

Testimony in Support of LD 51 –
"An Act to Restore Religious and Philosophical Exemptions to Immunization Requirements," intended to reinstate religious and philosophical exemptions, essentially a repeal of LD 798.

I am a Nationally Board-Certified Primary Care Provider, Doctoral Prepared Nurse Practitioner with a Masters in Family and Community Health and with 30 combined years of experience in Family, Pediatric, and Veteran Primary Care.

Today's hearing provides a venue for rational and respectful exchange of information in the hopes that the members of our legislature will hear us when we share what we know and will understand why the acceptance of religious and philosophical exemptions is critical to the medical freedom of the citizens of Maine.

Philosophical reasoning allows for independent thought and decision making based on the available information, and an admittance that all the information is not always available to everyone. It requires open and safe venues for discussion, logical and critical thinking, and an open-minded ability to institute change without bias or impulsiveness. In essence, it allows for personal choice regarding our individual healthcare decisions and is a right in our Democratic society.

The Administrative and Mitigation mandates in response to the Initial Alpha Strain Coronavirus Pandemic of 2019 and the State's refusal to allow religious or philosophical exemptions were necessarily reactive during the Initial and Acute phase of the outbreak as we knew very little about the virus, the treatment, and we lacked scientific data regarding both the effectiveness and the potential for Adverse Reactions to the Emergency Use Authorization vaccines. We are no longer in an Emergency Response, and we have learned a great deal. A refusal to accept any exemption to the vaccine is no longer appropriate. We have seen that the outdated policy of LD 798 has had a negative impact and has resulted in barriers to providing excellent healthcare to the people in Maine.

Because of the denial of any exemption to vaccination, Critical Mission Staff were forced out of medical care facilities leading to shortages that not only made providing care virtually impossible but also overwhelmed those who remained behind to assume the additional workload leading to burnout and, in turn, even more staffing shortages. Frequently beds in the hospital cannot be used to admit patients in need of care because of a lack of nursing and other staff to provide that care. Reports of hospitals 'at capacity' and patients being diverted away from hospitals occurs when a bed may be available, but the staff is not.

Medical providers are trained to empirically review scientific data, to monitor the results of treatments we provide, and to weigh the risks and benefits of those treatments when making clinical decisions. Treatment decisions change as we learn new information, most often reliant on the expertise of the medical provider and before the slow process of reporting that information and formal recommendations can be updated. Our patients rely on us to use our

extensive knowledge and training to make these decisions in their best interest and we are here now to respectfully ask that you, also, listen to our testimony and rely on our expertise.

We have witnessed what could be interpreted as Severe Adverse Reactions to the vaccines in some people, but we are very cautious in reporting any direct implication as we continue to observe and to gather data. *This is how science works.* Underreporting means that the potential for injury from vaccination could be even greater than we currently know. In practice clinicians discuss in small, *safe* groups what they worry *could be* increases in complications such as blood clots, including strokes and sudden cardiac death, neurological side effects such as paralysis and seizures, and cardiac changes related to endocarditis and myocarditis.

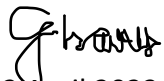
Those who practice medically are trained to *First Do No Harm* and so we provide our patients with the information *we do have* and share with them that there is still information *we do not have*, so that they can make their own informed decisions in this and in all medical treatments. It is the duty of all in entrusted with power to do the same. Supporting LD 51 allows Maine citizens to listen, to learn, to observe, and to exercise their own religious and philosophical beliefs and to exercise their right to medical freedom.

We are, thankfully, no longer in the same situation of 2019, we are no longer in a situation where the pandemic of a deadly viral strain poses a threat greater to the common good of the general population that it warrants refusal to the rights of the individual.

For all the reasons mentioned here today, I respectfully request that the Maine Legislature support Legislative Document 51 and return the decision-making ability to the individual and to their healthcare providers who are trained to treat them in their own individual best medical interest.

Thank you for allowing me the opportunity to speak to this very important issue.

With the greatest of respect,

A handwritten signature in black ink, appearing to read "Gayle Travers".

2 April 2023

Gayle Travers, DNP

Arundel, ME 04046