

**Senate Committee on Commerce**  
**February 25, 2021**

Chair Olson, Vice Chair Steffen, and Members of the Committee, this written testimony **is submitted in support of Senate Bill 213; however, I only support this bill as it relates to COVID-19 vaccines at this time.**

I support Senate Bill 213 because allowing employers to force employees to take the COVID-19 vaccine will only increase the fear and hesitancy which already exists, especially among healthcare workers.

I truly support vaccinations as I make sure that my family is vaccinated annually against influenza. Also, as a nurse, I encourage others, especially healthcare workers to be vaccinated. However, the COVID-19 vaccine is different, considering it is a mRNA vaccine, and there is still so much unknown about the vaccine itself. Some of the questions that healthcare workers have and lawmakers should consider are:

1. What are the long-term effects of this vaccine, say a year, or 5 years, or 10 years down the road?
2. The “experts” don’t know how long the vaccine protects you. Are boosters required in a year?
3. How well do the current vaccines protect you against other variants of the virus?
4. Are “they” truly reporting the severe reactions which are occurring?
5. If employers mandate the COVID-19 vaccine, we will have problems getting new hires onboarded quickly. You cannot give other vaccines within 14 days of the COVID-19 vaccinations; therefore, the CDC mandated healthcare worker vaccinations that we HAVE to give for pre-employment will be on hold (e.g., MMR, Tdap, Varicella.) If an applicant reports that they have received the COVID-19 vaccination recently, we will not be able to administer pre-employment vaccinations for 14 days, thus prolonging hiring the employee in a time when they are needed immediately.
6. There is also the issue of not being able to administer a TB test or IGRA until  $\geq 4$  weeks after the completion of the COVID-19 vaccine (BOTH DOSES). We administer TB tests to new hires and cannot start their employment until a negative result is obtained. Of course, we could do a chest x-ray; however, that is more expensive and exposing the employee to unnecessary radiation.
7. Why mandate the COVID-19 vaccine at this point when everyone still has to wear a mask and social distance?
8. The COVID-19 vaccine is still considered an investigational drug and is not FDA approved which makes healthcare workers leery of taking the vaccination.
9. Employers should give employees the option of getting the vaccination or wearing a mask everyday while working, the same as we’ve been doing for years during flu season.

SB 213 allows employees to have a right to refuse what is injected in their body. What happens when an employee has a severe reaction to a vaccination that they did not even want? Will employers be willing to pay for days off, worker’s compensation, medical bills, funeral expenses?

I look forward to maintaining our ability as healthcare workers to make logical decisions when providing care. The reason healthcare workers wear personal protective equipment (PPE) is to protect ourselves whether or not we are vaccinated. Mandating vaccinations does not replace the need to wear PPE.

Thank you for the opportunity to present my concern.

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