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June 21, 2021

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From: Christine Massey [REDACTED]

Sent: June 21, 2021 7:04 PM

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**Subject:** Healthcare Professionals Warn of Severe Problems Testing/Vaccine Safety Documented by Public Health Organization Data

**CAUTION: EXTERNAL MAIL. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS YOU DO NOT TRUST.**

To: Justin Trudeau, Doug Ford, Kieran Moore, Bonnie Crombie, Patrick Brown, John Tory, and other men and women who serve as Mayors, Councillors, Medical Officers and anyone else involved in "COVID-19" fear-mongering, enforcement/harassment/bullying and/or injections (for which you are **personally** liable under common law):

**I require and request that this communication be added to the agendas for the next meetings of your respective bodies.**

**Be advised of the following** (yellow highlighting is my emphasis).

----- Forwarded message -----

From: **truthfirst1** [REDACTED]

Date: Mon, Jun 21, 2021 at 2:19 PM

Subject: Severe Problems Testing/Vaccine Safety Documented by Public Health Organization Data

To: ACLU of MA <[LegalResources@aclum.org](mailto:LegalResources@aclum.org)>, Admin, Nursing (DPH) <[nursing.admin@state.ma.us](mailto:nursing.admin@state.ma.us)> ...  
<[covidinfo@umass.edu](mailto:covidinfo@umass.edu)> <[covidinfo@umass.edu](mailto:covidinfo@umass.edu)>, <[scoop@admin.umass.edu](mailto:scoop@admin.umass.edu)> ...  
<[scoop@admin.umass.edu](mailto:scoop@admin.umass.edu)>, ...Christine Massey [REDACTED] ...

**Health Care Professionals for Covid-19 Policy Correction has launched a major media outreach campaign to flag extensive documentation with Covid-19 testing and vaccine safety issues.**

At this point, the public health official narrative does not match the government health organization own data. This is not disputed and problems have been admitted at the top level. The problem is that individuals will often not look at objective and credible evidence that runs contrary to the general Covid-19 policy narrative. It is imperative that academics and professionals look at new evidence objectively. It is clear there are serious problems that are documented in plain sight. I implore everyone to remember that the scientific method is not deference to public opinion or even deference to 'expert' opinion. Direct objective review of evidence is required. PLEASE review this information. Something is wrong and we are very worried a very high level of unnecessary injury will occur before many will be willing to take a good look at the evidence. Please do not let this happen.

Our children are now being injured through administration of a new technology gene line editing drug in a population that is NOT at risk per the CDC own data:

Thanks - here's our letter to the media. Several of our physicians will be giving interviews:

Hello

This is an emergency outreach to media outlets and policy makers due to SEVERE, extensively and credibly documented problems with Covid-19 testing and vaccination safety & efficacy.

My name is Rose, I am a Registered Nurse and member of Health Care Professionals for Covid-19 Policy Correction. Our group is composed of over 1,000 signatories of physicians, nurses of all practice levels and many other credentialed health professionals. (please see the end of this email for documentation of all information provided in this email with direct links to all sources) . I am sending this email to flag serious concerns from many health professionals with Covid-19 testing methods and protocol recommendations errors and severe vaccine safety issues:

The Covid-19 testing flaws and protocol error issues are extensively documented both by the government public health organizations own data, and credible peer review.

Despite extensive evidence of errors and flaws being available for public review, the media continues to report Covid-19 infection case numbers on erroneous testing methods, and not following up and changing reporting standards even when the media occasionally does report on the story.

To summarize, ALL Covid-19 testing utilized for diagnosis of Covid-19 infections is non-specific to the virus and the main emergency use PCR test for Covid-19 diagnosis has been deemed by credible peer review to be 'useless' for the purpose of detection of Sars CoV2, the virus attributed to cause Covid-19 infections. This is supported by WHO statement updates for the test. (documentation below)

Antigen tests are non-specific and use in low populations was warned to create majority false positive in use of low incident populations, this was the status of the entire United States before the 'second wave' cases were reported on use of testing that produces up to 100% false positives with Antigen tests.

Antibody tests are non-specific and will pick up dozens of other viruses.

Additionally, there has been fully 265 FDA recalls of Covid-19 testing kits and devices compromising 10s of millions of kits with 8 million in May alone. Mass contamination has been a major reason for these recalls including bacterial contamination and mold with the CDC admitting that all initial tests released were contaminated This compromises HUNDREDS of billions of money spent on tests which are unsuitable for use in detection of Sars CoV2 infection, it is a major scandal almost completely ignored by the media Safety risks were documented as reasons for the removal of some of these tests, no public health investigation into the injury or safety consequence on use of these tests has ever been instituted.

90% of Massachusetts PCR tests for Sars CoV2 were found to be false positives in studies correcting for the error last July, due to a simple cycle testing protocol error that remains uncorrected to this day.

Recent drops in reported cases have occurred at the same time CDC and WHO organizations changed testing protocols in a way that would drastically reduce case numbers (providing Cycle Threshold number in labs, this occurred the same week as first release of Pfizer vaccine, finally providing the data for care providers to correct for a testing protocol issue that resulted in 90% false positive PCR tests for Sars CoV-2).

There is NO substantive evidence of asymptomatic spread of Sars CoV-2, the number of false positives resulting from over amplification of testing material through high CT rates matches the number of

individuals presenting without symptoms with a positive diagnosis from PCR tests. These individuals are simply not sick

Portugal, Germany, and Austria all have court rulings against government health directives based on the use of PCR tests due to the severe unreliability issues.

The media is ignoring extensive and widely publicized data of severe problems with the testing, and continuing to recite 'case' numbers as if this information does not exist. This must be corrected.

Additionally, our group have reviewed the vaccine trial design data and found trials compromised to useless for informing public health safety and efficacy. All vaccine trials utilized severely flawed PCR unsuitable for informing on vaccine efficacy or safety.

Additionally, vaccine injuries and deaths should immediately halt this ill advised and unnecessary program. Mass inoculation of the population with new technology gene line editing drugs that bypassed the usual 8 to 12 year trial period (and which are not technically vaccines, rather acting to rewrite RNA code at a cellular level to retrain the immune system to respond to future exposure to disease).

The media continues to highlight 'experts' who are going against licensing standards in making non evidence based statements on vaccine necessity and safety that goes against what the vaccine trials actually demonstrate and conducted with trials severely compromised through testing method and design. Any expert stating that there was 'no evidence' of Covid-19 vaccinations causing harm based on lack of trials went against the basic standard that there needs to be trial review and study for this evidence to exist. No evidence of safety risks has morphed into extensive evidence of thrombocytopenia, blood clotting, anaphylactic reaction, heart inflammation and neurological disorders due to the Covid-19 vaccinations.

Now, they are reporting these events are rare. However, our group has discovered through a simple review of the VAERS data that the CDC is BACK LOADING data and 2,400 of the now near 6,000 reported deaths post Covid-19 vaccination occurred in the first six weeks of program.

In early February, under 700 deaths were reported to the system and around 13,000 injuries related to Covid-19 vaccines

A search of those dates now reveals there were 2,400 deaths that occurred in the first six weeks of the program alone, with 109,000 injury reports for Covid-19 vaccinations

This represents an under-reporting of injuries of 89% and deaths by 73%. Additionally, our search revealed that the CDC is NOT including data of submission in injury reports, allowing the agency to backload data without account for withholding evidence in real time and making it impossible to get true numbers through Freedom of Information act requests (which researchers are now submitting)

At the end of January, 30 million vaccinations were administered. Backloading data allows the CDC to reduce the incidence rate of injuries for the vaccines by assigning the numbers to a much broader vaccination pool.

We have NO true idea of the real numbers of injuries due to this manipulation by the CDC.

It is the same way the dog we have seen with the testing program and the media needs to start reviewing public health organization data which exposes severe problems of these issues, this behavior indicates deliberate fraud.

One fourth of deaths reported to VAERS post Covid-19 vaccination are occurring within minutes to one day post vaccination. Over 1500 including anaphylactic shock and blood clotting and cardiac arrests.

The entire vaccination program is unnecessary, based on faulty testing and case numbers driven by testing setting that produce majority of false positives by settings of the test. Additionally, even with the severely compromised numbers, 99.98 of individual with a Sars CoV2 Covid-19 diagnosis survive and 86% do not even exhibit symptoms

Additionally, the vaccines offer NO improvement on existing survival rates, even if you take the totally farcical 95% effectiveness rating at face value. Those over 65 (those considered highest risk) have a 94.5% survival rate, no statistical improvement whatsoever)

This program is dangerous, completely unnecessary, and ill advised.

In the first eleven day of June, 99 teenagers have been hospitalized with heart inflammation post vaccine, this population has virtually ZERO risk from a Covid-19 attributed infection

An Israeli study found 30X greater rate of myocarditis in teens and young adults with up to 1 in 3,000 incident rate of heart inflammation occurring in this group

ANY 'expert' proclaiming that the benefits outweigh the risk for vaccination is not backed by the actual trial data and research studies indicating the risk of MANY THOUSANDS over a diagnosis of Covid-19 vaccination.

We implore the media to find its ethic and do due diligence to actually review the public health organization data instead of inviting experts that are in violation of licensing standards in promoting non-evidence claims to the public on vaccination efficacy and safety.

Sincerely

Rose L Birrell RN, BSN, licensed in MA since 1993  
Volunteer Outreach Member  
Health Care Professionals for Covid-19 Policy Correction  
CC David Birrell, MD

(A word on Breakthrough cases: Due to severe flaws and unreliability in testing and symptoms of Covid-19 mirroring many other disease and illness, a positive test does not mean an individual has a Covid-19 infection and the media is allowing the CDC and public health officials to bypass necessary investigation of post Covid-19 vaccination deaths by attribution to 'breakthrough cases'. This is ludicrous, the results of one severely flawed diagnostic tests does NOT constitute legitimate investigation into post vaccination deaths or necessary review for determination of cause of death). Please correct this in your reporting.

Reports to our group our flagging serious concern in hospitalizations to young adults and teens that appear to be generated from vaccine injury and are NOT being fully captured iwth VAERS data, a positive Covid test is essentially meaningless, see below)

Here are relevant writings with sources from our blog for full documentation on the above information:

Full update on VAERS data and review of 11 cases verified VAERS injury reports with supporting medical data, very small sampling to provide general overview of type of health injuries occurring:

CDC Postpones Emergency Covid Vaccine Meeting As Hospitalizations/Deaths in Teens/Young Adults Mount (unite4truth.com)

<https://www.unite4truth.com/post/cdc-postpones-emergency-covid-vaccine-meeting-as-hospitalizations-deaths-in-teens-young-adults-mount>

On the testing:

## **Media Not Exercising Due Diligence Reporting Covid 19 Case Numbers, Egregious Test Problems Ignored**

<https://www.unite4truth.com/post/media-not-exercising-due-diligence-reporting-covid-19-case-numbers-egregious-test-problems-ignored>

## **Evidence Indicates CDC Manipulating Covid-19 PCR Testing, Provide False Evidence of Vaccine Efficacy**

<https://www.unite4truth.com/post/evidence-indicates-cdc-manipulating-covid-19-pcr-testing-provide-false-evidence-of-vaccine-efficacy>

## **Contaminated Covid-19 Tests, Millions Removed from Market, Implicated in India Black Fungal Outbreak**

<https://www.unite4truth.com/post/contaminated-covid-19-tests-millions-removed-from-market-implicated-in-india-black-fungal-outbreak>

### **Severe Vaccine Issues:**

Updates report with eleven individual case reviews and VAERS data numbers HERE:

CDC Postpones Emergency Covid Vaccine Meeting As Hospitalizations/Deaths in Teens/Young Adults Mount (unite4truth.com)

## **2,400 Covid-19 Vaccine Deaths Occurred in First Six Weeks of Covid-19 Vaccine Program, CDC Back Loading Data:**

<https://www.unite4truth.com/post/2-400-covid-19-vaccine-deaths-occurred-in-first-six-weeks-of-program-cdc-back-loading-data>

## **New Myocarditis Reports Stream in Globally As CDC Continues Push of Emergency Use Covid-19 Vaccines**

<https://www.unite4truth.com/post/new-myocarditis-reports-stream-in-globally-as-cdc-continues-push-of-emergency-use-covid-19-vaccines>

On risks in Children:

<https://www.unite4truth.com/post/what-parents-should-know-covid-19-vaccinations-experimental-new-technology-1000-reports-injury>

On risks in Pregnant women:

<https://www.unite4truth.com/post/cdc-recommends-covid-19-vaccine-for-pregnant-women-as-media-trumpets-flawed-study-as-proof>

On CDC placing vaccine image over public health interests:

<https://www.unite4truth.com/post/evidence-cdc-dismissing-credible-evidence-of-covid-19-vaccine-harm-anaphylactic-rates-120x-higher>

Health Care Professionals for Covid-19 Policy Correction Petition:

(over 1,000 health care professional signatories demanding end to unnecessary and unsafe health directive predicated on severely compromised evidence)

<https://www.unite4truth.com/post/emergency-petition-halt-covid-19-protocols-severe-testing-flaws-vaccines-safety-risks-exposed>

Canadian Doctors Testify in Parliament:

<https://www.unite4truth.com/post/doctors-nurses-speak-out-in-canadian-parliament-on-censorship-covid-19-vaccine-injuries-headlines>

Christine Massey M.Sc.  
Peterborough, ON

**FOI responses from 72 institutions** (including Public Health Agency of Canada, Health Canada, the U.S. Centers for Disease Control and Prevention) in **20 countries/jurisdictions** show that the world's health/science institutions have **NO RECORD** of "SARS-COV-2" purification, by anyone, anywhere, ever, thus *no record of any scientific study or sequencing* of the particles alleged to be "the COVID-19 virus", and thus zero proof that a "COVID-19 virus" is the cause of any illness or death:  
<https://www.fluoridefreepeel.ca/fois-reveal-that-health-science-institutions-around-the-world-have-no-record-of-sars-cov-2-isolation-purification/>