

Steve Sisolak  
Governor

Richard Whitley, MS  
Director



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
*Helping people. It's who we are and what we do.*



Lisa Sherych  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical Officer

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**DRAFT Minutes**  
**STATE BOARD OF HEALTH**  
**August 10<sup>th</sup>, 2021**  
**3:30 p.m.**

**MEETING LOCATIONS:**

This meeting was held online, or by phone. The online and phone meeting location is:

**Meeting Link:**

**Join Zoom Meeting**

<https://zoom.us/j/93917910271?pwd=WEZxbDVQbTcrNkZ4Qlk2cnp1MSt4Zz09>

Meeting ID: 939 1791 0271

Meeting passcode: 419168

**Join By Phone:**

**Phone: 1-669-900-9128**

**Meeting ID: 939 1791 0271**

**(Passcode: 419168)**

**1.- Call to order/roll call – Dr. Jon Pennell, Chair**

**BOARD MEMBERS PRESENT:**

Dr. Jon Pennell, DVM (Online)

Dr. Jeffrey Murawsky, M.D. (Online)

Dr. Monica Ponce, DDS (Online)

Charles (Tom) Smith (Online)

Judith Bittner (Online)

Dr. Trudy Larson (Online)

**BOARD MEMBERS ABSENT EXCUSED:**

All Board Members Present

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**DIVISION OF PUBLIC & BEHAVIORAL HEALTH (DPBH) STAFF PRESENT:**

Joseph Filippi, Executive Assistant, DPBH; Lisa Sherych, Administrator DPBH; Julia Peek, Deputy Administrator, DPBH; Debi Reynolds, Deputy Administrator, DPBH; Joanne Malay, Deputy Administrator, DPBH; Cody Phinney, Deputy Administrator, DPBH; Dr. Ihsan Azzam, Chief Medical Officer; Dr. Leon Ravin, Statewide Psychiatric Medical Doctor, Melissa Peek-Bullock, Statewide Epidemiologist, DPBH; Pierron Tackes, Attorney General's Office DAG; Julie Slabaugh, Attorney General's Office, DAG Brent Geerhart, IT Technician, DPBH; Rex Gifford, Administrative Assistant III; Isabel Eckert, Administrative Assistant II, DPBH; Kareen Filippi, Executive Assistant, DHHS; Karissa Loper, Health Bureau Chief, DPBH; Candice McDaniel, Programs Department Director, DHHS; Shannon Litz, Public Information Officer, DHHS; Priscilla Acosta, Health Program Specialist, DHHS;

**OTHERS PRESENT:**

Dayton Smith; Paul Buck, Nevada State Collage; Sarah Kimball Stephenson; David Orentlicher; Linda King; John Brookman, UNLV Student; Kent Ervin; J. Atlas; Paige Barnes; Lisa Goldberg; Angela; Derik Gall; Raven Sumner; Anne O'Connor; Amber J Anaya; Dr. Anne Leonard; Megan Gerke, UNLV; Mark; Ian Hartshorn; Benjamin Davis; Jennifer Guerra; Patty Charlton; Ron Belbin; Chris Collins; Alexx Martinez; Lea Case; Pete Vazquez; Victoria Densford; James Martines; Jennifer Karuhn; Allison Genco; Eric Gilliland; Nicole Thomas; Kanani Espinoza; John Peckham; Darian Richards; Kevin Benson; Bob Dobbs; Kristene Fisher; Summer Mudd; Monique Rodriguez; Meghin Delaney; Priscila Venzor;; Ann McDonnough; Yevonne F. Allen; Nathan Bugash; Zoe Houghton; Siobhan McAndrew; Stephanie Miller; Sam Metz; Sabra Newby; NRHP; Nathaniel Waugh; Megan Romero; Mark Flemi; Maggie O'Flaherty; Laura Densford; Karl Foreman; Joshua Bowen; Joanna Jacob, Clark County; Jeniffer Solis; Glenn Heath, SCS; Gabriela Davis; DuAne L. Young; Andrew Hanson

Joseph Filippi opened the meeting at 3:30 p.m.

Roll call was taken, and it was determined that a quorum of the State Board of Health was present.

Chair Pennell welcomed everyone to the meeting and introduced Dr. Trudy Larson as the newest member of the Board of Health and asked Dr. Larson if she would like to make any comments.

Dr. Larson stated that she was excited to be a part of the Board of Health and that she has a long background in infectious disease and public health. She stated that it is her pleasure to serve the state in this capacity.

**2. PUBLIC COMMENT**

Chair Pennell opened the meeting in accordance with the public open meeting laws and regulations. Chair Pennell asked if there was any public comment on agenda item number 3, and he assured the public that they would be able to express their comments and concerns during the second public comment period.

Mr. Filippi reminded everyone that the comment time is limited to 2 minutes, and for this comment period comments are limited to the agenda item. Mr. Filippi then read agenda item 3 and gave instructions to be called during the public comment period.

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Johnathan Keath Bookman stated that he was in opposition to the experimental shot. Mr. Bookman stated that he was an Army veteran and a student at the University of Nevada Las Vegas (UNLV). Mr. Bookman said that what you are potentially choosing today is on the side of tyranny and oppression, while turning away from liberty. The oppressor's name has changed many times over the past years, communism, monarchism, and Jim Crow to name a few, but its purpose has been the same since the beginning of time, division. The oppressors need us divided by gender, appearance, beliefs, or natural origin. This oppression cannot fight against we the people because it does not have the logic nor reasoning to combat a unified people.

The choice today represents another cow-tow to the fear permeating our society. The fear accepting the flaws and shortcomings of our brothers and sisters in the name of greater good, but greater good has been compromised again and again. Systematically taking away our God-given liberty.

My voice today is just another small seed growing in the minds of those who won't support or surrender to fear. Those courageous voices are uniting like they did 245 years, 1 month, and 6 days ago. To say the same words that altered world history. We hold these truths to be self-evident that all men and women are created equal, and they are endowed by their creator with certain unalienable rights, that among those are life, liberty, and pursuit of happiness. That to secure those rights governments are instituted among men and women deriving their powers from consent of the governed. That whenever any form of government becomes destructive of these ends it is the right of the people to alter or abolish it.

Mr. Bookman continued by saying that the decision you have today, though may seem miniscule, may be enough to alter the course of a runaway freight train all it takes is a switch. The tracks are laid in either direction towards tyranny and oppression but alternatively towards the glorious pursuit of liberty and unity. Do not impose this mandate. Deliberate, then choose the direction of liberty that has been perfecting 245 years. Liberty that our founders have asserted against British oppressors. The liberty that Abraham Lincoln envisioned when he stood stalwart against the oppression of slavery and the same dream that Martin Luther King gave his life for. A United States that stands unified against all enemies both foreign and domestic. Thank you for the time to talk today.

Mr. Filippi thanked Mr. Bookman for his comments and called on Dr. Anne Leonard.

Dr. Leonard introduced herself as a Doctor of Biology at the University of Nevada Reno (UNR) she said. I am a researcher, and obviously an educator. I am here to comment on my dismay as a scientist. It doesn't seem like quick action is taken in relation to a public health crisis. It seems like this is a chance for us to rise to meet the moment. The greatest challenge, perhaps in health, in a generation.

I don't see this as a divide between liberty or tyranny that the last speaker just mentioned. In fact when I think about lack of a vaccine mandate which the Board of Health should be talking about today all I can think about is all the liberties that are taken away from me as an educator, as a member of this community over the past difficult couple of years. For example, I am scaling back the hands-on experiences that our undergraduates in biology would benefit from the most. Because I cannot guarantee the safety of my staff. I am asking you to consider, with urgency, which as a scientist and an educator is required to install a vaccine mandate as soon as

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possible. You guys are public health scientists, you are educated, you know that time is of the essence in a pandemic. It takes many weeks for effective immunity, you build it up, especially with the Delta variant.

It is not just me and my students that will suffer without a mandate but our community members, the weakest among us, the most vulnerable, and our hospital system. I ask you to please consider this with urgency and to rise to meet the moment here. Thank you very much.

Chair Pennell reminded everyone that this public comment period is for comments regarding agenda item 3. Public comment will be open for everything except agenda item 3 after the Board has taken care of Board business. Mr. Filippi checked to see if any members of the public had any more comments, and the public did not have any further comments.

**3. – Item for Possible Action – Consideration and Possible Adoption of Proposed Emergency Statement and Emergency Regulation Amendment of Nevada Administrative Code (NAC) 439.895, relating to access to Immunization Information System Data – Julia Peek, Deputy Administrator, Nevada Division of Public and Behavioral Health (DPBH).**

Chair Pennell called on Ms. Peek to present agenda item 3.

Ms. Peek stated the following: First, I want to thank the Chair and all the members of the Board of Health for allowing us to present this emergency regulation at such short notice.

As you know, on Friday, July 30, 2021, Governor Sisolak issued a policy that becomes effective on August 15. This policy requires that employees who are not fully vaccinated must be tested weekly for COVID-19 and proof of testing must be submitted to their human resources officer / department.

To ensure that the administrative burden of implementing the policy is lessened for both the vaccinated employee and our human resources, the Department of Health and Human Services has requested an emergency regulation to allow for the sharing of vaccination status from WebIZ with Executive Branch agencies within the State of Nevada. This automation of the process will reduce the number of employees who need to show physical documentation of vaccination and for our human resources team to track that information individually. For context, just State of Nevada employees and this does not counting the Nevada System of Higher Education (NSHE), there were over 18,000 employees. Of those employees 51% were fully vaccinated at the end of July. It is higher now, but as you can imagine that is quite a bit of administrative tracking to get vaccination status on all of those employees.

As you know the emergency regulation will temporarily allow the DHHS Office of Analytics to share if an employee is considered fully vaccinated or not. An emergency regulation may be effective for a period of no longer than 120 days. A regulation may be adopted by this emergency procedure only once.

To look at the specific drafting of the regulation I will draw your attention to section 9 which is in blue italics what it speaks to is that the immunization record from our system, WebIZ, which is the central registration, for limited purpose of insuring occupational safety of State of Nevada employees and subject to the confidentiality provisions of sub-section 4. The director of the department or equivalent executive head, the human resources point of contact and their designee of each of these executive branches will be able to get that vaccination status, again fully vaccinated or not, for the employees in which they serve.

One note on limited capacity. The State of Nevada employees that are just board members, they are not a true State of Nevada employee, so they are excluded. I am happy to answer any questions you may have, but what

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you have before you today is really a regulation that would allow the administrative burden on our new policy to be as little as possible. Ms. Peek thanked the Board for their time.

Chair Pennell asked the Board if they had any questions for Ms. Peek.

Dr. Larson asked Ms. Peek if the only information that will be shared is the status of the COVID vaccination.

Ms. Peek replied that Dr. Larson is correct the only thing that will be reflected is if someone is fully vaccinated or not. Per policy it is 2 weeks post the second dose, if your Pfizer, Moderna, or 2 weeks post Johnson & Johnson.

Dr. Murawsky asked Ms. Peek since vaccination health status is not protected information what currently prevents WebIZ from sharing that information with other agencies.

Ms. Peek answered that we are restricted from sharing that information to what is reflected in Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC). That is where the confidentiality lies, so this regulation, for no more than 120 days, will be in effect to allow sharing. It is not HIPPA per se and Deputy Attorney General Pierron Tackes is in the meeting as well if a more in depth answer is needed.

Dr. Murawsky stated that he was very supportive and stated that this burden exists for other business and entities that maybe looking for this going forward, so is this department considering more permanent regulation that might allow for this information for occupational status. Specifically binary status of those vaccinated or non-vaccinated to be shared with other entities for the same occupational purpose.

Ms. Peek stated that we are in constant discussion about how this information can be used. Protection is that any hearing that we have will have to come before the Board of Health, both pro and con. We are having discussions about how we can use this information to reopen Nevada and its uses. There is also heavy thought as to if this information should be shared or not. Because this is reported to us for a public health purpose and we need to make sure that it is confidential.

Dr. Murawsky verified that this information is shared with the State of Nevada with State of Nevada employees because it is an employee function. We are saying that it is safer because we are inside the state, and that allows for better control. This is a good first experiment, as a Board member I would want to see them come forward with some potential possibilities of whether or not this can be done for other business as they look at this moving forward.

Chair Pennell thanked Dr. Murawsky and Ms. Peek and asked the Board members if they had any further questions. The Board members did not ask any further questions, so Chair Pennell asked for a motion.

**CHAIR PENNELL REQUESTED A MOTION TO APPROVE THE CONSIDERATION AND POSSIBLE ADOPTION OF THE PROPOSED EMERGENCY STATEMENT AND EMERGENCY REGULATION AMENDMENT OF NEVADA ADMINISTRATIVE CODE (NAC) 439.895, RELATING TO ACCESS TO IMMUNIZATION INFORMATION SYSTEM DATA. A MOTION BY DR. LARSON TO APPROVE OF THE CONSIDERATION AND POSSIBLE ADOPTION OF THE PROPOSED EMERGENCY STATEMENT AND EMERGENCY REGULATION AMENDMENT OF NEVADA ADMINISTRATIVE CODE (NAC) 439.895, RELATING TO ACCESS TO IMMUNIZATION INFORMATION SYSTEM DATA WAS MADE AND SECONDED BY DR. MURAWSKY. THE REGULATION WAS APPROVED UNANIMOUSLY WITHOUT ABSTENTIONS.**

Chair Pennell asked if the public had any comments regarding agenda item 3.

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Mr. Gregory Brown had a question for Ms. Peek. If the regulation was to be adopted could this also be used to facilitate the verification of vaccination status of other participants in state agencies, such as students in higher education?

Ms. Peek answered that in order to do that we would need a listing of all the students that attend the universities. Then we could match it against WebIZ. That is not what the regulation has. What the regulation before the Board's consideration is employees, as it directly relates to, and goes into effect on August 15<sup>th</sup>, so we will just be looking at employee vaccination status. Again, WebIZ is a tool that we can look overall vaccination group status if we match that data.

Mr. Jessie Krause, faculty member in the Biology Department at UNR, Mr. Krause had questions about the legality of the vaccine mandate among employees centered on turning over vaccination records to the employee. How are employees protected in terms of the Americans with Disabilities Act (ADA) laws and discrimination laws. Mandating a vaccine law still under an Emergency Use Authorization Act doesn't seem legal. It seems like coercion by the Nevada system for me to get an experimental vaccine. As I have read this seems like a violation of the Nuremberg Code, by basically saying that I have to take an experimental drug. How is Nevada dealing with these national, international, state, and federal laws on vaccinations?

Ms. Peek answered that we have a great deal of legal analysis before any policy is put into place. I just want to be really clear that the policy that is being put into place though Governor Sisolak, that starts on August 15<sup>th</sup> for state employees and NSHE employees, is not a vaccination requirement. It is vaccination or testing. Ms. Peek is personally working on the testing plan that rolls out next week to ensure that there is testing for state employees. NSHE is also allowing ample testing opportunities. By no means, if you are not comfortable with the vaccination should you feel pressured to do it. There are plenty of testing options as well.

Mr. Krause said that the other thing in President Sandoval's email is the idea that employees would be financially responsible for testing, is that also the state's policy? If we are not vaccinated, we now have to pay for our own tests?

Ms. Peek replied that she cannot speak to what President Sandoval has sent out as far as requirements for NSHE. Ms. Peek did say that the State of Nevada Executive Branch is providing testing for State of Nevada employees at least through the end of December. There are onsite and virtual options and a number of community based testing sites as well that are free to the community. I don't know if NSHE employees have been directed to those resources, or if NSHE is providing opportunities for free testing in the community.

Mr. Krause asked Ms. Peek where does it end? How do I know going forward that there won't be a mandate for vaccine and testing will no longer be acceptable. Chair Pennell reminded Mr. Krause that he has to limit his questions for others and stated that Ms. Peek has answered his questions.

Mr. Eric Gilliland wanted to confirm the release of vaccination records would apply to NSHE as well. Mr. Gilliland knows that the state has a list of state employees under the Division of Human Resources Management (DHRM), but I wanted to confirm this will be an option for NSHE institutions as well.

Ms. Peek thanked Mr. Gilliland and stated that the division is working with NSHE to get a list completed of their staff through a data use agreement and as soon as that is done the division will be able to provide the same

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information to NSHE to help reduce the administrative burden for both the employee and the human resources staff at NSHE. Mr. Gilliland thanked Ms. Peek and said that we appreciate it.

#### **4. PUBLIC COMMENT**

Chair Pennell opened the meeting to public comments and started with Ms. Rodriguez. Chair Pennell reminded everyone that public comment is limited to 2 minutes.

Ms. Rodriguez stated that she was urged to call in by another UNLV law student about the mandatory vaccination mandate. Ms. Rodriguez said she wanted to really make the point that it will be a hardship for people who are being reasonable about public health, those who are being vaccinated, or alternatively getting tested weekly if they choose not to be vaccinated, because she has heard of a lot of people dying in hospitals. Ms. Rodriguez stated that her mother is a respiratory therapist and that she has seen her coworkers die, and that she has worked without PPE (Personal Protective Equipment). For us to be so close to beating this vaccine it allows some people who are afraid of getting it, despite having alternatives to getting it. Being testing, seems deeply unfair. Not only that but I have disabilities, I won't disclose what they are, now finding out that we may have to go back online again means that I have to change all of my accommodations less than a week before my school starts. Its not great for most people and the fact that we can go to school, attend UNLV in a way that makes me feel more comfortable. There is nothing wrong with having those things in place. I am all for making classes more accessible, but you are making things a lot less accessible for people with disabilities and for those who are amino compromised and have a difficult time being around those who are not vaccinated. We do require people to get the MMR I would have to pay out of pocket for my tests that is participating in daily life, society, social services. I can understand why people would not want to be forced to do anything, but they don't understand by in forcing that rule they are forcing everyone to accommodate for them. If that makes any sense, because these people don't want to get vaccinated, and we don't want to force them to. The majority of us do understand this pandemic. I have lost my job too, I am intimately familiar I have lost friends, family to not cater to the minority when they have the freedom to make the decision rather than in forcing their comfort onto our freedom.

Mr. Kent Ervin, State President of the Faculty Alliance. The independent association of NSHE faculties, colleges, and universities. We work to empower faculty in our mission to help students succeed. We have submitted in writing a petition for a safe fall semester for members of the NSHE community. As of right now over 1,100 faculty, staff, students, and family members from around the state have signed. I am speaking on their behalf. We strongly encourage the State Board of Health to take emergency action as soon as possible on vaccination of university and college students against the spread of the Coronavirus that causes COVID-19. As you are medical professionals we are counting on you to consider the public health necessity of vaccinations amongst students and faculty who necessarily interact closely in living learning environments, and we are asking you to act independently amid State of NSHE pressure. The Delta variant will not wait for spring 2022 registration. Over 685 colleges and universities nationwide have mandated vaccinations and have found medial, legal, and moral bases for doing so. To quote the petition "We respectfully request the Nevada State Board of Health to consider mandatory vaccinations for college and university students based on sound medical evidence and to issue emergency regulations giving guidance and authorization to NSHE. We need these actions now to prevent the Delta variant from shutting down in person instruction in the fall. Your emergency regulation action today shows just how quickly the Board of Health can act, so please do that for us thank you.

Dr. David Orentlicher, Professor at the UNLV Boyd School of Law and Director of the UNLV Health Law Program. I speak today in strong support of an immediate COVID vaccination mandate for students at our

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public colleges and universities. I have submitted written comments on behalf of myself and more than 35 of my law faculty colleagues. Unfortunately, COVID infection rates are surging in Nevada. Once again there are high numbers of preventable hospitalizations and deaths. We need to ensure that we don't contribute to the spread of COVID and that our campuses are safe spaces for students, staff, faculty and visitors. This is particularly the case for persons who are unable to be vaccinated by immunocompromising conditions that weaken the protection that the vaccination provides, or who live with persons with high risk for infections. We are grateful for the current COVID precautions on campus, we need widespread immunization to adequately protect our students and those with whom they interact. Vaccinations by far are the most effective tool to prevent infection hospitalization and death. While we believe that voluntary measures are preferable to mandate it is clear that voluntary measures will not ensure the needed level of immunization. With the emergency that we are in it is essential to expedite our response. We know enough about COVID and COVID vaccines to decide this question now. And because of the long standing availability of vaccines and the severe nature of the COVID threat it is both fair and vital that we move quickly. More specifically with the plentiful opportunities for immunization we believe it appropriate to require the first dose of vaccine by August 23<sup>rd</sup> for students that will attend classes or participate in other activities on campus, of course with appropriate exemptions. Thank you very much for your consideration and for your critical service to this state.

Ms. Sarah Kimball-Stevenson stated that she is speaking on behalf of the Boyd Chapter of the National Lawyers Guild and concerned law students attending the only law school in the state. As of August 10<sup>th</sup>, 2021, our organization has reached nearly 100 signatures on a letter urging the law school to implement a COVID-19 mandate. These are the reasons that the students, the community most directly impacted by this binding decision. Our letter was sent to our law school administrators who passed our concerns on to NSHE, but NSHE has removed themselves entirely from the situation and will only implement the mandate if you, the Board of Health chooses to do so. We urge you to expedite discussion on a vaccine mandate for NSHE students preferably before classes start on August 23<sup>rd</sup>. It is not too late to implement a policy like the one currently in place for the NSHE employees. A vaccine mandate for the majority that allows students with exemptions in the process of seeking vaccination to return to campus so long as they submit to weekly COVID-19 tests or provide the maximum protection for students, faculty and staff while still ensuring equitable access to education for all but waiting until the Board of Health meeting on September 3<sup>rd</sup> is too late. This conversation is urgent for university students that are unable to get the vaccine, for those who are high risk and for the families across the state of Nevada. Subjecting students and staff to preventable health risks is a gamble that we ask the Board of Health not to take. We need action now. Online classes can be in accessible and ineffective for many people with the living conditions that are not conducive to a distraction free learning experience. Distance education lacks many of the benefits that on campus provides. We all want the option to take classes in person, but the fact of the matter is we cannot do this without a vaccine mandate and regular testing policy. So, it is time for universities and colleges in Nevada to join the over 680 U.S. institutions that have a proactive approach. What is being dubbed the 4<sup>th</sup> wave of the pandemic. It is past time to take drastic measures to mandate the vaccination against COVID-19 in Nevada. It is time to recognize the sacrifices of the millions of people who did their part this year to flatten the curve, those who stayed home from work and school, those who wear masks everyday, and those who receive the vaccine as soon as it was available. We are begging the Nevada State Board of Health to mandate the vaccine and keep Nevada classrooms safer for all so that we can resume in person learning in collaboration without inequity and fear. Thank you so much.

Mr. Pete Vasquez, Thank you for having me today. I just wanted to read something to you guys and just wanted to say hello honorable Board members. I have to say that the fact the question of mandatory vaccinations for



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NSHE and the student, staff and faculty is not on the agenda is an omission of failure. I find it difficult to believe that a sustained body of professionals appears to have no scenario planning for the Delta variant. No public comment on the feasibility on the vaccines for NSHE and no plan to show a potential mandatory vaccination plan for NSHE until September 3<sup>rd</sup>. After the beginning of the fall semester, and it is such a plan, if mandatory vaccinations are mandated, that it will not begin until next year. What happened to this Board that lead to this? What other priorities superseded that of protecting those Nevadans who work in, and also attend, our major higher education institutions? The time to plan, for this plan, was at a minimum months ago. What lessons are you going to learn from this? And how many sick, disabled, and frankly potentially dead students, faculty and staff will have to occur before you act? What are you waiting on, NSHE' s Board of Regents to decide? If so, this is another failure because they do not have the leadership skills to make such an important decision and in turn punted to their legal team, who have in turn punted to you. Obviously this Board can call emergency meetings, so I urge you call one immediately for next week, if not sooner, to address and take comments on the importance of and immediate implementation of emergency mandatory vaccinations for the NSHE system. The lives of students, faculty and staff at Nevada's higher education institutions can not wait almost 4 months until next year for you to protect them. You can come back from failure but only if you acknowledge it. Share the reasons why you failed with us all and work immediately to do better by the state that relies on you. Start now. Thank you for your time.

Mr. Ian Hartshorne, Associate Professor at the University of Nevada Reno. I am giving comment to implore this Board to move as quickly as possible to add COVID vaccination to the extensive list of mandatory vaccinations required at NSHE campuses. We have heard a lot of anti-vaccine messages, unfortunately including our campus. But the truth is that 1,100 faculty and staff, students, and family members have signed a petition asking your Board to do exactly that. I recognize that this is not necessarily an urgent responsibility that this Board requested. It is however one, that political and legal wrangling has left on your doorstep. Faculty and staff are doing all we can to have a safe in person fall. Note that I say fall not spring, we need your help to do that. December, January is not soon enough. Thank you for your time.

Mr. Gregory Brown, Faculty Member at the University of Nevada Las Vegas for 23 years. I would like to add my voice to those who have urged the Board to act with bureaucracy to in act a policy to insure a safe health semester. I would urge the Board in particular to do this on an emergency basis. The Open Meeting Law handbook is very clear on what the standards of an emergency meeting need and are. You followed them for today's meeting. There is absolutely no reason why this could not be done, literally at the close of this meeting. You could convene an emergency meeting. You could convene an emergency meeting for tomorrow or any day this week. The urgency here is extreme. I understand the importance of the action you have taken today, and you acted with alacrity because the staff at DHHS (Department of Health and Human Services) has asked you to do that. I appreciate it on behalf of the public. The same alacrity and urgency, even more, should be applied to the policy of NAC 441 modification to include the COVID vaccine. Please consider your role here as the State's Board of Health. Please act with urgency. Please act immediately.

Mr. Jessie Krause, Department of Biology at UNR, I wanted to speak on the biology of some of this stuff and the reasons why I have concerns about mandating this vaccine for our students. There is this misconception that the spike protein, which is the protein expressed by the vaccine, does not immunize component of the virus. According to a recent study by Suzuki-Et-Al in 2020 the spike protein and the absents of any other viral components caused widespread pathological disruptions with internal vascular function in the mice they tested this in. This resulted in symptoms that were characteristically observed in the patients, for instance, resulting in

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COVID-19. They argue that the vaccine was designed in such a way that the spike protein does not enter the circulation thus we should not observe these symptoms in the vaccinated individuals. However, we have not empirically tested to see if not the spike protein remains bound in the membrane there is a lot of modern studies in which the look at gene expression was properly neuroded as soon as they tried to use this in a monkey it doesn't work the same. The improper expression of proteins can do severe damage to the animals having toxic effects on liver and other tissues according to Suzuki-Et-Al, 2017. The other major point, which I am not entirely sure on, is that it is currently unknown if this mRNA (messenger ribonucleic acid) technology is incorporated into the genome. Plus, we do not know how long the spike protein might be expressed in the body and if it is limited to the cell surface or circulation. It is important to note that under natural circumstances antibody types are reduced following the recovery from this disease, sustained elevated levels of antibodies in response to the vaccination could cause negative effects. For instance, the class reactivity of antibodies against SARS-COVID-2 spike protein found considerable binding thyroid proxy basic protein mitochondria. This might not be meaningful to many of you on this call, but basically what this translates to is prolonged induction of antibodies to these proteins can result in the formation of autoimmune diseases such as Multiple Sclerosis, Hashimoto's Thyroiditis, Celiac Disease, etc. The problem with looking at the FDA (Food and Drug Administration) approval within 1 year is that all of these conditions would be presenting within 5 to 10 years of treatment. I am overly cautious in terms of promoting a vaccination of students without long term data on it because we may not know what it may do in the long term. The Public Health of England just made a report stating that patients that were admitted to the hospital with COVID-19, of which 2,960 were unvaccinated and 2,100 were vaccinated despite a low positivity rate. Interestingly, the people who died of COVID were fully or partially vaccinated out of 486 individuals compared to 253 unvaccinated individuals, so we saw higher levels of mortality. I am overly cautious because I feel like the CDC is not releasing information the same way that other governments are. Where is all the information for America, why are we reliant on information from South Africa and England. I am not anti-vaccination I am just abundantly cautious in the use of this vaccine for our younger population who are at much lower risk. Thank you.

Jamie Voyles, Associate Professor in the Biology Department at UNR, I teach courses on infectious diseases, immunology, and medical microbiology to upper level undergraduates most of whom are in pre-health. We have talked a great deal about the COVID-19 pandemic, and I want to agree with some of what Jessie said which was in respect to the mechanistic properties of the virus, in particular the spiked protein concern. What I think is really imperative is that you look at both sides of the coin. You can look at this from the mechanistic level for an individual, but you really can't associate that from the epidemiology and what is happening in the wider community. It is true that we don't know, we don't have long term data about the vaccine. The flip side of that is the vaccine itself is posing a very real and serious danger. Not just at the individual level, but to the whole community. And so, the statistics that have to go hand in hand with that is the evidence that we are getting from hospitals. More than 95% of the individuals that are in the ICU's (Intensive Care Unit) were not vaccinated. You have to take that perspective because there is no situation that is "no" risk, but on the one side with the long term impacts of the vaccine you have to look at that we don't have long term impacts of COVID, of having COVID in general. It is not straight forward it is a really difficult situation, but I would urge everyone to keep in mind that there are many unknowns. We do know, from the epidemiological data, that the vaccine is having a huge important outcome in terms of keeping people from being hospitalized and from dying. Thank you.

Nichole Thomas, Student and President of the Graduate and Professional Student Association at UNLV, I represent over 4,000 graduate and professional students at the university. While my opinion can not possibly

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encompass every opinion on the campus. I believe that one of the fundamental tenants of being as strong leader is to work towards a solution based on scientific evidence and factual information. The COVID-19 vaccination spoke. We know that they work, we have scientists, doctors, and public health experts telling us that they work. If we truly value peer reviewed consensus if we are confident in the science than we should be mandating vaccines. Without the vaccine mandate we as an institution are sending the message that it is ok to bow to a small amount of political pressure, fear, and misunderstanding. Enforcing the vaccine mandate will greatly decrease the odds of this pandemic lasting even longer. It will decrease the odds of students and faculty getting sick and it will definitely decrease the number of deaths that will result in unvaccinated infection and transmission. We know each of these things to be true. The top 25 colleges and over 600 institutions also know that this is true and have implemented vaccine mandates. They have of course faced backlash but honestly what policy hasn't. The fact of the matter is that we owe this to our students and our faculty to keep them safe. We owe it to our immunocompromised peers who relying on the vaccinated folks to help keep them safe. We owe it to my colleagues in the College of Education who consistently work in classrooms of students under the age of 12. We owe it to parents of students that can't get vaccinated yet. We owe it to all of the individuals that did the right thing and followed what the government suggested and got vaccinated. Working hard to keep themselves and their peers safe. It may be a difficult decision to implement, but it will undoubtedly save lives in the long run. I strongly encourage you to follow the science in support of a vaccine mandate for all NSHE campuses. Thank you for your time and consideration.

Mr. Filippi tried to connect Ms. Laura Dunsford but she was unable to communicate with the Board of Health. Having no more members of the public wishing to make general comments to the Board of Health Mr. Filippi handed the meeting to Chair Pennell.

Chair Pennell thanked everyone for their comments, written comments, and the Board of Health members for attending the emergency meeting. Chair Pennell then concluded the meeting.

**Meeting Adjourned at 4:21 pm**