD1
RELATING TO HEALTH**

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Amerfil Grace ACOW

Print Name

Kaunakani, Hawaii

City

96747

Zip Code

**TESTIMONY IN SUPPORT OF SB514 SD1
RELATING TO HEALTH**

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Kayla Positai
Print Name

Waipahu, Hawaii 96797
City Zip Code

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Shaylee Todani
Print Name

Wahiawa, Hawaii 96786
City Zip Code

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Bryan Misher

Print Name

Keolu, Hawaii 96744

City

Zip Code

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RELATING TO HEALTH**

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Leslie Arce
Print Name

Hilo, Hawaii 96720
City Zip Code

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RELATING TO HEALTH**

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Daryl Mae Tangonan
Print Name

Ewa Beach, Hawaii 96706
City Zip Code

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Jarold Cabel
Print Name

Keolu, Hawaii 96749
City Zip Code

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Shawna Eaylora
Print Name

M. W. W., Hawaii 96771
City Zip Code

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Katalani Kadi Kala

Print Name

Hilo

City

, Hawaii

96720

Zip Code

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Chrisovolanda Gronowski
Print Name

Pahoa, Hawaii 96778
City Zip Code

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Kateleen Caye Bro

Print Name

Kahuku

City

, Hawaii

96732

Zip Code

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City Zip Code

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Chelsey Stewart
Print Name

Honolulu, Hawaii 96817
City Zip Code

cstewart24@gmail.com
Email Address

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Asnley Gandiza
Print Name

Kapolei, Hawaii 96707
City Zip Code

agandiza@yahoo.com
Email Address

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Dawn Aoyagi

Print Name

Honolulu, Hawaii

City

96821

Zip Code

daoyagi10@gmail.com

Email Address

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April Vidael
Print Name

Kailua, Hawaii 96734
City Zip Code

aprilvidael@gmail.com
Email Address

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Kamalani Raqueting - Correa
Print Name

Honolulu, Hawaii 96815
City Zip Code

KVbag@hawaii.edu
Email Address

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Sean T. Segundo
Print Name

Honolulu, Hawaii 96822
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seanseg@hawaii.edu
Email Address

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Erin King
Print Name

Honolulu, Hawaii 96826
City Zip Code

erin.king@hawaii.edu
Email Address

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Kaylee Rafol
Print Name

Honolulu, Hawaii 96822
City Zip Code

Kaylee2@hawaii.edu (all lowercase)
Email Address

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Arree Ito-Fujita
Print Name

Honolulu, Hawaii 96822
City Zip Code

arree@hawaii.edu
Email Address

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Elither Peter
Print Name

Honolulu, Hawaii 96826
City Zip Code

elitherp@hawaii.edu
Email Address

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Ryan Ell
Print Name

Kaneohe, Hawaii 96744
City Zip Code

Ryan.ell42@gmail.com
Email Address

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RELATING TO HEALTH**

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The HPV vaccine protects against infection and the cancers caused by HPV, which includes most cervical, vaginal, vulvar, penile, anal, rectal, and oropharyngeal cancers. Despite the vaccine's ability to prevent these cancers, vaccination rates remain very low. Only 42 percent of girls and 28 percent of boys in the US are fully vaccinated from HPV.

As an individual that wants to reduce the incidence of cancer in our state, I urge you to support of SB514 SD1, which allows pharmacists to administer ACIP recommended vaccines, including the human papillomavirus (HPV) vaccine, to persons between eleven and seventeen years of age.

Austin Choy
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Jeff Chung

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