

**SENATE, No. 656**

**STATE OF NEW JERSEY**  
**221st LEGISLATURE**

PRE-FILED FOR INTRODUCTION IN THE 2024 SESSION

**Sponsored by:**

**Senator ROBERT W. SINGER**

**District 30 (Monmouth and Ocean)**

**SYNOPSIS**

Provides for identification and study of infant fatalities and near fatalities resulting from vaccination; requires inclusion of vaccination information in sudden infant death reports; and requires use of federal infant death reporting form.

**CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel.



1 AN ACT concerning infant fatalities and near fatalities stemming  
2 from vaccination, supplementing Title 26 of the Revised  
3 Statutes, and supplementing and amending P.L.1997, c.175  
4 (C.9:6-8.83 et seq.).

5

6 **BE IT ENACTED** by the Senate and General Assembly of the State  
7 of New Jersey:

8

9 1. (New section) a. In any case of sudden or unexpected  
10 infant death, the infant’s physician of record, in cooperation with  
11 the emergency medical responders who responded to the scene of  
12 death, the medical examiner who is tasked with performing the  
13 autopsy, the medicolegal death investigator who is tasked with  
14 investigating the scene of death, and any other appropriate parties,  
15 shall complete a Sudden Unexplained Infant Death Investigation  
16 Reporting Form (SUIDI form), which is made available by the  
17 federal Centers for Disease Control and Prevention’s Division of  
18 Reproductive Health.

19 b. In completing a SUIDI form under this section, the infant’s  
20 physician of record shall attach, as an addendum to the form’s  
21 Infant Medical History section, a record of all vaccines that have  
22 been administered to the infant in the six-month period preceding  
23 the infant’s death.

24 c. A SUIDI form that is completed pursuant to this section  
25 shall be submitted, within 10 days after completion, to the Child  
26 Fatality and Near Fatality Review Board, established pursuant to  
27 section 6 of P.L.1997, c.175 (C.9:6-8.88), and shall be used by the  
28 board for the purpose of: (1) identifying fatalities and near  
29 fatalities among infant children that may have resulted from  
30 vaccination, pursuant to subsection c. of section 8 of P.L.1997,  
31 c.175 (C.9:6-8.90); and (2) engaging in an ongoing study of  
32 vaccination-related infant fatalities and near fatalities, as provided  
33 by section 4 of P.L. , c. (C. ) (pending before the  
34 Legislature as this bill). SUIDI forms submitted pursuant to this  
35 subsection may also be used by the board for any other purpose that  
36 is related to the board’s duties, as deemed by the board to be  
37 appropriate.

38 d. As used in this section, “sudden or unexpected infant death”  
39 means the death of a child under three years of age, in which the  
40 cause is not obvious before investigation.

41

42 2. Section 8 of P.L.1997, c.175 (C.9:6-8.90) is amended to read  
43 as follows:

44 8. The board shall:

**EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.**

**Matter underlined thus is new matter.**

1 a. Identify the fatalities of children due to unusual  
2 circumstances according to the following criteria:

- 3 (1) The cause of death is undetermined;  
4 (2) Death where substance abuse may have been a contributing  
5 factor;  
6 (3) Homicide, child abuse or neglect;  
7 (4) Death where child abuse or neglect may have been a  
8 contributing factor;  
9 (5) Malnutrition, dehydration, or medical neglect or failure to  
10 thrive;  
11 (6) Sexual abuse;  
12 (7) Head trauma, fractures or blunt force trauma without  
13 obvious innocent reason such as auto accidents;  
14 (8) Suffocation or asphyxia;  
15 (9) Burns without obvious innocent reason such as auto accident  
16 or house fire; and  
17 (10) Suicide~~].~~;

18 b. Identify fatalities and near fatalities occurring among  
19 children whose family, currently or within the last 12 months, were  
20 receiving services from the division; and

21 c. Identify fatalities and near fatalities occurring among infant  
22 children, which may have resulted, in whole or in part, from the  
23 prior vaccination of the infant.

24 (cf: P.L.1997, c.175, s.8)  
25

26 3. Section 9 of P.L.1997, c.175 (C.9:6-8.91) is amended to read  
27 as follows:

28 9. a. The board shall determine which fatalities shall receive  
29 full review. The board may establish local or regional community-  
30 based teams to review information regarding children identified by  
31 the board. At least one team shall be designated to review  
32 information regarding child fatalities due to unusual  
33 circumstances~~]. At~~ ; at least one team shall be designated to  
34 review child fatalities and near fatalities identified pursuant to  
35 subsection b. of section 8 of P.L.1997, c.175 (C.9:6-8.90), as well  
36 as child fatalities where information available to the board indicates  
37 that child abuse or neglect may have been a contributing factor ;  
38 and at least one team shall be designated to review infant fatalities  
39 and near fatalities identified pursuant to subsection c. of section 8  
40 of P.L.1997, c.175 (C.9:6-8.90), which may have resulted from  
41 vaccination.

42 b. Each team shall include, at a minimum, a person  
43 experienced in prosecution, a person experienced in local law  
44 enforcement investigation, a medical examiner, a public health  
45 advocate, a physician, preferably a pediatrician, and a casework  
46 supervisor from a division field office. As necessary to perform its  
47 functions, each team may add additional members or seek the

1 advice of experts in other fields if the facts of a case warrant  
2 additional expertise.

3 c. Each team shall submit to the board chairperson a report of  
4 its findings and recommendations based upon its review of  
5 information regarding each child fatality or near fatality.  
6 (cf: P.L.1997, c.175, s.9)  
7

8 4. (New section) a. The Child Fatality and Near Fatality  
9 Review Board shall study the effects of vaccination on infant  
10 mortality and near mortality. The purpose of the study shall be to  
11 identify:

12 (1) instances in which the death of an infant is determined to  
13 have resulted, in whole or in part, from vaccination of the infant;

14 (2) instances in which a near fatal event involving an infant is  
15 determined to have resulted, in whole or in part, from vaccination  
16 of the infant;

17 (3) instances in which the definitive cause of an infant fatality  
18 or near fatality is not clear after investigation, but in which there is  
19 reason to believe that vaccination may have been a contributing or  
20 primary factor leading to the fatality or near fatality;

21 (4) the percentage of total infant fatalities and near fatalities  
22 occurring in the State that definitively resulted, in whole or in part,  
23 from vaccination, and the percentage of total infant fatalities and  
24 near fatalities occurring in the State wherein vaccination is a  
25 suspected, but not proven, factor that may have contributed to the  
26 death or near fatal event;

27 (5) patterns and trends in infant fatalities and near fatalities  
28 resulting from vaccination; and

29 (6) ways to reduce or eliminate infant fatalities and near  
30 fatalities resulting from vaccination.

31 b. In conducting the study pursuant to this section, the board  
32 may seek the advice of persons specializing in the fields of  
33 neonatal, post neonatal, or pediatric pathology, infant health,  
34 immunology, and epidemiology.

35 c. Within one year after the date of enactment of this act, the  
36 board shall prepare and submit a report to the Governor, and,  
37 pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the  
38 Legislature. The report shall identify the board's findings from the  
39 study, including, but not limited to, findings on the rate of infant  
40 fatalities and near fatalities resulting from vaccination and findings  
41 on the patterns and trends that are evident from the data, and shall  
42 provide recommendations for legislative or other actions that can be  
43 undertaken to reduce or eliminate infant fatalities and near fatalities  
44 resulting from vaccination, while continuing to ensure the  
45 protection of the public against communicable disease.

46 d. The board shall additionally prepare and submit  
47 supplemental reports to the Governor, and, pursuant to section 2 of  
48 P.L.1991, c.164 (C.52:14-19.1), to the Legislature, at the intervals

1 deemed by the board to be appropriate, but not less often than every  
2 five years after the first report is submitted pursuant to subsection c.  
3 of this section. Any supplemental report submitted under this  
4 subsection shall include the information required by subsection c. of  
5 this section, and shall additionally identify: (1) the extent to which  
6 any prior recommendations of the board, made pursuant to this  
7 section, have been successfully implemented in practice; and (2) the  
8 apparent impact that those changes have had on vaccination-related  
9 infant fatalities and near fatalities during the reporting period.

10

11 5. This act shall take effect immediately.

12

13

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STATEMENT

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16 This bill would provide for the identification and study of infant  
17 fatalities and near fatalities resulting from vaccination. It would  
18 further require the inclusion of vaccination information in reports of  
19 sudden or unexpected infant death.

20 The bill would require the State's Child Fatality and Near  
21 Fatality Review Board, in particular, to identify fatalities and near  
22 fatalities occurring among infant children, which may have resulted,  
23 in whole or in part, from the prior vaccination of the infant. The  
24 bill would require the board to ensure that at least one of the local  
25 or regional community-based review teams operating under its  
26 authority is designated to review the cases of infant fatality and near  
27 fatality that are identified by the board pursuant to the bill's  
28 provisions.

29 The board would also be required to engage in an ongoing study  
30 of the effects of vaccination on infant mortality and near mortality.  
31 The purpose of the study would be to identify: instances in which  
32 an infant death is determined to have resulted, in whole or in part,  
33 from vaccination of the infant; instances in which a near fatal event  
34 involving an infant is determined to have resulted, in whole or in  
35 part, from vaccination of the infant; instances in which the  
36 definitive cause of a death or near fatal event is unclear after  
37 investigation, but in which there is reason to believe that  
38 vaccination was a contributing factor in the death or near fatal  
39 event; the percentage of total infant fatalities and near fatalities  
40 occurring in the State that have definitively resulted, in whole or in  
41 part, from vaccination, and the percentage of total infant fatalities  
42 and near fatalities occurring in the State wherein vaccination is a  
43 suspected, but not a proven, factor contributing to the death or near  
44 fatal event; patterns and trends in infant fatalities and near fatalities  
45 resulting from vaccination; and ways to reduce or eliminate infant  
46 fatalities and near fatalities resulting from vaccination. In  
47 conducting the study, the board would be authorized to seek the  
48 advice of persons specializing in the fields of neonatal, post

1 neonatal, or pediatric pathology, infant health, immunology, and  
2 epidemiology.

3       Within one year after the bill's enactment, the board would be  
4 required to submit a report to the Governor and Legislature. The  
5 report would include the board's findings on the rate of infant  
6 fatalities and near fatalities resulting from vaccination, a description  
7 of patterns and trends that are evident from the collected data, and  
8 recommendations for legislative or other actions that can be  
9 undertaken to reduce or eliminate infant fatalities and near fatalities  
10 resulting from vaccination, while continuing to ensure the  
11 protection of the public against communicable disease.

12       The board would additionally be required to provide  
13 supplemental reports to the Governor and Legislature, at intervals  
14 deemed by the board to be appropriate, but not less often than every  
15 five years after the first report is submitted. Any supplemental  
16 report would include the same information that is to be included in  
17 the first report, and would additionally identify: the extent to which  
18 any prior recommendations of the board have been successfully  
19 implemented in practice; and the apparent impact that those changes  
20 have had on vaccination-related infant mortality and near mortality  
21 during the reporting period.

22       In order to facilitate the board's work, the bill would provide  
23 that, in any case of sudden or unexpected infant death (i.e., in any  
24 case where the cause of death of a child under three years of age is  
25 not obvious before investigation), the infant's physician of record,  
26 in cooperation with the emergency medical responders who  
27 responded to the scene of death, the medical examiner who is tasked  
28 with performing the autopsy, the medicolegal death investigator  
29 who is tasked with investigating the scene of death, and any other  
30 appropriate parties, will be required to complete a Sudden  
31 Unexplained Infant Death Investigation Reporting Form (SUIDI  
32 form), which is made available by the federal Centers for Disease  
33 Control and Prevention's Division of Reproductive Health. In  
34 completing the form, the infant's physician of record would be  
35 required to attach, as an addendum to the form's Infant Medical  
36 History section, a record of all vaccines that have been administered  
37 to the infant in the six-month period preceding the infant's death.

38       A completed SUIDI form would need to be submitted, within 10  
39 days after completion, to the Child Fatality and Near Fatality  
40 Review Board, which would then use the forms to facilitate its  
41 identification and study of vaccination-related infant fatalities and  
42 near fatalities, as provided by the bill. The board would also be  
43 authorized to use these SUIDI forms for any other purpose that is  
44 related to its duties, as deemed by the board to be appropriate.