



## Advocates for Physicians' Rights

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### **Advocates for Physicians' Rights opposes Amendments to Senate Bill 276**

*California should keep the government out of the doctor-patient relationship, not data-base medical records while monitoring and tracking medical professionals, and not ask doctors to work for free.*

Advocates for Physicians' Rights (AFPR) strongly opposes the new amendments to Senate Bill 276, which will be heard in Assembly Health this Thursday. The bill still violates the sacred doctor-patient relationship, and is a clear government infringement on physicians' scope of medical practice.

The new amendments state that doctors will be identified and monitored, doctors cannot charge for medical exemptions or related examinations of the patient, and a simple accusation of improper conduct – even before a hearing or any proof has been submitted – will render doctor's clinical judgments in the area invalid.

Attorney Leigh Dundas believes the amendments go too far, and that no licensed physician will remain willing to author a valid exemption under the new statutory framework.

"Any American, let alone a licensed professional, who is told they will have to work for free, told they will be monitored and tracked for doing their work – and further told a simple accusation will make them guilty until proven innocent – would quit their job," Dundas said. "SB 276 bill targets the very professionals who save our children's lives."

Physicians also agree that the government should stay out of the doctor-patient relationship.

"My greatest concern is this bill not only violates the medical freedom of an individual, but also violates the physician's right to treat their patients," Nicole Shorrock, MD, said. "What then do I do?" she said. "Violate my Hippocratic oath and give the vaccine against my medical opinion? Who is then responsible for this medical decision?"

The Medical Board of California (MBC) discussed concerns over the bill during their May board meeting after hundreds of callers dialed in to share their specific reasons for opposition.

“I do have concerns with having the state officer to do exemptions,” MBC member Dr. Felix Yip said on the May 29 call.

MBC members also brought up the narrow scope of Centers for Disease Control (CDC) guidelines and suggested amendments to the bill, “...the public brought up different viewpoints about vaccine injuries, previous history, family history, and perhaps genetic predisposition supported by genetic testing,” Laurie Rose Lubiano, J.D. said.

The Amendments now include ACIP and AAP guidelines, which link back to the CDC guidelines. CDC, AAP and ACIP contraindications are overly narrow, and only list severe anaphylaxis (throat swelling), encephalopathy (coma), a rare immunodeficiency disorder, and intussusception (twisted bowel – for rotavirus only) as “approved” reactions for a medical exemption. Other severe reactions like cardiac arrest, paralysis, and seizures -- though acknowledged by the FDA and vaccine makers as known risks of immunizations -- will no longer qualify for a medical exemption under the Amendments of the bill.

“I have several families whose children are at high risk of vaccine injury due to these factors who would no longer be considered for vaccine exemption,” Dr. Shorrock said. “Vaccines are like all medications and have inherent risks. Sometimes severe consequences can occur as evidenced by over 4 billion dollars already awarded to families who have sustained vaccine injuries.”

Per the CDC, guidelines are meant to be just that, guidelines, and not intended to be used in isolation—the physician is assumed to be the ultimate authority to make clinical decisions using clinical expertise and knowledge of the patient.

“Practicing medicine is complex. Patients are complex,” Dr. Shorrock said. “Physicians are called to carefully consider many aspects when treating a patient and administering vaccines is not an exception.”

Another AFPR board physician concurred, “Vaccines can help, but also harm if someone has allergies to the components of the vaccine. It is therefore germane for a medical doctor to make this educated decision to help advise on all aspects of a given treatment,” Roberto Tostado, MD, said.

MBC member Dr. Michelle Bholat said she would like to see more information on epigenetics, and there are definite areas within communities of color that are concerned about these issues.

“I believe in vaccines, I understand the issues of herd immunity,” Dr. Bholat said. “But the issues that were raised here are concerning enough for a deeper dive.”

Senator Pan asserts that SB 276 will discipline the doctors who have allegedly written “fraudulent” exemptions, although no specific proof of fraudulent medical exemptions has been presented. To date, 153 medical exemptions were investigated by the MBC and no fraud was found.

If fraudulent medical exemptions are a legitimate issue, AFPR would submit that they can be dealt with in the same way that the Medical Board deals with other medical practice violations.

“I trust our state’s medical board to dutifully investigate these claims,” Dr. Shorrock said.

According to the Department of Public Health information, 94.8 percent of kindergarten children are up to date on vaccinations, and 96.6 percent of children in California have had the MMR vaccine to protect against measles.

Many doctors agree that measles, especially when there were only 11 pediatric cases out of 51 cases among 39 million Californians this year, and no measles-related deaths in over a decade, is not the most current pressing public health matter.

“The opioid crisis deserves more attention than a ‘small handful’ of alleged fraudulent medical exemptions, especially since over 99 percent of children in California do not even have a medical exemption,” Dr. Lori Prescott, D.C. said.

SB 276 would hijack the practice of medical from licensed physicians and cause the public to distrust medical professionals.

“We need to protect the sanctity of the physician-patient relationship and leave medical decisions to the patients’ own medical doctors,” Camille Cowne, MD, emergency medicine physician, said.

AFPR is a California-based nonprofit organization set up exclusively for the promotion of social welfare and protection of physicians’ rights.