

LIES, DAMNED LIES AND SADISTICS **Goodhart's Law**

WITH DAVID DICKSON

"When a measure becomes a target, it ceases to be a good measure."

Episode 3 – Weighed & Measured

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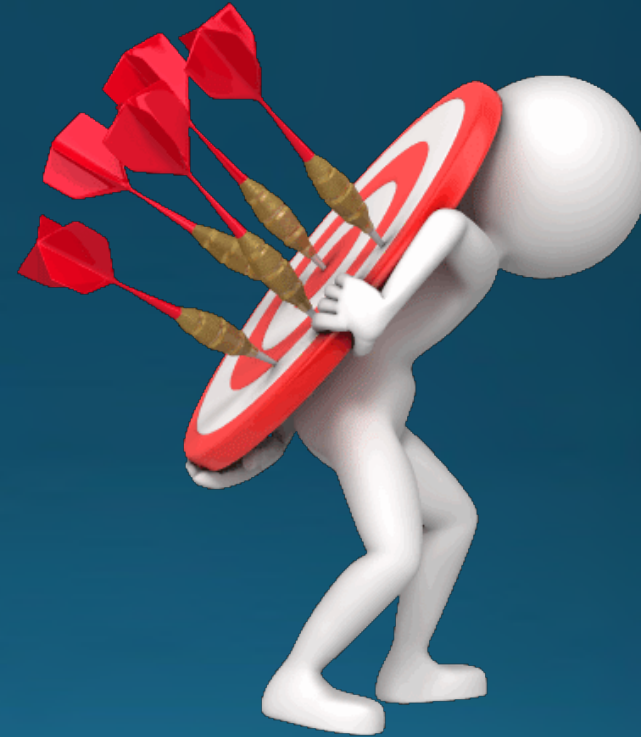
<https://www.bitchute.com/channel/84TyFCzLhbGG/>

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"When a measure becomes a target, it ceases to be a good measure."

- They targeted the elderly.
- They targeted children.
- They targeted workers.
- They were never measuring anything other than compliance.



LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

BEYOND THE PFIZER DOCUMENTS:
A POPULATION FAILED BY UNINFORMED CONSENT.

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Informed Consent

What does it mean?



<https://rumble.com/vx4rd2-informed-consent.html>

<https://www.bitchute.com/video/6tHdudARZ3B1/>

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Pfizer Document Dump. What is it?
This was the result of a Freedom of Information application to the Courts in the US.

The screenshot shows a website with a dark blue background and a central image of a globe. The main heading is 'Public Health and Medical Professionals for Transparency'. Below the heading is a paragraph of text: 'This nonprofit, made up of public health professionals, medical professionals, scientists, and journalists exists solely to obtain and disseminate the data relied upon by the FDA to license COVID-19 vaccines. The organization takes no position on the data other than that it should be made publicly available to allow independent experts to conduct their own review and analyses. Any data received will be made public on this website.' There is a blue 'JOIN' button. Below this is a white box containing text: 'Four days after the Pfizer vaccine was approved for ages 16+, we [submitted](#) a Freedom of Information Act Request to the FDA for all of the data within Pfizer's COVID-19 vaccine biological product file. We have now [sued](#) the FDA for not releasing the data. Click below for court documents and for productions of Pfizer's documents from the FDA.' There are two blue buttons: 'COURT DOCUMENTS' and 'PFIZER'S DOCUMENTS'. At the bottom left of the white box, it says 'Peter Aaby, MSc, DMSc'.

HOME JOIN COURT DOCUMENTS PFIZER'S DOCUMENTS MEDIA INQUIRIES

Public Health and Medical Professionals for Transparency

This nonprofit, made up of public health professionals, medical professionals, scientists, and journalists exists solely to obtain and disseminate the data relied upon by the FDA to license COVID-19 vaccines. The organization takes no position on the data other than that it should be made publicly available to allow independent experts to conduct their own review and analyses. Any data received will be made public on this website.

JOIN

Four days after the Pfizer vaccine was approved for ages 16+, we [submitted](#) a Freedom of Information Act Request to the FDA for all of the data within Pfizer's COVID-19 vaccine biological product file. We have now [sued](#) the FDA for not releasing the data. Click below for court documents and for productions of Pfizer's documents from the FDA.

COURT DOCUMENTS PFIZER'S DOCUMENTS

Peter Aaby, MSc, DMSc

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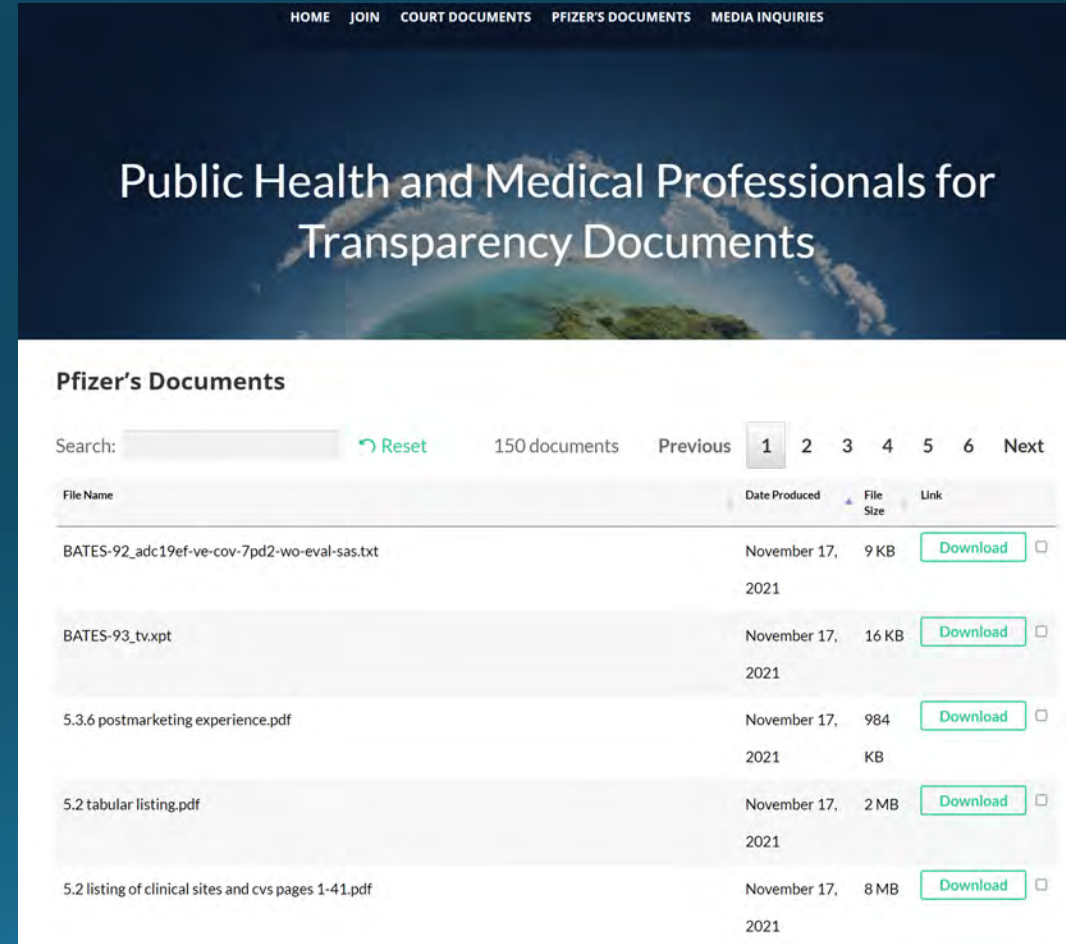
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The screenshot shows a website titled "Public Health and Medical Professionals for Transparency Documents" with a navigation bar containing "HOME", "JOIN", "COURT DOCUMENTS", "PFIZER'S DOCUMENTS", and "MEDIA INQUIRIES". Below the title is a search bar and a "Reset" button. The search results show "150 documents" and a pagination control with "Previous", "1", "2", "3", "4", "5", "6", and "Next". The main content is a table of documents with columns for "File Name", "Date Produced", "File Size", and "Link".

File Name	Date Produced	File Size	Link
BATES-92_adc19ef-ve-cov-7pd2-wo-eval-sas.txt	November 17, 2021	9 KB	Download
BATES-93_tv.xpt	November 17, 2021	16 KB	Download
5.3.6 postmarketing experience.pdf	November 17, 2021	984 KB	Download
5.2 tabular listing.pdf	November 17, 2021	2 MB	Download
5.2 listing of clinical sites and cvs pages 1-41.pdf	November 17, 2021	8 MB	Download

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Pfizer Document Dump. What is it?

In particular the 'noise' appears to be around one 38-page document.

5.3.6 postmarketing experience.pdf

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Pfizer Document Dump. What is it?

This document isn't new though.

It was produced in November 2021.

But more importantly has been available publically since December 2021.

November 17,

984

Download



2021

KB

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Pfizer Document Dump. What is it?

Further, it is really just a few pages of interest to everyone.
Page 7 with the number of deaths and Adverse Events reported.

BNT162b2

5.3.6 Cumulative Analysis of Post-authorization Adverse Event Reports

Table 1 below presents the main characteristics of the overall cases.

Table 1. General Overview: Selected Characteristics of All Cases Received During the Reporting Interval

	Characteristics	Relevant cases (N=42086)
Gender:	Female	29914
	Male	9182
	No Data	2990
Age range (years): 0.01 -107 years Mean = 50.9 years n = 34952	≤ 17	175 ^a
	18-30	4953
	31-50	13886
	51-64	7884
	65-74	3098
	≥ 75	5214
	Unknown	6876
Case outcome: ^a	Recovered/Recovering	19582
	Recovered with sequelae	520
	Not recovered at the time of report	11361
	Fatal	1223
	Unknown	9400

a. in 46 cases reported age was <16-year-old and in 34 cases <12-year-old.

As shown in Figure 1, the System Organ Classes (SOCs) that contained the greatest number ($\geq 2\%$) of events, in the overall dataset, were General disorders and administration site conditions (51,335 AEs), Nervous system disorders (25,957), Musculoskeletal and connective tissue disorders (17,283), Gastrointestinal disorders (14,096), Skin and subcutaneous tissue disorders (8,476), Respiratory, thoracic and mediastinal disorders (8,848), Infections and infestations (4,610), Injury, poisoning and procedural complications (5,590), and Investigations (3,693).

Apr-2021 09:26 (GMT)

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Pfizer Document Dump. What is it?
In particular the 1,223 deaths reported
from December 1, 2020, to February 28th, 2021.

Case outcome:	Recovered/Recovering	19582
	Recovered with sequelae	520
	Not recovered at the time of report	11361
	Fatal	1223
	Unknown	2400



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Pfizer Document Dump. What is it?

And the 51,335 Adverse Events (AEs) reported from December 1, 2020, to February 28th, 2021.

As shown in Figure 1, the System Organ Classes (SOCs) that contained the greatest number ($\geq 2\%$) of events, in the overall dataset, were General disorders and administration site conditions (51,335 AEs), Nervous system disorders (25,957), Musculoskeletal and connective tissue disorders (17,283), Gastrointestinal disorders (14,096), Skin and subcutaneous tissue disorders (8,476). Respiratory, thoracic and mediastinal disorders

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Pfizer Document Dump. What is it? And the last 9 pages of "ADVERSE EVENTS OF SPECIAL INTEREST"

BNT162b2
5.3.6 Cumulative Analysis of Post-authorization Adverse Event Reports

APPENDIX 1. LIST OF ADVERSE EVENTS OF SPECIAL INTEREST

1p36 deletion syndrome; 2-Hydroxyglutaric aciduria; 5-nucleotidase increased; Acoustic neuritis; Acquired C1 inhibitor deficiency; Acquired epidermolysis bullosa; Acquired epileptic aphasia; Acute cutaneous lupus erythematosus; Acute disseminated encephalomyelitis; Acute encephalitis with refractory, repetitive partial seizures; Acute febrile neutrophilic dermatosis; Acute flaccid myelitis; Acute haemorrhagic leukoencephalitis; Acute haemorrhagic oedema of infancy; Acute kidney injury; Acute macular outer retinopathy; Acute motor axonal neuropathy; Acute motor-sensory axonal neuropathy; Acute myocardial infarction; Acute respiratory distress syndrome; Acute respiratory failure; Addison's disease; Administration site thrombosis; Administration site vasculitis; Adrenal thrombosis; Adverse event following immunisation; Ageusia; Agranulocytosis; Air embolism; Alanine aminotransferase abnormal; Alanine aminotransferase increased; Alcoholic seizure; Allergic bronchopulmonary mycosis; Allergic oedema; Alloimmune hepatitis; Alopecia areata; Alpers disease; Alveolar proteinosis; Ammonia abnormal; Ammonia increased; Amniotic cavity infection; Amygdalohippocampectomy; Amyloid arthropathy; Amyloidosis; Amyloidosis senile; Anaphylactic reaction; Anaphylactic shock; Anaphylactic transfusion reaction; Anaphylactoid reaction; Anaphylactoid shock; Anaphylactoid syndrome of pregnancy; Angioedema; Angiopathic neuropathy; Ankylosing spondylitis; Anosmia; Antiacetylcholine receptor antibody positive; Anti-actin antibody positive; Anti-aquaporin-4 antibody positive; Anti-basal ganglia antibody positive; Anti-cyclic citrullinated peptide antibody positive; Anti-epithelial antibody positive; Anti-erythrocyte antibody positive; Anti-exosome complex antibody positive; Anti-GAD antibody negative; Anti-GAD antibody positive; Anti-ganglioside antibody positive; Anti-gliadin antibody positive; Anti-glomerular basement membrane antibody positive; Anti-glomerular basement membrane disease; Anti-glycyl-tRNA synthetase antibody positive; Anti-HLA antibody test positive; Anti-IA2 antibody positive; Anti-insulin antibody increased; Anti-insulin antibody positive; Anti-insulin receptor antibody increased; Anti-insulin receptor antibody positive; Anti-interferon antibody negative; Anti-interferon antibody positive; Anti-islet cell antibody positive; Antimitochondrial antibody positive; Anti-muscle specific kinase antibody positive; Anti-myelin-associated glycoprotein antibodies positive; Anti-myelin-associated glycoprotein associated polyneuropathy; Antimyocardial antibody positive; Anti-neuronal antibody positive; Antineutrophil cytoplasmic antibody increased; Antineutrophil cytoplasmic antibody positive; Anti-neutrophil cytoplasmic antibody positive vasculitis; Anti-NMDA antibody positive; Antinuclear antibody increased; Antinuclear antibody positive; Antiphospholipid antibodies positive; Antiphospholipid syndrome; Anti-platelet antibody positive; Anti-prothrombin antibody positive; Antiribosomal P antibody positive; Anti-RNA polymerase III antibody positive; Anti-saccharomyces cerevisiae antibody test positive; Anti-sperm antibody positive; Anti-SRP antibody positive; Antisynthetase syndrome; Anti-thyroid antibody positive; Anti-transglutaminase antibody increased; Anti-VGCC antibody positive; Anti-VGCC antibody positive; Anti-vimentin antibody positive; Antiviral prophylaxis; Antiviral treatment; Anti-zinc transporter 8 antibody positive; Aortic embolus; Aortic thrombosis; Aortitis; Aplasia pure red cell; Aplastic anaemia; Application site thrombosis; Application site vasculitis; Arrhythmia; Arterial bypass occlusion; Arterial bypass thrombosis; Arterial thrombosis; Arteriovenous fistula thrombosis; Arteriovenous graft site stenosis; Arteriovenous graft thrombosis; Arteritis; Arteritis

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CONFIDENTIAL
Page 1

FDA/CBER-2021-5683-0000683

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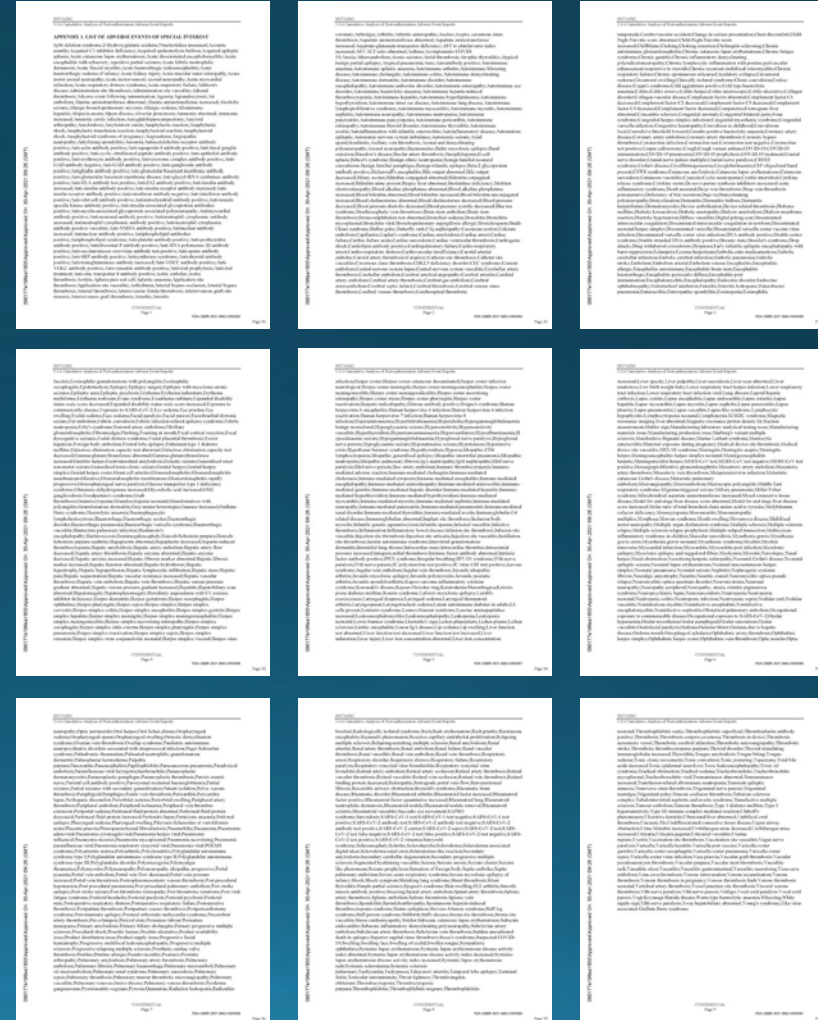
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Pfizer Document Dump. What is it?
"ADVERSE EVENTS OF SPECIAL INTEREST"
This list has 1,291 types of reactions listed



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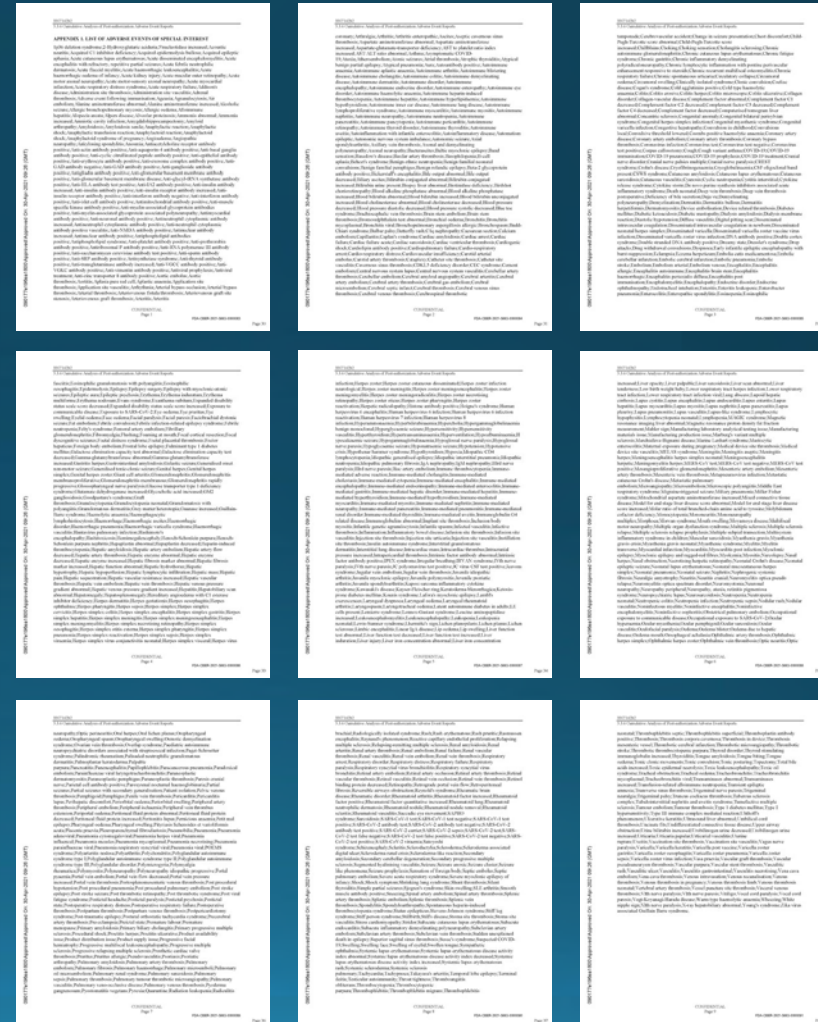
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Pfizer Document Dump. What is it? "ADVERSE EVENTS OF SPECIAL INTEREST"

Note this report was for 63 countries data over less than 3 months.



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Pfizer Document Dump. What is it? "ADVERSE EVENTS OF SPECIAL INTEREST"

However, the reality is much darker. And yet IN PLAIN SIGHT.

COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 9/12/20 and 14/04/21 for mRNA Pfizer/BioNTech

COVID-19 vaccine AstraZeneca analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 04/01/21 and 14/04/2021 for COVID-19 vaccine Oxford University/AstraZeneca

COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.

 GOV.UK

→ **Coronavirus (COVID-19)** | Latest updates and guidance

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The best place to find government services and information
Simpler, clearer, faster

Pfizer

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060000/Pfizer.pdf

AstraZeneca

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060002/AZ.pdf

Moderna

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060003/Moderna.pdf

'Other' Covid Vaccine

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060003/Moderna.pdf

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Pfizer Document Dump. What is it?

16th April 2021 – On the United Kingdom

Office of National Statistics Public Website (August 2021 for Moderna)

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Case Series Drug Analysis Print

Name: COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 16-Apr-2021 Data Lock Date: 14-Apr-2021 19:00:03
Earliest Reaction Date: 03-Apr-1990 MedDRA Version: MedDRA 23.1

Reaction Name	Total	Fatal
Vascular disorders		
Vein rupture	2	0
Peripheral embolism and thrombosis		
Blue toe syndrome	7	0
Deep vein thrombosis	81	0
Jugular vein thrombosis	1	0
Pelvic venous thrombosis	2	0
Peripheral embolism	1	0
Thrombophlebitis	8	0
Thrombophlebitis superficial	4	0
Peripheral vascular disorders NEC		
Cyanosis	20	0
Flushing	251	0
Hot flush	439	0
Peripheral vasoconstriction, necrosis and vascular insufficiency		
Extremity necrosis	1	0
Peripheral coldness	126	0
Peripheral ischaemia	5	0
Poor peripheral circulation	4	0
Raynaud's phenomenon	32	0
Vasoconstriction	2	0
Phlebitis NEC		
Phlebitis	14	0
Site specific vascular disorders NEC		
Pallor	101	0
Varicose veins NEC		
Spider vein	2	0
Varicose vein	3	0
Vascular hypertensive disorders NEC		
Diastolic hypertension	1	0
Essential hypertension	2	0
Hypertension	229	1
Systolic hypertension	2	0
Vascular hypotensive disorders		
Hypotension	162	0
Orthostatic hypotension	12	0
Vasculitides NEC		
Behcet's syndrome	2	0
MAGIC syndrome	1	0
Vasculitis	21	0
Vena caval embolism and thrombosis		
Vena cava embolism	1	0
Vena cava thrombosis	1	0
Vascular disorders SOC TOTAL	1951	4
TOTAL REACTIONS FOR DRUG	143034	334
TOTAL REPORTS	50022	
TOTAL FATAL OUTCOME REPORTS		334

Pfizer

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060000/Pfizer.pdf

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Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 04/01/21 and 14/04/2021 for COVID-19 vaccine Oxford University/AstraZeneca

COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.

Reactions

Deaths

143034

334

50022

334

People

Pfizer

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060000/Pfizer.pdf

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Pfizer Document Dump. What is it?

16th April 2021 – On the United Kingdom

Office of National Statistics Public Website (August 2021 for Moderna)

COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 9/12/20 and 14/04/21 for mRNA Pfizer/BioNTech

COVID-19 vaccine AstraZeneca analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 04/01/21 and 14/04/2021 for COVID-19 vaccine Oxford University/AstraZeneca

COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.

Case Series Drug Analysis Print

Name: COVID-19 vaccine AstraZeneca analysis print

Report Run Date: 16-Apr-2021
Earliest Reaction Date: 03-Feb-1921
Data Lock Date: 14-Apr-2021 19:00:03
MedDRA Version: MedDRA 23.1

Reaction Name	Total	Fatal
Vascular disorders Vascular disorders cont'd		
Spider vein	2	0
Varicophlebitis	2	0
Varicose vein	54	0
Vascular hypertensive disorders NEC		
Diastolic hypertension	1	0
Hypertension	457	0
Labile hypertension	1	0
Systolic hypertension	2	0
Venous hypertension	1	0
White coat hypertension	5	0
Vascular hypotensive disorders		
Capillary leak syndrome	4	0
Hypotension	335	0
Orthostatic hypotension	30	0
Vasculitides NEC		
Diffuse vasculitis	1	1
MAGIC syndrome	3	1
Vasculitis	58	2
Vena caval embolism and thrombosis		
Vena cava thrombosis	1	0
Vascular disorders SOC TOTAL	6461	39
TOTAL REACTIONS FOR DRUG	548495	627
TOTAL REPORTS	145994	
TOTAL FATAL OUTCOME REPORTS		627

AstraZeneca

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060002/AZ.pdf

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Pfizer Document Dump. What is it?

16th April 2021 – On the United Kingdom

Office of National Statistics Public Website (August 2021 for Moderna)

COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 9/12/20 and 14/04/21 for mRNA Pfizer/BioNTech

COVID-19 vaccine AstraZeneca analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 04/01/21 and 14/04/2021 for COVID-19 vaccine Oxford University/AstraZeneca

COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.

Reactions

Deaths

548495

627

145994

627

People

AstraZeneca

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060002/AZ.pdf

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16th April 2021 – On the United Kingdom

Office of National Statistics Public Website (August 2021 for Moderna)

COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 9/12/20 and 14/04/21 for mRNA Pfizer/BioNTech

COVID-19 vaccine AstraZeneca analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 04/01/21 and 14/04/2021 for COVID-19 vaccine Oxford University/AstraZeneca

COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.

Case Series Drug Analysis Print

Name: COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Earliest Reaction Date: 06-Feb-2020
Data Lock Date: 14-Apr-2021 19:00:03
MedDRA Version: MedDRA 23.1

Reaction Name	Total	Fatal
Vascular disorders		
<i>Aneurysms and dissections non-site specific</i>		
Aneurysm	1	0
<i>Circulatory collapse and shock</i>		
Circulatory collapse	1	0
Shock	1	0
<i>Haemorrhages NEC</i>		
Haematoma	1	0
<i>Non-site specific embolism and thrombosis</i>		
Thrombosis	2	0
<i>Non-site specific vascular disorders NEC</i>		
Vascular rupture	1	0
<i>Peripheral embolism and thrombosis</i>		
Deep vein thrombosis	4	0
<i>Peripheral vascular disorders NEC</i>		
Flushing	1	0
<i>Peripheral vasoconstriction, necrosis and vascular insufficiency</i>		
Peripheral coldness	1	0
<i>Phlebitis NEC</i>		
Phlebitis	1	0
<i>Vascular hypertensive disorders NEC</i>		
Hypertension	4	0
Vascular disorders SOC TOTAL	18	0
TOTAL REACTIONS FOR DRUG	1611	12
TOTAL REPORTS	516	
TOTAL FATAL OUTCOME REPORTS		12

'Other' Covid Vaccine

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060003/Moderna.pdf

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16th April 2021 – On the United Kingdom

Office of National Statistics Public Website (August 2021 for Moderna)

COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 9/12/20 and 14/04/21 for mRNA Pfizer/BioNTech

COVID-19 vaccine AstraZeneca analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 04/01/21 and 14/04/2021 for COVID-19 vaccine Oxford University/AstraZeneca

COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

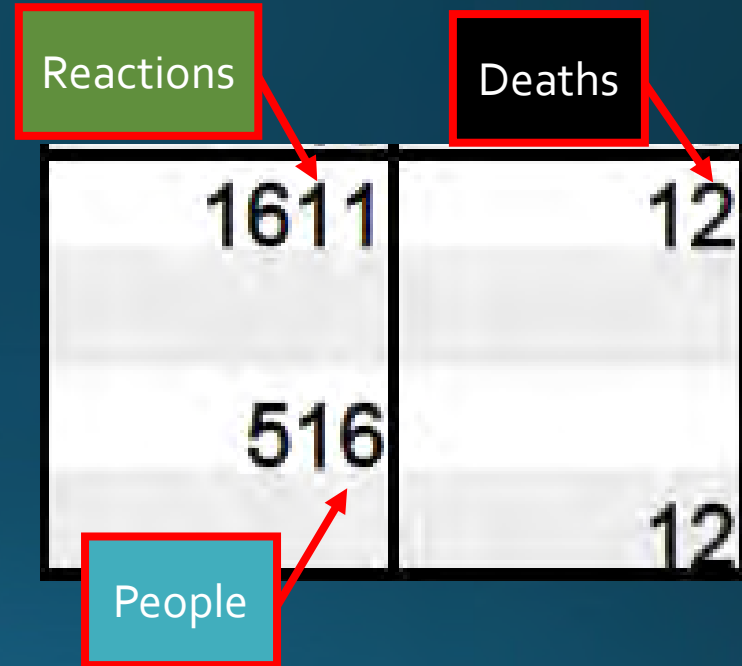
All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.



'Other' Covid Vaccine

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Office of National Statistics Public Website (August 2021 for Moderna)

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Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received between 9/12/20 and 14/04/21 for mRNA Pfizer/BioNTech

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Report Run Date: 16-Apr-2021
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Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.

Case Series Drug Analysis Print

Name: COVID-19 Moderna vaccine analysis print

Report Run Date: 20-Aug-2021
Earliest Reaction Date: 13-Mar-1936
Data Lock Date: 18-Aug-2021 18:30:45
MedDRA Version: MedDRA 24.0

Reaction Name	Total	Fatal
Vascular disorders Vascular disorders cont'd		
Hypotension	48	0
Orthostatic hypotension	4	0
Vasculitides NEC		
Vasculitis	1	0
Vascular disorders SOC TOTAL	540	0
TOTAL REACTIONS FOR DRUG	43949	17
TOTAL REPORTS	14019	
TOTAL FATAL OUTCOME REPORTS		17

Moderna

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060003/Moderna.pdf

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COVID-19 vaccine brand unspecified analysis print

Report Run Date: 16-Apr-2021
Data Lock Date: 14-Apr-2021 19:00:03

All UK spontaneous reports received up to and including 14/04/2021 for COVID-19 vaccines where the brand has not been specified.

COVID-19 Moderna Vaccine Analysis Print

Report Run Date: 20-Aug-2021
Data Lock Date: 18-Aug-2021 18:30:45

All UK spontaneous reports received up to 18/08/21 for COVID-19 Moderna vaccine

A report of a suspected ADR to the Yellow Card scheme does not necessarily mean that it was caused by the vaccine, only that the reporter has a suspicion it may have. Underlying or previously undiagnosed illness unrelated to vaccination can also be factors in such reports. The relative number and nature of reports should therefore not be used to compare the safety of the different vaccines. All reports are kept under continual review in order to identify possible new risks.



Moderna

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Pfizer Document Dump. What is it?

As of March 2nd, 2022 these are the UK numbers for Pfizer.

Case Series Drug Analysis Print

Name: COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 03-Mar-2022

Data Lock Date: 02-Mar-2022 20:03:58

MedDRA Version: MedDRA 24.1

COVID-19 mRNA Pfizer- BioNTech vaccine analysis print: All UK spontaneous reports received between 9/12/2020 and 02/03/2022 for mRNA Pfizer/BioNTech vaccine analysis print.

Reaction Name	Total	Fatal
TOTAL REACTIONS FOR DRUG	479366	732
TOTAL REPORTS	166780	
TOTAL FATAL OUTCOME REPORTS		732

Pfizer

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060000/Pfizer.pdf

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Pfizer Document Dump. What is it?

As of March 2nd, 2022 these are the UK numbers for AstraZeneca.

COVID-19 vaccine AstraZeneca analysis print

All UK spontaneous reports received between 04/01/2021 and 02/03/2022 for COVID-19 vaccine Oxford University/AstraZeneca.

Reaction Name	Total	Fatal
TOTAL REACTIONS FOR DRUG	864210	1240
TOTAL REPORTS	244050	
TOTAL FATAL OUTCOME REPORTS		1240

AstraZeneca

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060002/AZ.pdf

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Pfizer Document Dump. What is it?

As of March 2nd, 2022 these are the UK numbers for 'Other'.

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COVID-19 vaccine brand unspecified analysis print

All UK spontaneous reports received up to and including 25/01/2022 for COVID-19 vaccines where the brand has not been specified.

Reaction Name	Total	Fatal
TOTAL REACTIONS FOR DRUG	4773	40
TOTAL REPORTS	1560	
TOTAL FATAL OUTCOME REPORTS		40

'Other' Covid Vaccine

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060004/Unspecified.pdf

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Pfizer Document Dump. What is it?

As of March 2nd, 2022 these are the UK numbers for Moderna.

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COVID-19 Moderna vaccine analysis print

All UK spontaneous reports received between 9/12/2020 and 02/03/2022 for Moderna vaccine analysis print.

Reaction Name	Total	Fatal
TOTAL REACTIONS FOR DRUG	120577	41
TOTAL REPORTS	36226	
TOTAL FATAL OUTCOME REPORTS		41

Moderna

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060003/Moderna.pdf

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Pfizer Document Dump. What is it?

As of March 2nd, 2022 these are the UK numbers for Moderna.

In the UK between 1997 and 2003 there were a total of 130 reports of anaphylaxis following ALL immunisations.

COVID vaccinations as of March 2nd, 2022 - Reported cases of Anaphylaxis in the UK. **1,614.**

Risk on Anaphylaxis rate 1997-2003 for ALL Vaccines = 1 in **900,000**. COVID 19 Rate = 1 in **69,665**.

ONS UK	Reactions	Deaths	Months	Per month Reactions	Per month Deaths	Full Covid	Deaths per 100,000
AZ	864,210	1,240	13	66,478	95		
Pfizer	479,366	732	13	36,874	56		
Moderna	120,577	41	13	9,275	3		
Other	4,773	40	13	367	3		
Total	1,468,926	2,053	13	112,994	158	49,061,567	4.185

ONS UK	Reactions	Deaths	Months	Per month Reactions	Per month Deaths	First Dose	Deaths per 100,000
AZ	864,210	1,240	13	66,478	95		
Pfizer	479,366	732	13	36,874	56		
Moderna	120,577	41	13	9,275	3		
Other	4,773	40	13	367	3		
Total	1,468,926	2,053	13	112,994	158	52,654,053	3.899

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting>

<https://coronavirus.data.gov.uk/details/vaccinations> * (as of March 2nd, 2022)

Third Dose by March 2nd 2022 = **38,311,827** Total Doses = **140,027,447**

UK ONS Yellow Card Reporting System

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting#yellow-card-reports>

<https://coronavirus.data.gov.uk/details/vaccinations>

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ONS UK	Reactions	Deaths
AZ	864,210	1,240
Pfizer	479,366	732
Moderna	120,577	41
Other	4,773	40
Total	1,468,926	2,053

Pfizer

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060000/Pfizer.pdf

AstraZeneca

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060002/AZ.pdf

Moderna

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060003/Moderna.pdf

'Other' Covid Vaccine

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1060004/Unspecified.pdf

UK ONS Yellow Card Reporting System

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting#yellow-card-reports>

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Episode 3 – Weighed & Measured

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Pfizer Document Dump. What is it?

If we put the 9 pages into a formatted spreadsheet, they become 28 pages.

<https://dksdata.com/ONS/9%20pages.pdf>

Reaction Name	AEFI	Deaths
1p36 deletion syndrome		
2-Hydroxyglutaric aciduria		
5'nucleotidase increased		
Acoustic neuritis		
Acquired C1 inhibitor deficiency		
Acquired epidermolysis bullosa		
Acquired epileptic aphasia		
Acute cutaneous lupus erythematosus		
Acute disseminated encephalomyelitis		
Acute encephalitis with refractory, repetitive partial seizures		
Acute febrile neutrophilic dermatosis		
Acute flaccid myelitis		
Acute haemorrhagic leukoencephalitis		
Acute haemorrhagic oedema of infancy		
Acute kidney injury		
Acute macular outer retinopathy		
Acute motor axonal neuropathy		
Acute motor-sensory axonal neuropathy		
Acute myocardial infarction		
Acute respiratory distress syndrome		
Acute respiratory failure		
Addison's disease		
Administration site thrombosis		
Administration site vasculitis		
Adrenal thrombosis		
Adverse event following immunisation		
Ageusia		
Agranulocytosis		
Air embolism		
Alanine aminotransferase abnormal		
Alanine aminotransferase increased		
Alcoholic seizure		
Allergic bronchopulmonary mycosis		
Allergic oedema		
Alloimmune hepatitis		
Alopecia areata		
Alpers disease		
Alveolar proteinosis		
Ammonia abnormal		
Ammonia increased		
Amniotic cavity infection		
Amygdalohippocampectomy		
Amyloid arthropathy		
Amyloidosis		
Amyloidosis senile		
Anaphylactic reaction		

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Pfizer Document Dump. What is it?

If we do the same for the UK ONS Publically available data... It is 173 pages.

<https://dksdata.com/ONS/ONS%2oDATA.pdf>

UK ONS Data to March 2nd, 2022 - Adverse Events from AZ, Pfizer, Moderna and Other COVID Vaccines

Source data in links.

Pfizer
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/106000/Pfizer.pdf

AstraZeneca
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/106002/AZ.pdf

Moderna
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/106003/Moderna.pdf

'Other' Covid Vaccine
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/106004/Unspecified.pdf

Reaction Name	AEFI	Deaths
17 ketosteroids urine decreased	1	-
Abdomen crushing	3	-
Abdominal abscess	2	-
Abdominal adhesions	4	-
Abdominal and gastrointestinal infections		
Abdominal and gastrointestinal injuries NEC		
Abdominal bruit	1	-
Abdominal discomfort	2,498	-
Abdominal distension	1,408	-
Abdominal findings abnormal		
Abdominal hernia	3	-
Abdominal hernias NEC		
Abdominal infection	3	-
Abdominal injury	1	-
Abdominal lymphadenopathy	5	-
Abdominal mass	6	-
Abdominal migraine	5	-
Abdominal pain	6,635	1
Abdominal pain lower	448	-
Abdominal pain upper	9,006	-
Abdominal rigidity	92	-
Abdominal sepsis	2	-
Abdominal symptom	8	-
Abdominal tenderness	45	-
Abdominal wall conditions NEC		
Abdominal wall haematoma	2	-
Abdominal wall infection	1	-
Abnormal behaviour	62	-
Abnormal behaviour NEC		
Abnormal clotting factor	17	-
Abnormal dreams	623	-
Abnormal faeces	52	-
Abnormal food elimination		
Abnormal loss of weight	132	-

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US Adverse Events Following Vaccination (AEFI) reported as of February 25th, 2022.

In the US 213,563,173 people are fully vaccinated and 252,400,057 have had at least one dose.

<https://usafacts.org/visualizations/covid-vaccine-tracker-states/>

Remember these numbers below are considered 1% of the actual numbers.

VAERS (US) REPORTS 1% of all deaths and injuries.

<https://thevaccinereaction.org/2020/01/only-one-percent-of-vaccine-reactions-reported-to-vaers/>

<https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>

VAERS (US)

<https://vaers.hhs.gov/data/datasets.html>

Adverse effects 1,151,450 = 1 in 186 fully vaccinated people.

<https://medalarts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=CAT&EVENTS=ON&VAX=COVID19>

Deaths 24,827 = 1 in 8,628 people fully vaccinated people.

<https://www.medalarts.org/vaersdb/findfield.php?EVENTS=ON&VAX=COVID19&VAXTYPES=COVID-19&DIED=Yes>

Average Reported deaths from 1990 to 2020 = 159

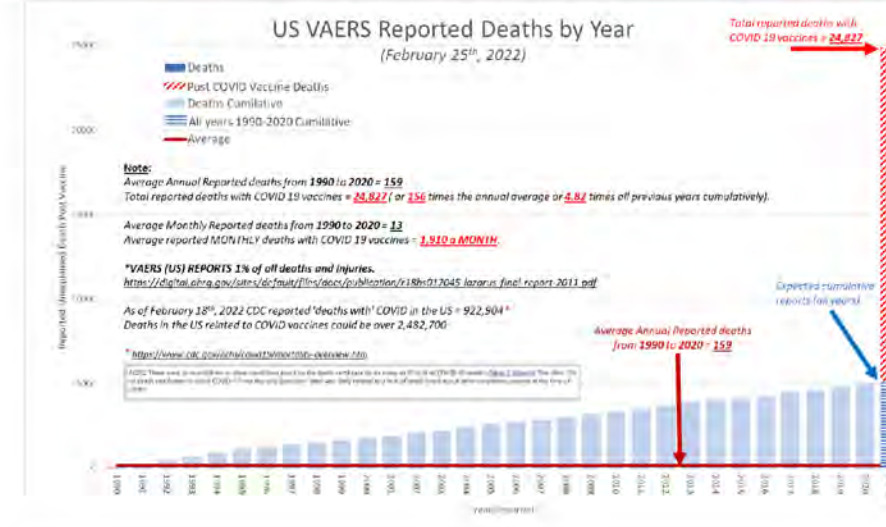
Total reported deaths (2020/2022)

with COVID 19 vaccines = **24,827**

156 times the annual average

4.82 times ALL previous years cumulatively.

Year	Reported Deaths	Deaths Cumulative	Average
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1991	160	236	159
1992	218	454	159
1993	219	673	159
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2017	165	4,475	159
2018	165	4,640	159
2019	183	4,805	159
2020	166	4,988	159
COVID	24,827	5,154	159



<https://vaers.hhs.gov/data/datasets.html>

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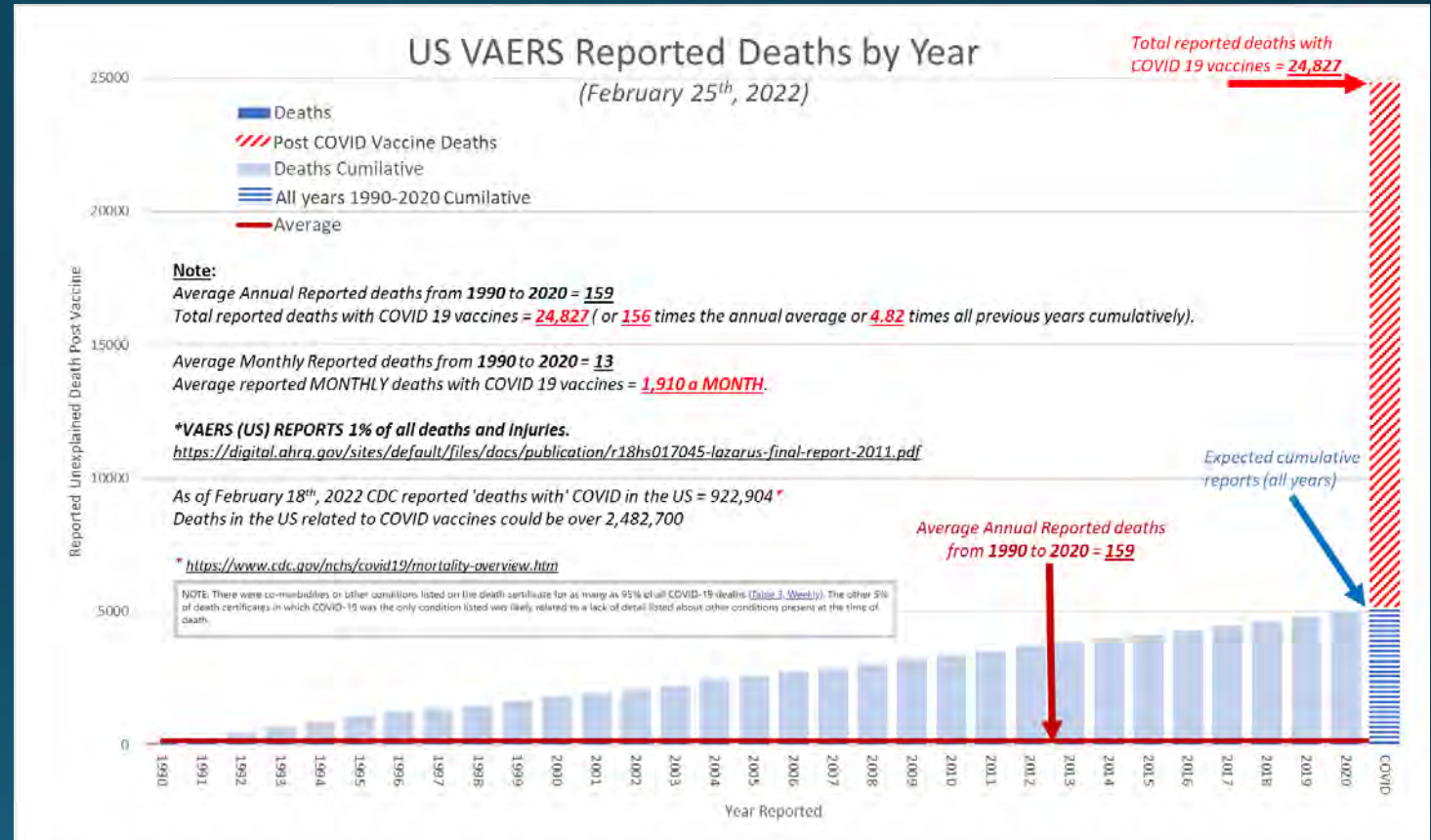
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***VAERS (US) REPORTS 1% of all deaths and injuries.**

<https://digital.ahrq.gov/sites/default/files/docs/publication/r18hso17045-lazarus-final-report-2011.pdf>

<https://www.cdc.gov/nchs/covid19/mortality-overview.htm>

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US VAERS Reported Deaths by Year

(February 25th, 2022)

- Deaths
- Post COVID Vaccine Deaths
- Deaths Cumilative
- All years 1990-2020 Cumilative
- Average

Note:

Average Annual Reported deaths from **1990 to 2020 = 159**

Total reported deaths with COVID 19 vaccines = **24,827** (or **156** times the annual average or **4.82** times all pre

Average Monthly Reported deaths from **1990 to 2020 = 13**

Average reported MONTHLY deaths with COVID 19 vaccines = **1,910 a MONTH.**

<https://vaers.hhs.gov/data/datasets.html>

<https://usafacts.org/visualizations/covid-vaccine-tracker-states/>

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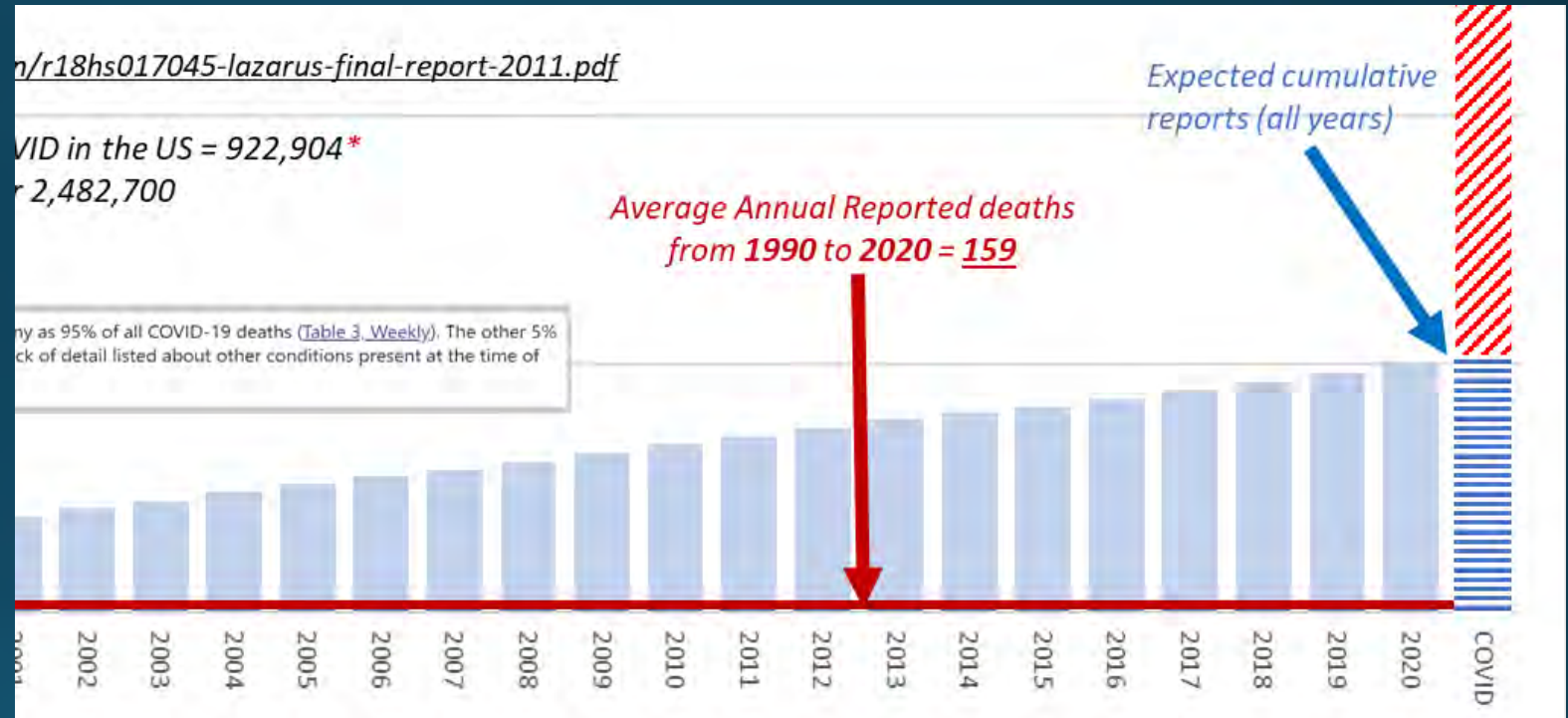
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Reported Deaths by Year

(February 25th, 2022)

Total reported deaths with
COVID 19 vaccines = **24,827**

59

or **156** times the annual average or **4.82** times all previous years cumulatively).

13

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<https://vaers.hhs.gov/data/datasets.html>

<https://usafacts.org/visualizations/covid-vaccine-tracker-states/>

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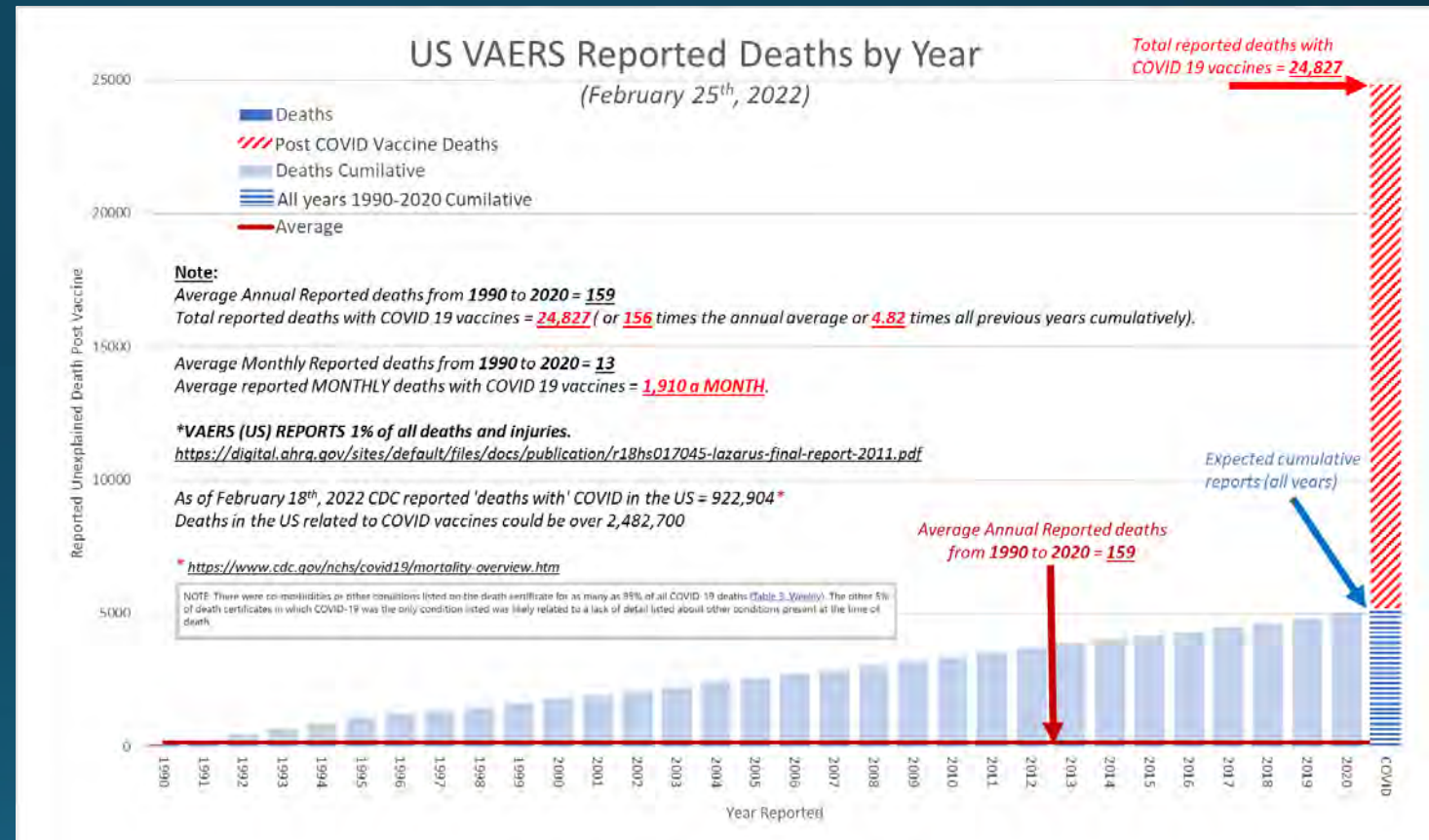
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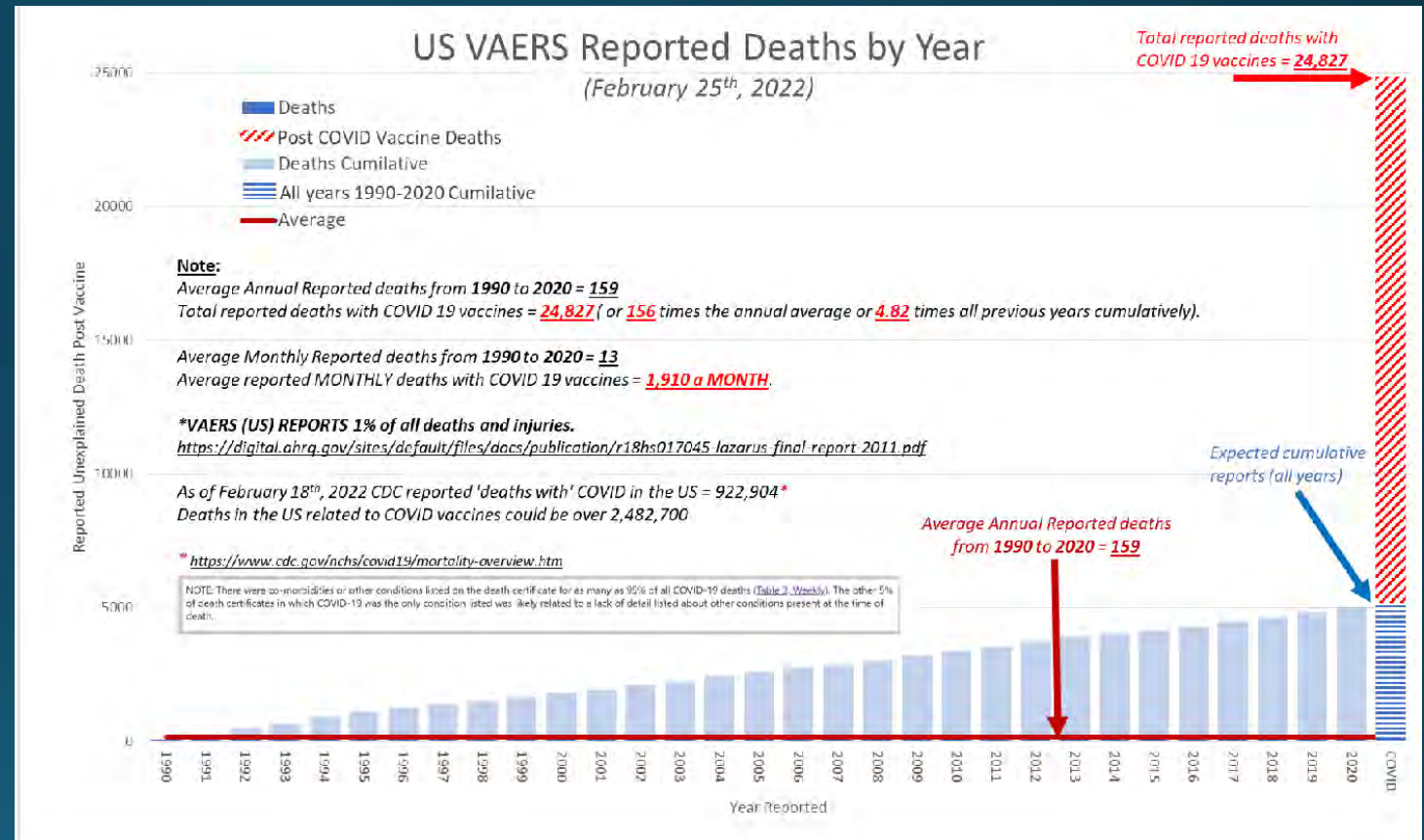
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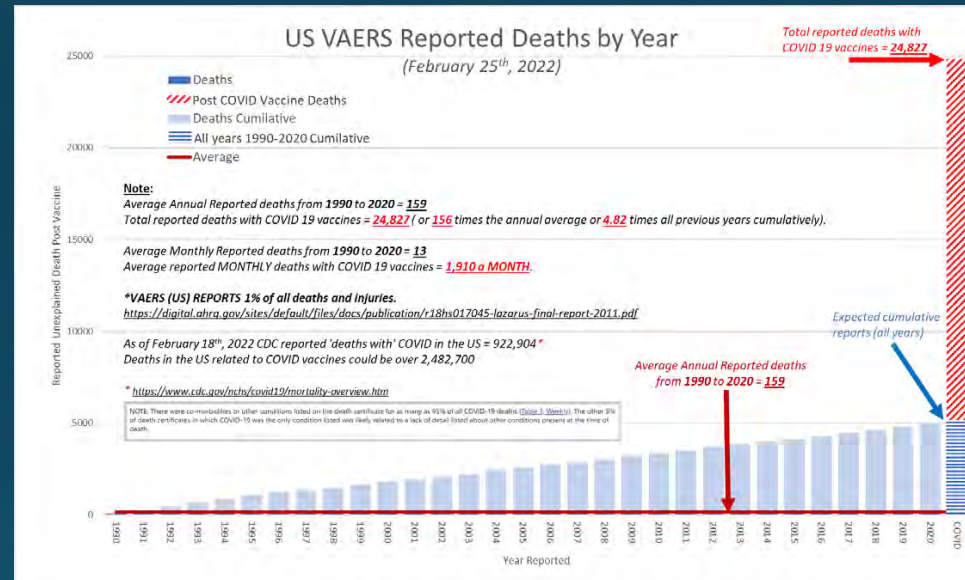
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Average Deaths in VAERS per year (since it started in 199) is **159**

2019	183	4,805	159
2020	166	4,988	159
COVID	24,827	5,154	159

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Adverse Events Following Immunization (AEFI)

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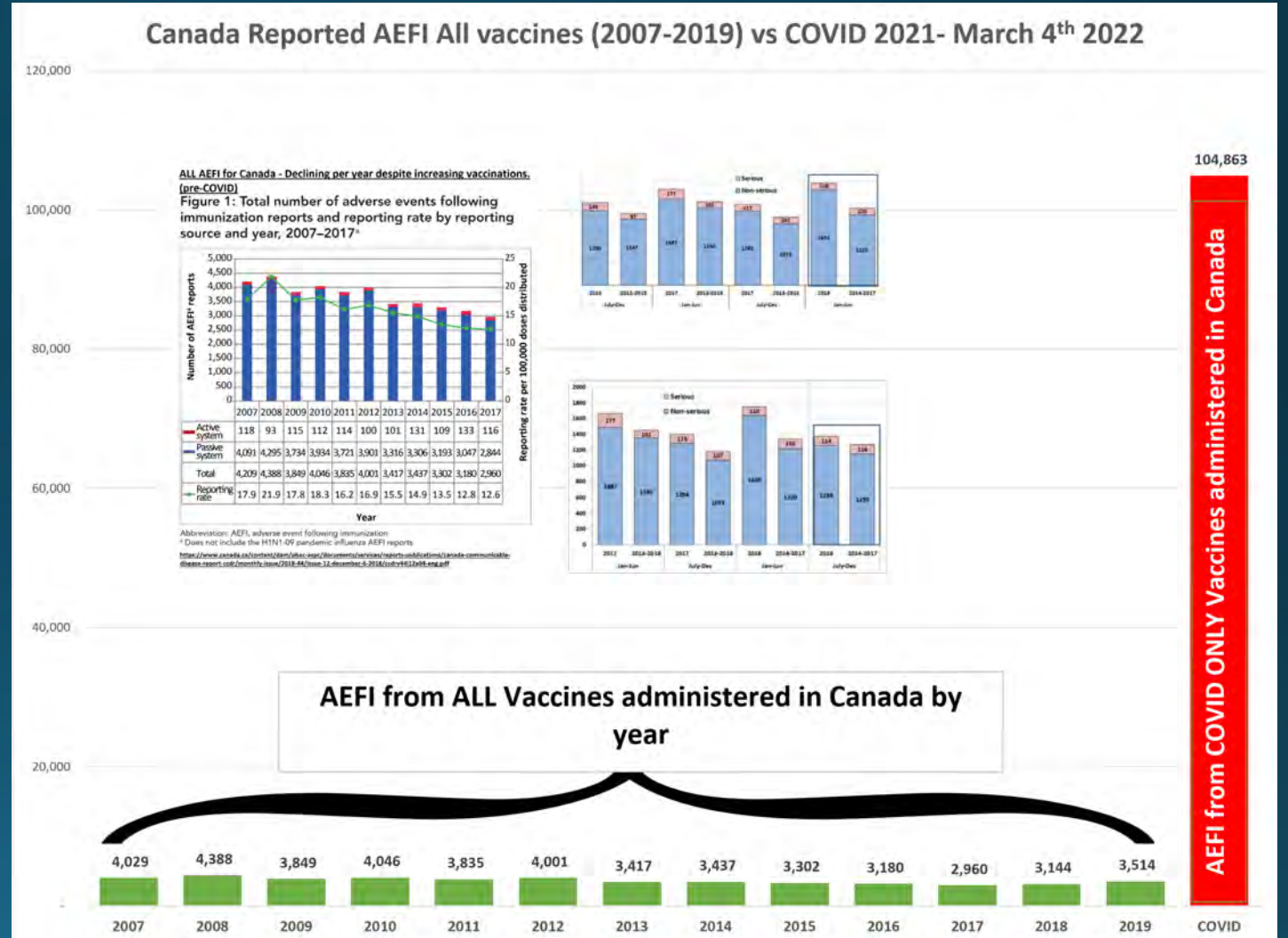
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<https://www.canada.ca/en/public-health/services/publications/vaccines-immunization/adverse-events-following-immunization-bi-annual-report-january-1-june-30-2019.html>

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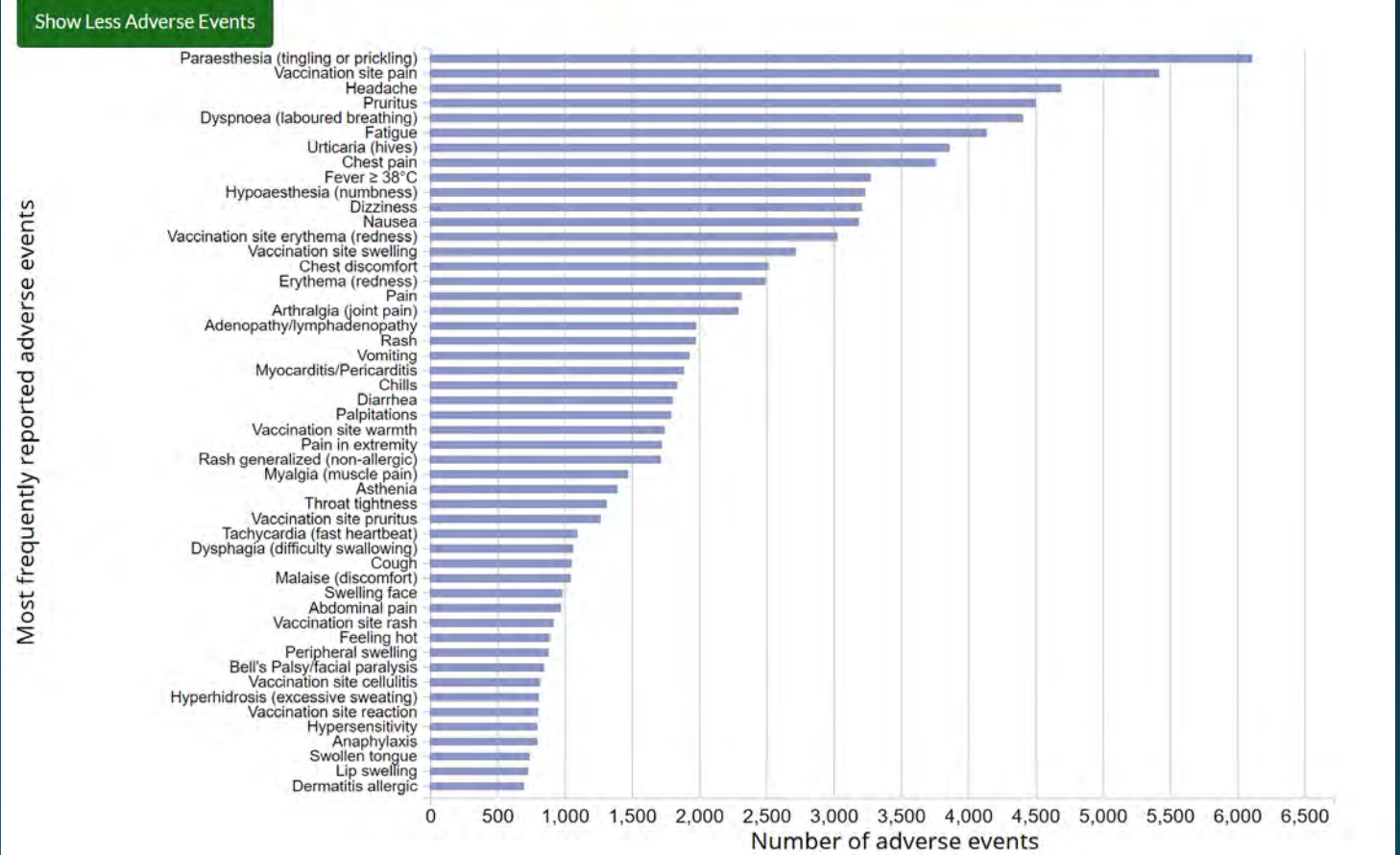
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Figure 4. Number of the most frequently reported adverse events by vaccine type (Total up to and including March 4, 2022 (n=104,863))



Please note that 1 report represents 1 person and may contain information on more than 1 adverse event.

<https://health-infobase.canada.ca/covid-19/vaccine-safety/#seriousNonSerious>

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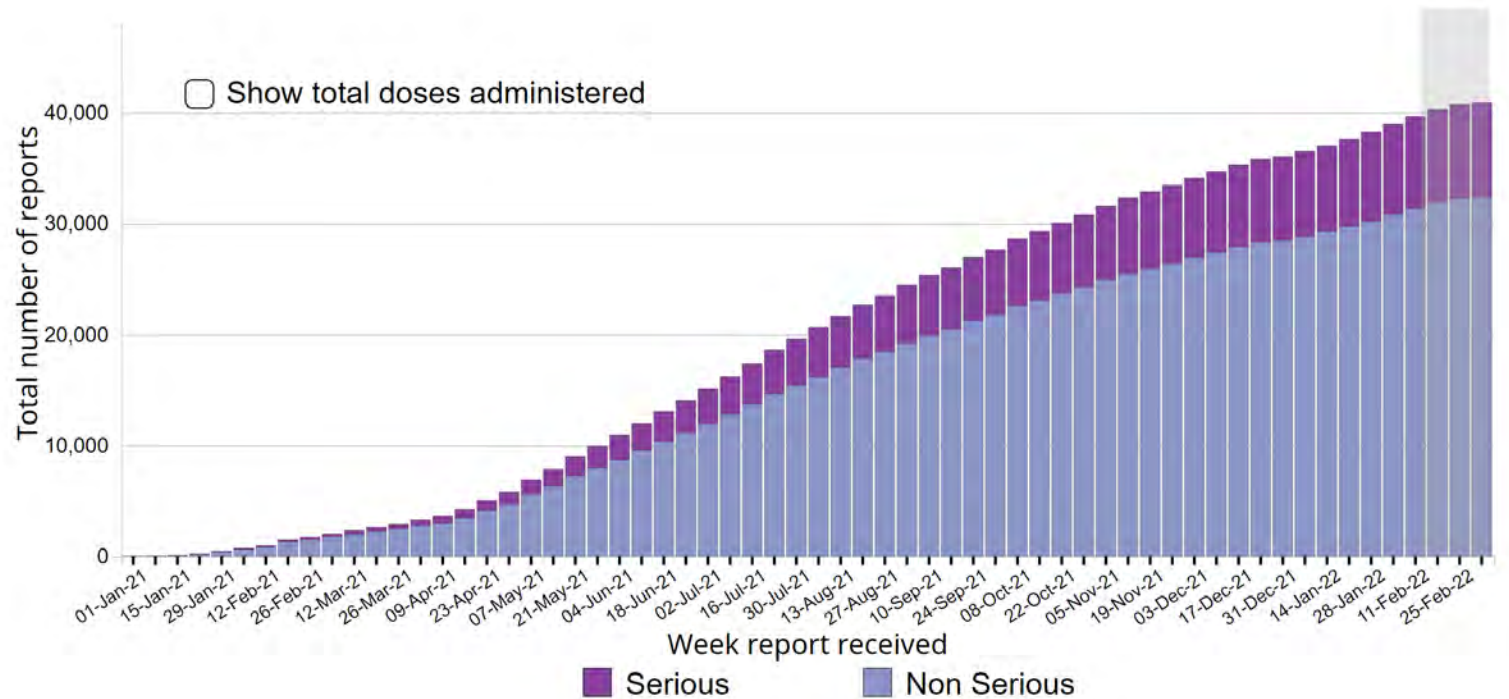
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Figure 1. of COVID-19 vaccine adverse event reports for and total doses administered per week up to and including March 4, 2022 (n=40,891)

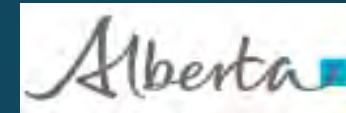
Notes: Although the cumulative number of adverse event reports continues to increase over time, so does the number of doses administered. Up to and including March 4, all adverse event reports represented 0.050% of all doses administered.



<https://health-infobase.canada.ca/covid-19/vaccine-safety/#seriousNonSerious>

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<https://www.youtube.com/user/dksdata/>

<https://rumble.com/user/dksdata/>

<https://www.bitchute.com/channel/84TyFCzLhbGG/>

<https://www.linkedin.com/in/dave-dickson-DKSDATA>

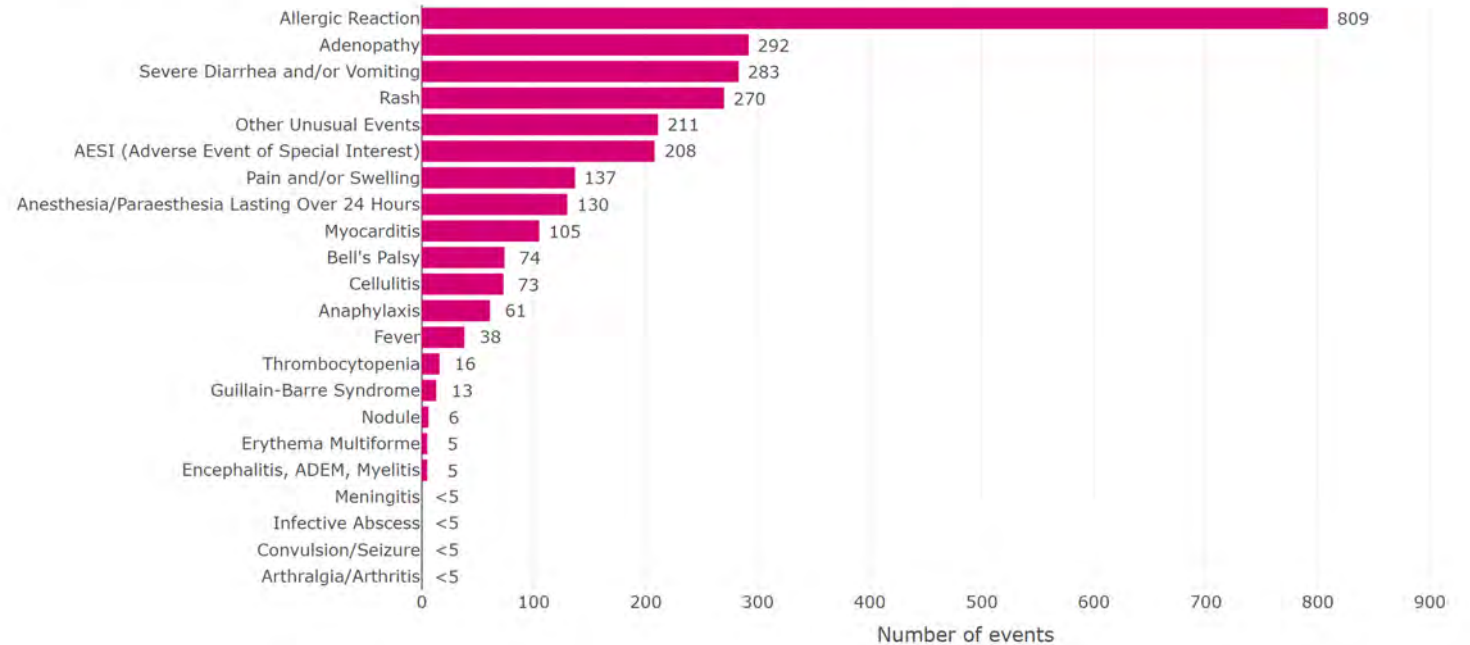
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Adverse Events Following Immunization (AEFI)

- **2,625** adverse events following immunization (AEFI) have been reported to Alberta Health. This represents **2,530** people, and **2,746** symptoms.
 - **1,684** related to Pfizer
 - **687** related to Moderna
 - **218** related to AstraZeneca
- There have been **5,412** vaccine refusals and **8,427** contraindications to receiving the vaccine



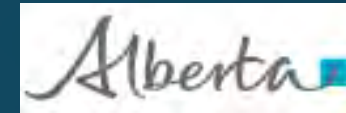
Number of adverse events following immunization (AEFI) by condition reported in Alberta

Note: Information is collected on individuals and reported to Alberta Health when an AEFI is confirmed. One AEFI report can have multiple events

<https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#vaccinations>

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Adverse Events Following Immunization (AEFI)

Episode 3 – Weighed & Measured

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DESCRIPTION
The monitoring of adverse events following immunization (AEFI) involving vaccines and biologicals administered in Alberta is an important evaluation component of the provincial immunization program. This document has been developed specifically for COVID-19 vaccine AEFI active surveillance. Active AEFI surveillance for COVID-19 vaccine in Alberta involves a collaboration between Alberta Health, Alberta Health Services Provincial AEFI Team, and the Canadian National Vaccine Safety Network (CANVAS).

UPDATED
February 25, 2022

TAGS
COVID-19 COVID-19 pandemic COVID-19 vaccine immunization immunization policy public health emergencies vaccine policy vaccines

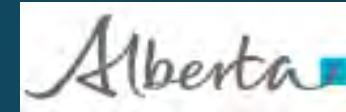
RESOURCES

- [COVID-19 vaccine : active surveillance and reporting of adverse events following immunization \(AEFI\) \[February 25, 2022\]](#)
24 pages
MORE INFORMATION DOWNLOAD
DOWNLOADS: 48
- [\[SUPERSEDED\] - COVID-19 vaccine : active surveillance and reporting of adverse events following immunization \(AEFI\) \[December 15, 2021\]](#)
23 pages
MORE INFORMATION DOWNLOAD
DOWNLOADS: 734
- [\[SUPERSEDED\] - COVID-19 vaccine : active surveillance and reporting of adverse events following immunization \(AEFI\) \(Revised: July 15, 2021\)](#)
23 pages
MORE INFORMATION DOWNLOAD
DOWNLOADS: 2723
- [\[SUPERSEDED\] - COVID-19 vaccine : active surveillance and reporting of adverse events following immunization \(AEFI\) \(Revised: June 15, 2021\)](#)
23 pages
MORE INFORMATION DOWNLOAD
DOWNLOADS: 1065
- [\[SUPERSEDED\] - COVID-19 vaccine : active surveillance and reporting of adverse events following immunization \(AEFI\) \(April 27, 2021\)](#)
21 pages
MORE INFORMATION DOWNLOAD
DOWNLOADS: 1458
- [\[SUPERSEDED\] - COVID-19 vaccine : active surveillance and reporting of adverse events following immunization \(AEFI\) \(February 4, 2021\)](#)
21 pages
MORE INFORMATION DOWNLOAD
DOWNLOADS: 1766
- [\[SUPERSEDED\] - COVID-19 vaccine : active surveillance and reporting of adverse events following immunization \(AEFI\) \(December 2020\)](#)
21 pages
MORE INFORMATION DOWNLOAD
DOWNLOADS: 1241

<https://open.alberta.ca/publications/covid-19-vaccine-aeft>

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Adverse Events Following Immunization (AEFI)

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

<https://twitter.com/dksdata/>

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 [SUPERSEDED] - COVID-19 vaccine : active surveillance and reporting of adverse events following immunization (AEFI) (December 2020)

 MORE INFORMATION

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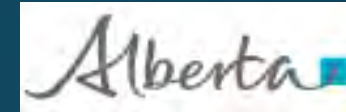
DOWNLOADS: 1241

First Published by Alberta Health in December 2020.

Ranging from 21 pages to 24 pages.

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Adverse Events Following Immunization (AEFI)

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 COVID-19 vaccine : active surveillance and reporting of adverse events following immunization (AEFI)
[February 25, 2022]

 MORE INFORMATION

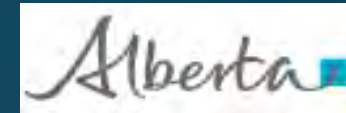
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Revised 7 times up to February 2022

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Adverse Events Following Immunization (AEFI)

References the AEFI Policy for Immunization providers

Published 10 times since 2015, 4 of which were specifically for COVID vaccines.

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<https://dksdata.com/COVID19>

<https://twitter.com/dksdata/>

<https://www.youtube.com/user/dksdata/>

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<https://www.bitchute.com/channel/84TyFCzLhbGG/>

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<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

RESOURCES	
Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (January 2022)	44 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (December 2021)	44 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (July 2021)	44 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (January 2021)	44 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (October 2019)	43 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (April 2019)	43 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (December 2018)	39 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (July 2018)	48 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (December 2016)	48 pages
[SUPERSEDED] - Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers (February 2015)	43 pages

<https://open.alberta.ca/publications/ae-fi-policy-for-alberta-immunization-providers>

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Adverse Events Following Immunization (AEFI)

This references the WHO Document on
Adverse Events of Special Interest (AESI)

https://www.who.int/vaccine_safety/committee/Module_AESI.pdf
(33 pages)

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

<https://twitter.com/dksdata/>

<https://www.youtube.com/user/dksdata/>

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COVID-19 Vaccines: Safety Surveillance Manual

**Module: Establishing active surveillance
systems for adverse events of special
interest during COVID-19 vaccine
introduction**

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The Task Force
for Global Health
Founded: 1984

Adverse Events Following Immunization (AEFI)

Which in turn references the Brighton Collaboration reference document, last updated December 2020.

https://brightoncollaboration.us/wp-content/uploads/2021/01/SO2_D2.1.2_V1.2_COVID-19_AESI-update-23Dec2020-review_final.pdf
(73 pages)

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

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<https://www.youtube.com/user/dksdata/>

<https://rumble.com/user/dksdata/>

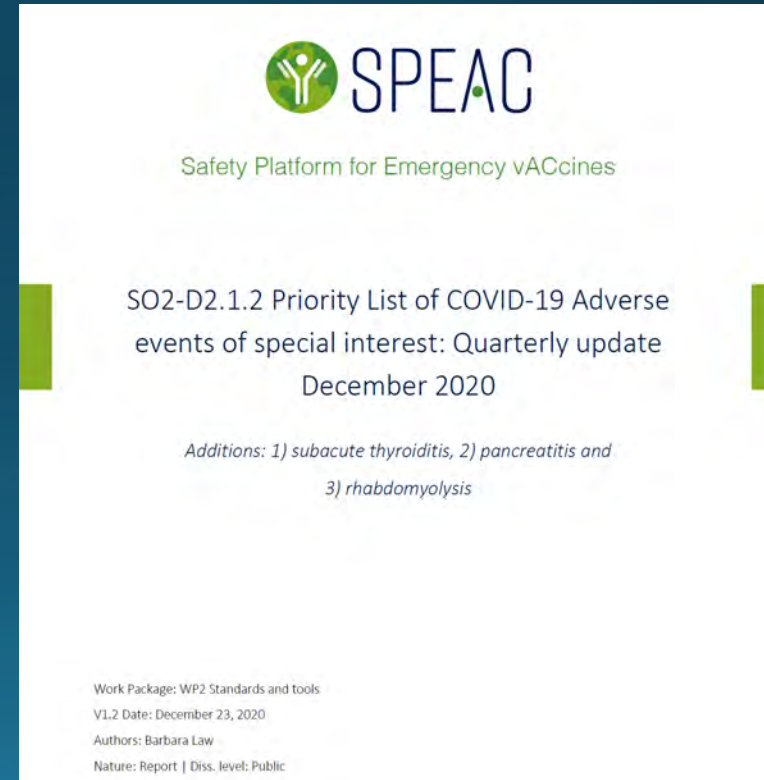
<https://www.bitchute.com/channel/84TyFCzLhbGG/>

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<https://www.facebook.com/dksdata>

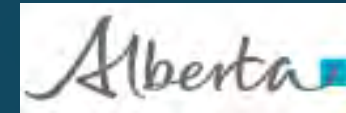
<https://www.facebook.com/DavidandKarenD/>



<https://www.taskforce.org/>
<https://brightoncollaboration.us/>

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Adverse Events Following Immunization (AEFI)

Once all of that is completed...
we get to a form that can only be filled in by a health care practitioner.

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<https://www.youtube.com/user/dksdata/>

<https://rumble.com/user/dksdata/>

<https://www.bitchute.com/channel/84TyFCzLhbGG/>

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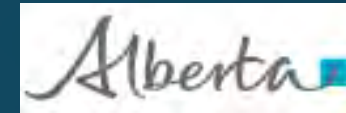
<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

<https://survey.albertahealthservices.ca/TakeSurvey.aspx?SurveyID=mlK33n32l#>

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Before the Adverse Event – Informed Consent

Form 21765 - [Consent for COVID-19 Immunization \(albertahealthservices.ca\)](https://www.albertahealthservices.ca/frm-21765.pdf)

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

<https://twitter.com/dksdata/>

<https://www.youtube.com/user/dksdata/>

<https://rumble.com/user/dksdata/>

<https://www.bitchute.com/channel/84TyFCzLhbGG/>

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<https://www.researchgate.net/profile/David-Dickson-7>

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Alberta Health Services **Consent for COVID-19 Immunization**

For use at Alberta Health Services (AHS) immunization programs. Use this form when a parent or alternate decision-maker is **not** able to be with the person being immunized at an AHS immunization service. An alternate decision-maker could be an agent, guardian, specific decision-maker or co-decision-maker. The parent or alternate decision-maker should **complete this form** and **send it** with the person being immunized, to the AHS immunization service. For alternate decision-makers – please also send a copy of documents to show that you are authorized to be the alternate decision-maker.

Personal information for the person being immunized

Name (Last, First, Middle)	Date of Birth (dd-Mon-yyyy)
Personal Health Number (PHN)	Gender

Health information for the person being immunized (if you need more space, use the other side of this form)

Does this person have any allergies, including allergies to any vaccine, medicine, or food? No Yes
If yes, describe

Does this person have any chronic illness? (List all if more than one) No Yes
If yes, describe

Has this person ever had capillary leak syndrome? No Yes

Has this person ever had immune thrombocytopenia? No Yes

If this person is under age 18 years, have they ever had multisystem inflammatory syndrome (MIS-C)?
 No Yes Not applicable

Is this person taking any medicine? No Yes If yes, describe

Is this person pregnant? No Yes Is this person breastfeeding? No Yes

Has this person had COVID-19 vaccine before? No Yes If yes, when?

Has this person ever had a side effect from COVID-19 immunization? No Yes
If yes, describe

Has this person had myocarditis or pericarditis within 6 weeks of getting a COVID-19 vaccine? No Yes

Has this person had a COVID-19 infection in the last 90 days? No Yes ▼
If yes, did this person get medicine to treat their COVID-19 infection? No Yes

I confirm that I have read the attached COVID-19 vaccine information. I know about and understand the risks, benefits, and common side effects of this vaccine. Any questions I may have had about this person getting this vaccine have been answered by calling the local public health office or Health Link at 811. I understand the information I have been given. I understand this consent is for all doses of the vaccine. I will contact the local public health office or the healthcare provider giving the COVID-19 vaccine if this person:

- has any changes to their health before getting any dose of the COVID-19 vaccine
- has a severe or unusual side effect after any dose of the COVID-19 vaccine (other than the expected side effects listed on the COVID-19 vaccine information sheet)

I consent to this person getting the (only select one):

Pfizer-BioNTech (Comirnaty) mRNA COVID-19 vaccine (for ages 5 years and older)

Moderna (SpikeVax) mRNA COVID-19 vaccine (for ages 12 years and older)

Either the Pfizer-BioNTech (Comirnaty) or Moderna (SpikeVax) mRNA COVID-19 vaccine (Depending which vaccine is available for this person at the time of their immunization)

AstraZeneca (Vaxzevria)/COVISHIELD viral vector-based COVID-19 vaccine (for ages 18 years and older)

Janssen (Johnson & Johnson) viral vector-based COVID-19 vaccine (for ages 18 years and older)

I understand that I may withdraw this consent at any time by calling the local public health office or healthcare provider giving the COVID-19 vaccine.

I confirm that I have the legal authority to consent to this immunization:

Printed name of person giving consent	Daytime phone	Other phone
---------------------------------------	---------------	-------------

Relationship to person:

Parent (with legal authority to consent) Guardian/Legal representative Agent

Co-decision-maker Specific decision-maker

Signature of person giving consent: _____ Date (dd-Mon-yyyy)

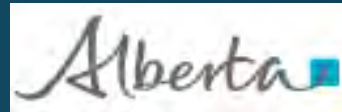
Alberta Health Services collects health information according to Section 20 of the Health Information Act (HIA). This information is used to provide health services, determine eligibility for health services, or to carry out any other purpose authorized by the HIA. If you have any questions about this, please ask the healthcare provider giving the immunization or contact your local public health office. If you do not know your local public health office, call Health Link at 811 to get this information.

21765 (Rev2022-03) Page 1 of 2 (Side A)

<https://www.albertahealthservices.ca/frm-21765.pdf>

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Before the Adverse Event – Informed Consent
Form 21765 - Consent for COVID-19 Immunization (albertahealthservices.ca)

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

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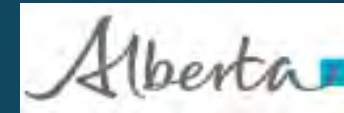
<https://www.facebook.com/dksdata>

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<https://www.albertahealthservices.ca/frm-21765.pdf>

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Before the Adverse Event – Informed Consent

Form 21765 - Consent for COVID-19 Immunization ([albertahealthservices.ca](https://www.albertahealthservices.ca))

Episode 3 – Weighed & Measured

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<https://rumble.com/user/dksdata/>

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<https://www.linkedin.com/in/dave-dickson-DKSDATA>

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Alberta Health Services IMMUNIZATION ImmunizeAlberta.ca

COVID-19 vaccines - mRNA

Immunization protects you from disease. Get protected, get immunized.

- Vaccines make your immune system stronger. They build antibodies to help prevent diseases.
- Immunization is safe. It is much safer to get immunized than to get this disease.

What are COVID-19 vaccines?
COVID-19 vaccines protect against the SARS-CoV-2 virus (also known as COVID-19). The virus causes an infection in the lungs and airways and is a type of respiratory illness. In some cases, the infection can cause problems with other organs or other parts of the body. Go to alhs.ca/covid19 to learn more about COVID-19.

The following COVID-19 vaccines are approved for use in Canada:

- mRNA vaccines: Pfizer-BioNTech (Comirnaty) and Moderna (Spikevax)
- viral vector-based vaccines: AstraZeneca (Vaxzevna/COVISHIELD) and Johnson & Johnson
- protein-based vaccine: Novavax (Navaxovid)
- plant-based vaccine: Medicago (Coviflex)

The mRNA and viral vector-based vaccines are available in Alberta. For information about the viral vector-based vaccines, read the vaccine information on immunizealberta.ca.

To learn about how COVID-19 vaccines work, visit canada.ca/en/health-care/active/canadian-health-care/health-care-providers/19-covid-19-vaccines-treatments/vaccines.

Who should get an mRNA COVID-19 vaccine?
Everyone is at risk of COVID-19. You should get an mRNA COVID-19 vaccine if you are age 5 years or older. COVID-19 vaccines are free.

Do I need a vaccine if I have already had COVID-19?
If you have already had COVID-19, it is not yet known how long your protection will last or how much protection you will have against variants. It is important to get a COVID-19 vaccine even if you have already had the virus.

The vaccine may give you better protection if you wait a while after having COVID-19 and then get a vaccine. How long to wait depends on your health history and whether or not you have already had doses of COVID-19 vaccine.

If you have had COVID-19 infection in the past 90 days, check with your healthcare provider about when to get a COVID-19 vaccine.

What if my child is getting a COVID-19 vaccine?
Consent for a COVID-19 vaccine for children under age 18 years is provided by a parent or guardian. If a parent or guardian consented at the appointment, they can give consent in writing using the consent form at alhs.ca/vaccineunder18. In some cases, children under age 18 years may be able to give their own consent.

How well do COVID-19 vaccines work?
If you are healthy and get all the doses you need, these vaccines give you very good protection against COVID-19.

Two doses of the mRNA vaccines give more protection than 2 doses of the AstraZeneca/COVISHIELD vaccine or 1 dose of the Johnson vaccine.

All the vaccines work very well to lower your risk of getting seriously ill and of needing to be in the hospital.

Even if you have had a COVID-19 vaccine, it is still important to follow public health messages to prevent the virus from spreading. Go to alhs.ca/covid19 for the most up-to-date information.

How many doses of mRNA COVID-19 vaccine do I need?
Primary series
You need at least 2 doses of an mRNA COVID-19 vaccine to be considered fully immunized. These doses are called your primary series.
For some people, 2 doses may not give enough protection. You may need a third dose to complete your primary series if you have a health problem that weakens your immune system. For example:
• You have had or will have an organ or stem cell transplant.
• You have kidney disease and need dialysis.
• You have acquired immunodeficiency syndrome (AIDS)
• You take certain medicines that weaken your immune system
Studies have shown that a third dose may provide better protection to adults with a weak immune system. In children with a weak immune system, a third dose may also provide better protection, but research is still happening to learn more.

Booster doses
If you are age 12 years or older, you can get an extra (booster) dose 5 months after your primary series. A booster dose will give you more protection. You should get a booster dose if you are age 18 years or older. You should also get a booster dose if you are age 12 to 17 years and you:
• have certain health conditions (such as you have diabetes, you have a weak immune system, or you have had, lung, spleen, or liver problems)
• are pregnant
• have a lot of extra weight
• are Indigenous
• live in a group setting such as a group home or long-term care centre
Go to alberta.ca/covid19-vaccine to book an appointment for your booster dose.

Doses for travel
If you are travelling outside of Canada and you have had only viral vector-based vaccines or different vaccines for your first 2 doses, you may be able to get additional doses. This is only if your destination requires you to have a certain COVID-19 vaccine series.

Can I get an mRNA COVID-19 vaccine if I am pregnant or breastfeeding?
Yes, you can get an mRNA COVID-19 vaccine if you are pregnant or breastfeeding. Research shows that mRNA vaccines are the safest type of COVID-19 vaccines to get during pregnancy.
When you are pregnant, you have a higher risk of getting very sick from COVID-19. Getting a COVID-19 vaccine lowers your risk of getting seriously ill from the virus.
If you are pregnant or breastfeeding and have questions about getting a COVID-19 vaccine, talk to your healthcare provider.

Where can I get a COVID-19 vaccine?
Go to alhs.ca/covid19-vaccine to find out where and when you can get a COVID-19 vaccine.

Are there side effects from mRNA COVID-19 vaccines?
There can be side effects from mRNA COVID-19 vaccines, but they tend to be mild and go away in a few days. Side effects may include:
• redness, swelling, or feeling sore where you had the needle
• feeling tired or have a headache
• a fever or chills
• body aches or sore joints
• feeling sick to your stomach (nausea), vomiting (throwing up), or loose stool (diarrhea)
• swollen lymph nodes
• a reduced sense of touch or a feeling of numbness
• feeling dizzy
• a rash or hives

Current information shows that there is similar risk of side effects after a first, second, or additional dose of an mRNA COVID-19 vaccine. Research continues to find out more about the risk of side effects after additional doses.
It is important to stay at the clinic for 15 minutes after your vaccine. Some people may have a rare but serious allergic reaction called anaphylaxis. If anaphylaxis happens, you will get medicine to treat the symptoms.
It is rare to have a serious side effect. Call Health Link at 811 to report any serious or unusual side effects.

What rare events have been reported after getting an mRNA COVID-19 vaccine?
There have been very rare reports of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the lining around the heart) within 7 days of getting either the Pfizer-BioNTech or the Moderna vaccine. Most reported cases were mild and got better with treatment.
The inflammation can cause shortness of breath, chest pain or pressure, or a very fast or abnormal heart rate. Get medical help right away if you have any of those symptoms.
These rare events were reported more commonly:
• after the second dose
• in those age 12 to 29 years
• in males
The Moderna vaccine has a higher risk of myocarditis and pericarditis than the Pfizer-BioNTech vaccine, especially for those age 12 to 29 years getting their primary series. Research is still being done to find out more about the risk of these events after a third dose or a booster dose.
It is best for those age 12 to 29 years to get the Pfizer-BioNTech vaccine. It has a lower risk of myocarditis and pericarditis at that age group.
Children age 5 to 11 years may have a lower risk of these events after their primary series than people age 12 to 29 years. But there is still more to learn about these risks in children, including the risk of these events after a third dose.
It is not known if having a history of myocarditis or pericarditis puts you at higher risk of having these rare events after a COVID-19 vaccine. Talk to your doctor before you get a dose of COVID-19 vaccine if:
• You had myocarditis or pericarditis within 6 weeks of getting a COVID-19 vaccine.
• You have a history of myocarditis or pericarditis and you have questions about getting a COVID-19 vaccine.
Research is happening to learn more about the risks of these rare events. Your risk of getting seriously ill from COVID-19 is much higher than your risk of having a rare event after these vaccines.
Go to alhs.ca/covid19-vaccine - Frequently Asked Questions on alhs.ca/covid19-vaccine/Pages/17399.aspx for more information.

How can I manage side effects?

- To help with soreness and swelling, put a cool, wet cloth over the area where you had the needle.
- Take the medicine to help with a fever or pain. Check with your doctor or pharmacist if you are not sure what medicine or dose to take. Follow the directions on the package.
- Children under the age of 18 years should not take aspirin because it can cause serious health problems.
- Some people with health problems, such as a weak immune system, must call their doctor if they get a fever. If you have been told to do this, call your doctor even if you think the fever is from the vaccine.

What vaccine will I get for my primary series?
Here are the recommended vaccines by age group:
• Age 5 to 11 years: You will get the Pfizer-BioNTech mRNA vaccine.
• Age 12 to 17 years: You can get either the Pfizer-BioNTech or Moderna mRNA vaccine.
• Age 18 years and older: You can get either the Pfizer-BioNTech or Moderna mRNA vaccine. If you cannot get or do not want an mRNA vaccine, you can get a viral vector-based vaccine.

If you have a weak immune system, it is best to get an mRNA vaccine. Research has shown mRNA vaccines provide the best protection for this group.

If you are age 12 to 29 years, it is best to get the Pfizer-BioNTech vaccine. This vaccine has a lower risk of myocarditis and pericarditis for this age group. Usually you get the same vaccine for all your doses. If your first-dose vaccine is not available or you cannot have it, you can get a different COVID-19 vaccine for your next dose.
Whichever vaccine you get to complete your primary series protects you against COVID-19.
Go to alhs.ca/covid19-vaccine for more information.

What vaccine will I get for my booster or additional dose?
You will get an mRNA vaccine for any booster or additional doses.
If you are age 12 to 29 years, it is recommended to get the Pfizer-BioNTech vaccine for your booster dose. There is more to learn about the risk of myocarditis and pericarditis after getting a booster dose. But with the primary series, we have seen that the Pfizer-BioNTech vaccine has a lower risk of these rare events in those age 12 to 29 years.
If you cannot get or do not want an mRNA vaccine, you can get the AstraZeneca/COVISHIELD vaccine if you are age 18 years or older.
The mRNA vaccines are licensed for booster doses for people age 18 years or older who completed their primary series at least 6 months ago. In other cases, the vaccine is not licensed for more than 2 doses. But vaccine experts support this in certain situations. This is called "off-label use."
Getting more than 2 doses of a COVID-19 vaccine is off-label use if:
• You are age 5 to 17 years.
• You got a dose sooner than 6 months after completing your primary series.
• You get a viral vector-based vaccine as a third dose, booster dose, or additional dose.

Talk to your healthcare provider about which vaccine you can get and when to have your dose.

What if I had or am getting another type of vaccine?
If you are age 12 years or older, you can get any vaccine at the same time as, any time before, or any time after a COVID-19 vaccine.
Children under age 12 years should wait at least 14 days after getting a COVID-19 vaccine before getting another vaccine. If they get another vaccine first, they should wait 14 days before getting a COVID-19 vaccine. This helps you watch for any side effects from the COVID-19 vaccine. However, if your child needs another vaccine on the same day or within 14 days before or after the COVID-19 vaccine, there are no safety concerns. Both vaccines will still work to protect your child. This may happen if your child is due to have a routine school immunization within 14 days of having the COVID-19 vaccine. Talk to your healthcare provider if you have questions about your child's vaccine schedule.

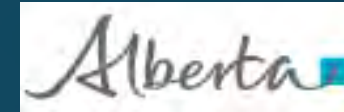
Who should not get an mRNA COVID-19 vaccine?
You may not be able to get an mRNA COVID-19 vaccine if you:
• have an allergy to any part of the vaccine
• had a severe (serious) or unusual side effect after this vaccine or one like it
• are under age 5 years
Check with your doctor or a public health nurse before you get an mRNA COVID-19 vaccine.
Be sure to talk to your doctor before you get an mRNA COVID-19 vaccine, if you:
• have a weak immune system (because of a medicine you take or a health problem)
• have an autoimmune disorder (like rheumatoid arthritis or lupus)
• have had a stem cell or organ transplant
• have a history of myocarditis or pericarditis within 6 weeks of getting a dose of COVID-19 vaccine
• have had COVID-19 or have been treated for COVID-19 in the last 90 days
• are under age 18 years and have a history of multisystem inflammatory syndrome (MIS-C).
Always tell your healthcare provider if you have allergies or if you have had a side effect from a vaccine in the past.

For More Information
Call Health Link at 811
Go to MyHealth Alberta.ca
Go to ImmunizeAlberta.ca
Go to alhs.ca/covid19-vaccine

<https://www.albertahealthservices.ca/frm-21765.pdf>

LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON



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<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

The mRNA and viral vector-based vaccines are available in Alberta. For information about the viral vector-based vaccines, read the vaccine information on [ImmunizeAlberta.ca](https://immunizealberta.ca).

To learn about how COVID-19 vaccines work, visit canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/vaccines.

Who should get an mRNA COVID-19 vaccine?

Everyone is at risk of COVID-19. You should get an mRNA COVID-19 vaccine if you are age 5 years or older. COVID-19 vaccines are free.

Do I need a vaccine if I have already had COVID-19?

If you have already had COVID-19, it is not yet known how long your protection will last or how much protection you will have against variants. It is important to get a COVID-19 vaccine even if you have already had the virus.

The vaccine may give you better protection if you wait a while after having COVID-19 and then get a vaccine. How long to wait depends on your health history and whether or not you have already had doses of COVID-19 vaccine.

If you have had COVID-19 infection in the past 90 days, check with your healthcare provider about when to get a COVID-19 vaccine.

What if my child is getting a COVID-19 vaccine?

Consent for a COVID-19 vaccine for children under age 18 years is provided by a parent or guardian. If a parent or guardian cannot be at the appointment, they can give consent in writing using the consent form at ahs.ca/vaccineUnder18. In some cases, children under age 18 years may be able to give their own consent.

How well do COVID-19 vaccines work?

If you are healthy and get all the doses you need, these vaccines give you very good protection against COVID-19.

Two doses of the mRNA vaccines give more protection than 2 doses of the AstraZeneca/COVISHIELD vaccine or 1 dose of the Janssen vaccine.

All the vaccines work very well to lower your risk of getting seriously ill and of needing to be in the hospital.

Even if you have had a COVID-19 vaccine, it is still important to follow public health measures to prevent the virus from spreading. Go to ahs.ca/covid for the most up-to-date information.

- have certain immune
- are pregnant
- have a chronic
- are Indigenous
- live in a group home
- Go to albertahealthservices.ca
- Doses for children
- If you are taking other vaccines or COVID-19
- additional COVID-19
- Can I get a COVID-19 vaccine while breastfeeding?
- Yes, you can get a COVID-19 vaccine while breastfeeding.
- COVID-19 vaccine is safe for breastfeeding mothers.
- When you get a COVID-19 vaccine, you should wear a mask and avoid close contact with others.
- Getting a COVID-19 vaccine will not affect your breastfeeding.
- If you are pregnant, you should get a COVID-19 vaccine.
- Where can I get a COVID-19 vaccine?
- Go to ahs.ca/covid for more information.
- Are there any side effects from COVID-19 vaccines?
- There can be mild and go
- redness, swelling, and pain at the injection site.
- feeling tired, headache, muscle aches, and fever.
- a fever or chills.
- body aches.
- feeling sick (nausea, vomiting, or diarrhea).
- swollen lymph nodes.
- a reduced sense of smell or taste.

Current information shows that there is similar risk of side effects after a first, second, or additional dose of an mRNA COVID-19 vaccine. Research continues to find out more about the risk of side effects after additional doses. It is important to stay at the clinic for 15 minutes after your vaccine. Some people may have a rare but serious allergic reaction called anaphylaxis. If anaphylaxis happens, you will get medicine to treat the symptoms. It is rare to have a serious side effect. Call Health Link at 811 to report any serious or unusual side effects.

What rare events have been reported after getting an mRNA COVID-19 vaccine?

There have been very rare reports of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the lining around the heart) within 7 days of getting either the Pfizer-BioNTech or the Moderna vaccine. Most reported cases were mild and got better with treatment. The inflammation can cause shortness of breath, chest pain or pressure, or a very fast or abnormal heart rate. Get medical help right away if you have any of those symptoms. These rare events were reported more commonly:

- after the second dose
- in those age 12 to 29 years
- in males

The Moderna vaccine has a higher risk of myocarditis and pericarditis than the Pfizer-BioNTech vaccine, especially for those age 12 to 29 years getting their primary series. Research is still being done to find out more about the risk of these events after a third dose or a booster dose.

It is best for those age 12 to 29 years to get the Pfizer-BioNTech vaccine. It has a lower risk of myocarditis and pericarditis in that age group. Children age 5 to 11 years may have a lower risk of these events after their primary series than people age 12 to 29 years. But there is still more to learn about these risks in children, including the risk of these events after a third dose. It is not known if having a history of myocarditis or pericarditis puts you at higher risk of having these rare events after a COVID-19 vaccine. Talk to your doctor before you get a dose of COVID-19 vaccine. If:

- You had myocarditis or pericarditis within 6 weeks of getting a COVID-19 vaccine.
- You have a history of myocarditis or pericarditis and you have questions about getting a COVID-19 vaccine.

Research is happening to learn more about the risks of these rare events. Your risk of getting seriously ill from COVID-19 is much higher than your risk of having a rare event after these vaccines.

Go to ahs.ca/covid for more information.

How can I manage side effects?

- To help with soreness and swelling, put a cool, wet cloth over the area where you had the needle.
- There is medicine to help with a fever or pain. Check with your doctor or pharmacist if you are not sure what medicine or dose to take. Follow the directions on the package.
- Children under the age of 18 years should not take aspirin because it can cause serious health problems.
- Some people with health problems, such as a weak immune system, must call their doctor if they get a fever. If you have been told to do this, call your doctor even if you think the fever is from the vaccine.

What vaccine will I get for my primary series?

Here are the recommended vaccines by age group:

- Age 5 to 11 years: You will get the Pfizer-BioNTech mRNA vaccine.
- Age 12 to 17 years: You can get either the Pfizer-BioNTech or Moderna mRNA vaccine.
- Age 18 years and older: You can get either the Pfizer-BioNTech or Moderna mRNA vaccine. If you cannot get or do not want an mRNA vaccine, you can get a viral vector-based vaccine.

If you have a weak immune system, it is best to get an mRNA vaccine. Research has shown mRNA vaccines provide the best protection for the group.

If you are age 12 to 29 years, it is best to get the Pfizer-BioNTech vaccine. This vaccine has a lower risk of myocarditis and pericarditis for the age group. Usually you get the same vaccine for all your doses. If your first-dose vaccine is not available or you cannot have it, you can get a different COVID-19 vaccine for your next dose. Whichever vaccine you get to complete your primary series protects you against COVID-19. Go to ahs.ca/covid for more information.

What vaccine will I get for my booster or additional dose?

You will get an mRNA vaccine for any booster or additional doses. If you are age 12 to 29 years, it is recommended to get the Pfizer-BioNTech vaccine for your booster dose. There is more to learn about the risk of myocarditis and pericarditis after getting a booster dose. But with the primary series, we have seen that the Pfizer-BioNTech vaccine has a lower risk of these rare events in those age 12 to 29 years. If you cannot get or do not want an mRNA vaccine, you can get the AstraZeneca/COVISHIELD vaccine if you are age 18 years or older. The mRNA vaccines are licensed for booster doses for people age 18 years or older who completed their primary series at least 6 months ago. In other cases, the vaccine is not licensed for more than 2 doses. But vaccine experts support this in certain situations. This is called "off-label use." Getting more than 2 doses of a COVID-19 vaccine is off-label use if:

- You are age 5 to 17 years.
- You got a dose sooner than 6 months after completing your primary series.
- You got a viral vector-based vaccine as a third dose, booster dose, or additional dose.

Talk to your healthcare provider about which vaccine you can get and when to have your doses.

What if I had or am getting another type of vaccine?

If you are age 12 years or older, you can get any vaccine at the same time as, any time before, or any time after a COVID-19 vaccine. Children under age 12 years should wait at least 14 days after getting a COVID-19 vaccine before getting another vaccine. If they get another vaccine first, they should wait 14 days before getting a COVID-19 vaccine. This helps you watch for any side effects from the COVID-19 vaccine. However, if your child needs another vaccine on the same day or within 14 days before or after the COVID-19 vaccine, there are no safety concerns. Both vaccines will still work to protect your child. This may happen if your child is due to have a routine school immunization within 14 days of having the COVID-19 vaccine. Talk to your healthcare provider if you have questions about your child's vaccine schedule.

Who should not get an mRNA COVID-19 vaccine?

You may not be able to get an mRNA COVID-19 vaccine if you:

- have an allergy to any part of the vaccine
- had a severe (serious) or unusual side effect after this vaccine or one like it
- are under age 5 years

Check with your doctor or a public health nurse before you get an mRNA COVID-19 vaccine.

Be sure to talk to your doctor before you get an mRNA COVID-19 vaccine, if you:

- have a weak immune system (because of a medicine you take or a health problem)
- have an autoimmune disorder (like rheumatoid arthritis or lupus)
- have had a stem cell or organ transplant
- have a history of myocarditis or pericarditis within 6 weeks of getting a dose of COVID-19 vaccine
- have had COVID-19 or have been treated for COVID-19 in the last 90 days
- are under age 18 years and have a history of multisystem inflammatory syndrome (MIS-C).

Always tell your healthcare provider if you have allergies or if you have had a side effect from a vaccine in the past.

For More Information

Call Health Link at 811

Go to ImmunizeAlberta.ca

Go to MyHealthAlberta.ca

Go to ahs.ca/covid

Go to ahs.ca/covid

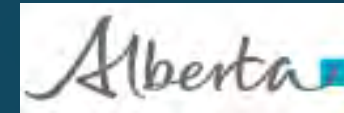
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<https://www.albertahealthservices.ca/frm-21765.pdf>

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<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

Get **How many doses of mRNA COVID-19 vaccine do I need?**

Primary series
You need at least 2 doses of an mRNA COVID-19 vaccine to be considered fully immunized. These doses are called your primary series.
For some people, 2 doses may not give enough protection. You may need a third dose to complete your primary series if you have a health problem that weakens your immune system. For example:

- You have had or will have an organ or stem cell transplant.
- You have kidney disease and need dialysis.
- You have acquired immunodeficiency syndrome (AIDS).
- You take certain medicines that weaken your immune system.

Studies have shown that a third dose may provide better protection to adults with a weak immune system. In children with a weak immune system, a third dose may also provide better protection, but research is still happening to learn more.

Booster doses
If you are age 12 years or older, you can get an extra (booster) dose 5 months after your primary series. A booster dose will give you more protection. You should get a booster dose if you are age 18 years or older. You should also get a booster dose if you are age 12 to 17 years and you:

- have certain health conditions (such as you have diabetes, you have a weak immune system, or you have heart, lung, spleen, or liver problems)
- are pregnant
- have a lot of extra weight
- are Indigenous
- live in a group setting such as a group home or long-term care centre

Go to alberta.ca/covid-19-vaccine to book an appointment for your booster dose.

Doses for travel
If you are travelling outside of Canada and you have had only viral vector-based vaccines or different vaccines for your first 2 doses, you may be able to get additional doses. This is only if your destination requires you to have a certain COVID-19 vaccine series.

Can I get an mRNA COVID-19 vaccine if I am pregnant or breastfeeding?
Yes, you can get an mRNA COVID-19 vaccine if you are pregnant or breastfeeding. Research shows that mRNA vaccines are the safest type of COVID-19 vaccines to get during pregnancy.

Current information shows that there is similar risk of side effects after a first, second, or additional dose of an mRNA COVID-19 vaccine. Research continues to find out more about the risk of side effects after additional doses. It is important to stay at the clinic for 15 minutes after your vaccine. Some people may have a rare but serious allergic reaction called anaphylaxis. If anaphylaxis happens, you will get medicine to treat the symptoms. It is rare to have a serious side effect. Call Health Link at 811 to report any serious or unusual side effects.

What rare events have been reported after getting an mRNA COVID-19 vaccine?
There have been very rare reports of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the lining around the heart) within 7 days of getting either the Pfizer-BioNTech or the Moderna vaccine. Most reported cases were mild and got better with treatment. The inflammation can cause shortness of breath, chest pain or pressure, or a very fast or abnormal heart rate. Get medical help right away if you have any of those symptoms. These rare events were reported more commonly:

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- You had myocarditis or pericarditis within 6 weeks of getting a COVID-19 vaccine.
- You have a history of myocarditis or pericarditis and you have questions about getting a COVID-19 vaccine.

Research is happening to learn more about the risks of these rare events. Your risk of getting seriously ill from COVID-19 is much higher than your risk of having a rare event after these vaccines. Go to alberta.ca/covid-19-vaccine - Frequently Asked Questions on alberta.ca/covid-19-vaccine for more information.

How can I manage side effects?

- To help with soreness and swelling, put a cool, wet cloth over the area where you had the needle.
- There is medicine to help with a fever or pain. Check with your doctor or pharmacist if you are not sure what medicine or dose to take. Follow the directions on the package.
- Children under the age of 18 years should not take aspirin because it can cause serious health problems.
- Some people with health problems, such as a weak immune system, must call their doctor if they get a fever. If you have been told to do this, call your doctor even if you think the fever is from the vaccine.

What vaccine will I get for my primary series?
Here are the recommended vaccines by age group:

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What vaccine will I get for my booster or additional dose?
You will get an mRNA vaccine for any booster or additional doses. If you are age 12 to 29 years, it is recommended to get the Pfizer-BioNTech vaccine for your booster dose. There is more to learn about the risk of myocarditis and pericarditis after getting a booster dose. But with the primary series, we have seen that the Pfizer-BioNTech vaccine has a lower risk of these rare events in those age 12 to 29 years. If you cannot get or do not want an mRNA vaccine, you can get the AstraZeneca/COVISHIELD vaccine if you are age 18 years or older. The mRNA vaccines are licensed for booster doses for people age 18 years or older who completed their primary series at least 6 months ago. In other cases, the vaccine is not licensed for more than 2 doses. But vaccine experts support this in certain situations. This is called "off-label use."

Getting more than 2 doses of a COVID-19 vaccine is off-label use if:

- You are age 5 to 17 years.
- You get a dose sooner than 6 months after completing your primary series.
- You get a viral vector-based vaccine as a third dose, booster dose, or additional dose.

Talk to your healthcare provider about which vaccine you can get and when to have your doses.

What if I had or am getting another type of vaccine?
If you are age 12 years or older, you can get any vaccine at the same time as, any time before, or any time after a COVID-19 vaccine. Children under age 12 years should wait at least 14 days after getting a COVID-19 vaccine before getting another vaccine. If they get another vaccine first, they should wait 14 days before getting a COVID-19 vaccine. This helps you watch for any side effects from the COVID-19 vaccine. However, if your child needs another vaccine on the same day or within 14 days before or after the COVID-19 vaccine, there are no safety concerns. Both vaccines will still work to protect your child. This may happen if your child is due to have a routine school immunization within 14 days of having the COVID-19 vaccine. Talk to your healthcare provider if you have questions about your child's vaccine schedule.

Who should not get an mRNA COVID-19 vaccine?
You may not be able to get an mRNA COVID-19 vaccine if you:

- have an allergy to any part of the vaccine
- had a severe (serious) or unusual side effect after this vaccine or one like it
- are under age 5 years

Check with your doctor or a public health nurse before you get an mRNA COVID-19 vaccine. Be sure to talk to your doctor before you get an mRNA COVID-19 vaccine, if you:

- have a weak immune system (because of a medicine you take or a health problem)
- have an autoimmune disorder (like rheumatoid arthritis or lupus)
- have had a stem cell or organ transplant
- have a history of myocarditis or pericarditis within 6 weeks of getting a dose of COVID-19 vaccine
- have had COVID-19 or have been treated for COVID-19 in the last 90 days
- are under age 18 years and have a history of multisystem inflammatory syndrome (MIS-C).

Always tell your healthcare provider if you have allergies or if you have had a side effect from a vaccine in the past.

For More Information

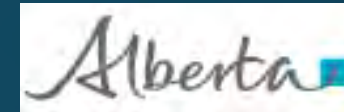
- Call Health Link at 811
- Go to immunizealberta.ca
- Go to myhealth.alberta.ca
- Go to alhs.ca/covid19vaccine

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<https://www.facebook.com/DavidandKarenD/>

Alberta Health Services IMMUNIZATION ImmunizeAlberta.ca

COVID-19 vaccines - mRNA

Immunization protects you from disease. Get protected, get immunized.

- Vaccines make your immune system stronger. They build antibodies to help prevent diseases.
- Immunization is safe. It is much safer to get immunized than to get this disease.

What are COVID-19 vaccines?
COVID-19 vaccines protect against the SARS-CoV-2 virus (also known as COVID-19). The virus causes an infection in the lungs and always and is a type of respiratory illness. In some cases, the infection can cause problems with other organs or other parts of the body. Go to alberta.ca/COVID19 to learn more about COVID-19.

The following COVID-19 vaccines are approved for use in Canada:

- mRNA vaccines: Pfizer-BioNTech (Comirnaty) and Moderna (SpikeVax)
- viral vector-based vaccines: AstraZeneca (Vaxzevna)/COVISHIELD and Janssen (Johnson & Johnson)
- protein-based vaccine: Novavax (Nuvaxovid)
- plant-based vaccine: Medicago (Covifenz)

The mRNA and viral vector-based vaccines are available in Alberta. For information about the viral vector-based vaccines, read the vaccine information on immunizeAlberta.ca.

To learn about how COVID-19 vaccines work, visit canada.ca/en/health-care/active/canadian-health-products/covid-19-link/entry/immunization-treatment/vaccines.

Who should get an mRNA COVID-19 vaccine?
Everyone is at risk of COVID-19. You should get an mRNA COVID-19 vaccine if you are age 5 years or older. COVID-19 vaccines are free.

Do I need a vaccine if I have already had COVID-19?
If you have already had COVID-19, it is not yet known how long your protection will last or how much protection you will have against variants. It is important to get a COVID-19 vaccine even if you have already had the virus.

The vaccine may give you better protection if you wait a while after having COVID-19 and then get a vaccine. How long to wait depends on your health history and whether or not you have already had doses of COVID-19 vaccine.

If you have had COVID-19 infection in the past 90 days, check with your healthcare provider about when to get a COVID-19 vaccine.

What if my child is getting a COVID-19 vaccine?
Consent for a COVID-19 vaccine for children under age 18 years is provided by a parent or guardian. If a parent or guardian cannot be at the appointment, they can give consent in writing using the consent form at alberta.ca/COVID19. In some cases, children under age 18 years may be able to give their own consent.

How well do COVID-19 vaccines work?
If you are healthy and get all the doses you need, these vaccines give you very good protection against COVID-19.

Two doses of the mRNA vaccines give more protection than 2 doses of the AstraZeneca/COVISHIELD vaccine or 1 dose of the Janssen vaccine.

All the vaccines work very well to lower your risk of getting seriously ill and of needing to be in the hospital.

Even if you have had a COVID-19 vaccine, it is still important to follow public health measures to prevent the virus from spreading. Go to alberta.ca/COVID19 for the most up-to-date information.

How many doses of mRNA COVID-19 vaccine do I need?
Primary series
You need at least 2 doses of an mRNA COVID-19 vaccine to be considered fully immunized. These doses are called your primary series.
For some people, 2 doses may not give enough protection. You may need a third dose to complete your primary series if you have a health problem that weakens your immune system. For example:
• You have had or will have an organ or stem cell transplant.
• You have kidney disease and need dialysis.
• You have acquired immunodeficiency syndrome (AIDS).
• You take certain medicines that weaken your immune system.
Studies have shown that a third dose may provide better protection to adults with a weak immune system. In children with a weak immune system, a third dose may also provide better protection, but research is still happening to learn more.

Booster doses
If you are age 12 years or older, you can get an extra (booster) dose 5 months after your primary series. A booster dose will give you more protection. You should get a booster dose if you are age 16 years or older. You should also get a booster dose if you are age 12 to 17 years and you:
• have certain health conditions (such as you have heart, lung, spleen, or liver problems) immune system, or you have heart, lung, spleen, or liver problems)
• are pregnant
• have a lot of extra weight
• are Indigenous
• live in a group setting such as a group home or long-term care centre
Go to alberta.ca/COVID19-vaccine to book an appointment for your booster dose.

Doses for travel
If you are travelling outside of Canada and you have had only viral vector-based vaccines or different vaccines for your first 2 doses, you may be able to get additional doses. This is only if your destination requires you to have a certain COVID-19 vaccine series.

Can I get an mRNA COVID-19 vaccine if I am pregnant or breastfeeding?
Yes, you can get an mRNA COVID-19 vaccine if you are pregnant or breastfeeding. Research shows that mRNA vaccines are the safest type of COVID-19 vaccines to get during pregnancy.
When you are pregnant, you have a higher risk of getting very sick from COVID-19. Getting a COVID-19 vaccine lowers your risk of getting seriously ill from the virus.
If you are pregnant or breastfeeding and have questions about getting a COVID-19 vaccine, talk to your healthcare provider.

Where can I get a COVID-19 vaccine?
Go to alberta.ca/COVID19-vaccine to find out where and when you can get a COVID-19 vaccine.

Are there side effects from mRNA COVID-19 vaccines?
There can be side effects from mRNA COVID-19 vaccines, but they tend to be mild and go away in a few days. Side effects may include:
• redness, swelling, or feeling sore where you had the needle
• feeling tired or having a headache
• a fever or chills
• body aches or sore joints
• feeling sick to your stomach (nausea), vomiting (throwing up), or loose stool (diarrhea)
• swollen lymph nodes
• a reduced sense of touch or a feeling of numbness
• looking dizzy
• a rash or hives

21765 (Rev 2022-03) Page 2 of 3 (Side A)

If you are age 12 to 29 years, it is best to get the Pfizer-BioNTech vaccine. This vaccine has a lower risk of myocarditis and pericarditis for this age group. Usually you get the same vaccine for all your doses. If your first-dose vaccine is not available or you cannot have it, you can get a different COVID-19 vaccine for your next dose.

Whichever vaccine you get to complete your primary series protects you against COVID-19.

Go to alberta.ca/seconddose for more information.

What vaccine will I get for my booster or additional dose?

You will get an mRNA vaccine for any booster or additional doses.

If you are age 12 to 29 years, it is recommended to get the Pfizer-BioNTech vaccine for your booster dose. There is more to learn about the risk of myocarditis and pericarditis after getting a booster dose. But with the primary series, we have seen that the Pfizer-BioNTech vaccine has a lower risk of these rare events in those age 12 to 29 years.

If you cannot get or do not want an mRNA vaccine, you can get the AstraZeneca/COVISHIELD vaccine if you are age 18 years or older.

The mRNA vaccines are licensed for booster doses for people age 18 years or older who completed their primary series at least 6 months ago. In other cases, the vaccine is not licensed for more than 2 doses. But vaccine experts support this in certain situations. This is called "off-label use."

Getting more than 2 doses of a COVID-19 vaccine is off-label use if:

- You are age 5 to 17 years.
- You get a dose sooner than 6 months after completing your primary series.
- You get a viral vector-based vaccine as a third dose, booster dose, or additional dose.

Talk to your healthcare provider about which vaccine you can get and when to have your doses.

What if I had or am getting another type of vaccine?

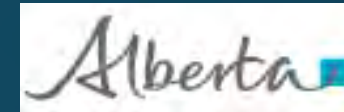
If you are age 12 years or older, you can get any vaccine at the same time as, any time before, or any time after a COVID-19 vaccine.

Children under age 12 years should wait at least 14 days after getting a COVID-19 vaccine before getting another vaccine. If they got another vaccine first, they should wait 14 days before getting a COVID-19 vaccine. This helps you watch for any side effects from the COVID-19 vaccine. However, if your child needs another

<https://www.albertahealthservices.ca/frm-21765.pdf>

LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON



Before the Adverse Event – Informed Consent

Form 21765 - [Consent for COVID-19 Immunization \(albertahealthservices.ca\)](https://www.albertahealthservices.ca/frm-21765.pdf)

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

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Alberta Health Services IMMUNIZATION ImmunizeAlberta.ca

COVID-19 vaccines - mRNA

Immunization protects you from disease. Get protected, get immunized.

- Vaccines make your immune system stronger. They build antibodies to help prevent diseases.
- Immunization is safe. It is much safer to get immunized than to get this disease.

What are COVID-19 vaccines?
COVID-19 vaccines protect against the SARS-CoV-2 virus (also known as COVID-19). The virus causes an infection in the lungs and always and is a type of respiratory illness. In some cases, the infection can cause problems with other organs or other parts of the body. Go to alberta.ca/COVID19 to learn more about COVID-19.

The following COVID-19 vaccines are approved for use in Canada:

- mRNA vaccines: Pfizer-BioNTech (Comirnaty) and Moderna (SpikeVax)
- viral vector-based vaccines: AstraZeneca (Vaxzevna)/COVISHIELD and Janssen (Johnson & Johnson)
- protein-based vaccine: Novavax (Nuvaxovid)
- plant-based vaccine: Medicago (Covifenz)

The mRNA and viral vector-based vaccines are available in Alberta. For information about the viral vector-based vaccines, read the vaccine information on immunizeAlberta.ca.

To learn about how COVID-19 vaccines work, visit alberta.ca/en/health-services/your-health-products/COVID19/ask-the-experts/FAQs-on-COVID19-vaccines-treatment/vaccines.

Who should get an mRNA COVID-19 vaccine?
Everyone is at risk of COVID-19. You should get an mRNA COVID-19 vaccine if you are age 5 years or older. COVID-19 vaccines are free.

Do I need a vaccine if I have already had COVID-19?
If you have already had COVID-19, it is not yet known how long your protection will last or how much protection you will have against variants. It is important to get a COVID-19 vaccine even if you have already had the virus.

The vaccine may give you better protection if you wait a while after having COVID-19 and then get a vaccine. How long to wait depends on your health history and whether or not you have already had doses of COVID-19 vaccine.

If you have had COVID-19 infection in the past 90 days, check with your healthcare provider about when to get a COVID-19 vaccine.

What if my child is getting a COVID-19 vaccine?
Consent for a COVID-19 vaccine for children under age 18 years is provided by a parent or guardian. If a parent or guardian cannot be at the appointment, they can give consent in writing using the consent form at alberta.ca/COVID19/ask-the-experts/FAQs-on-COVID19-vaccines-treatment/vaccines. In some cases, children under age 18 years may be able to give their own consent.

How well do COVID-19 vaccines work?
If you are healthy and get all the doses you need, these vaccines give you very good protection against COVID-19.

Two doses of the mRNA vaccines give more protection than 2 doses of the AstraZeneca/COVISHIELD vaccine or 1 dose of the Janssen vaccine.

All the vaccines work very well to lower your risk of getting seriously ill and of needing to be in the hospital.

Even if you have had a COVID-19 vaccine, it is still important to follow public health measures to prevent the virus from spreading. Go to alberta.ca/COVID19 for the most up-to-date information.

How many doses of mRNA COVID-19 vaccine do I need?
Primary series
You need at least 2 doses of an mRNA COVID-19 vaccine to be considered fully immunized. These doses are called your primary series.

For some people, 2 doses may not give enough protection. You may need a third dose to complete your primary series if you have a health problem that weakens your immune system. For example:

- You have had or will have an organ or stem cell transplant
- You have kidney disease and need dialysis
- You have acquired immunodeficiency syndrome (AIDS)
- You take certain medicines that weaken your immune system

Studies have shown that a third dose may provide better protection to adults with a weak immune system. In children with a weak immune system, a third dose may also provide better protection, but research is still happening to learn more.

Booster doses
If you are age 12 years or older, you can get an extra (booster) dose 5 months after your primary series. A booster dose will give you more protection. You should get a booster dose if you are age 16 years or older. You should also get a booster dose if you are age 12 to 17 years and you:

- have certain health conditions (such as you have heart, lung, spleen, or liver problems) immune system, or you have heart, lung, spleen, or liver problems)
- are pregnant
- have a lot of extra weight
- are Indigenous
- live in a group setting such as a group home or long-term care centre

Go to alberta.ca/COVID19-vaccine to book an appointment for your booster dose.

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If you are travelling outside of Canada and you have had only viral vector-based vaccines or different vaccines for your first 2 doses, you may be able to get additional doses. This is only if your destination requires you to have a certain COVID-19 vaccine series.

Can I get an mRNA COVID-19 vaccine if I am pregnant or breastfeeding?
Yes, you can get an mRNA COVID-19 vaccine if you are pregnant or breastfeeding. Research shows that mRNA COVID-19 vaccines are the safest type of COVID-19 vaccine to get during pregnancy.

When you are pregnant, you have a higher risk of getting very sick from COVID-19. Getting a COVID-19 vaccine lowers your risk of getting seriously ill from the virus.

If you are pregnant or breastfeeding and have questions about getting a COVID-19 vaccine, talk to your healthcare provider.

Where can I get a COVID-19 vaccine?
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Are there side effects from mRNA COVID-19 vaccines?
There can be side effects from mRNA COVID-19 vaccines, but they tend to be mild and go away in a few days. Side effects may include:

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21765 (Rev 2022-03) Page 2 of 3 (Side A)

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Usually you get the same vaccine for all your doses. If your first-dose vaccine is not available or you cannot have it, you can get a different COVID-19 vaccine for your next dose.

Whichever vaccine you get to complete your primary series protects you against COVID-19.

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What vaccine will I get for my booster or additional dose?

You will get an mRNA vaccine for any booster or additional doses.

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If you cannot get or do not want an mRNA vaccine, you can get the AstraZeneca/COVISHIELD vaccine if you are age 18 years or older.

The mRNA vaccines are licensed for booster doses for people age 18 years or older who completed their primary series at least 6 months ago. In other cases, the vaccine is not licensed for more than 2 doses. But vaccine experts support this in certain situations. This is called "off-label use."

Getting more than 2 doses of a COVID-19 vaccine is off-label use if:

- You are age 5 to 17 years.
- You get a dose sooner than 6 months after completing your primary series.
- You get a viral vector-based vaccine as a third dose, booster dose, or additional dose.

Talk to your healthcare provider about which vaccine you can get and when to have your doses.

What if I had or am getting another type of vaccine?

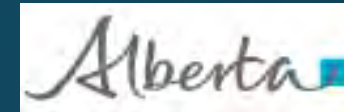
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Children under age 12 years should wait at least 14 days after getting a COVID-19 vaccine before getting another vaccine. If they got another vaccine first, they should wait 14 days before getting a COVID-19 vaccine. This helps you watch for any side effects from the COVID-19 vaccine. However, if your child needs another

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LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON



Before the Adverse Event – Informed Consent

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Alberta Health Services IMMUNIZATION ImmunizeAlberta.ca

COVID-19 vaccines - mRNA

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Who should get an mRNA COVID-19 vaccine?
Everyone is at risk of COVID-19. You should get an mRNA COVID-19 vaccine if you are age 5 years or older. COVID-19 vaccines are free.

Do I need a vaccine if I have already had COVID-19?
If you have already had COVID-19, it is not yet known how long your protection will last or how much protection you will have against variants. It is important to get a COVID-19 vaccine even if you have already had the virus.

The vaccine may give you better protection if you wait a while after having COVID-19 and then get a vaccine. How long to wait depends on your health history and whether or not you have already had doses of COVID-19 vaccine.

If you have had COVID-19 infection in the past 90 days, check with your healthcare provider about when to get a COVID-19 vaccine.

What if my child is getting a COVID-19 vaccine?
Consent for a COVID-19 vaccine for children under age 18 years is provided by a parent or guardian. If a parent or guardian cannot be at the appointment, they can give consent in writing using the consent form at alberta.ca/COVID19. In some cases, children under age 18 years may be able to give their own consent.

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Even if you have had a COVID-19 vaccine, it is still important to follow public health measures to prevent the virus from spreading. Go to alberta.ca/COVID19 for the most up-to-date information.

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For some people, 2 doses may not give enough protection. You may need a third dose to complete your primary series if you have a health problem that weakens your immune system. For example:
• You have had or will have an organ or stem cell transplant.
• You have kidney disease and need dialysis.
• You have acquired immunodeficiency syndrome (AIDS).
• You take certain medicines that weaken your immune system.
Studies have shown that a third dose may provide better protection to adults with a weak immune system. In children with a weak immune system, a third dose may also provide better protection, but research is still happening to learn more.

Booster doses
If you are age 12 years or older, you can get an extra (booster) dose 5 months after your primary series. A booster dose will give you more protection. You should get a booster dose if you are age 15 years or older. You should also get a booster dose if you are age 12 to 17 years and you:
• have certain health conditions (such as you have diabetes, you have a weak immune system, or you have heart, lung, spleen, or liver problems)
• are pregnant
• have a lot of extra weight
• are Indigenous
• live in a group setting such as a group home or long-term care centre
Go to alberta.ca/COVID19 to book an appointment for your booster dose.

Doses for travel
If you are travelling outside of Canada and you have had only viral vector-based vaccines or different vaccines for your first 2 doses, you may be able to get additional doses. This is only if your destination requires you to have a certain COVID-19 vaccine series.

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21765 (Rev2022-03) Page 2 of 3 (Side A)

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If you are age 12 years or older, you can get any vaccine at the same time as, any time before, or any time after a COVID-19 vaccine.

Children under age 12 years should wait at least 14 days after getting a COVID-19 vaccine before getting another vaccine. If they got another vaccine first, they should wait 14 days before getting a COVID-19 vaccine. This helps you watch for any side effects from the COVID-19 vaccine. However, if your child needs another

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LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Episode 3 – Weighed & Measured

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<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

The Pfizer drop was a distraction like so many others.
Before the Pfizer distraction, I filed an Informed Consent Injunction.

A panoramic approach to Business Solutions for the long term.

DKS DATA Consulting Group

Home | COVID 19 | Milgram Experiment 2020-22 | ASCH Experiment 2022 | Podcasts | Masks | About us | Contact us

QB Court Filing - Has the QB has picked its side in history

Currently being updated.

A walk throught the filing and result.
Who is left to fight when the Police, Healthcare, and Justice have picked a side?
The defenders of Truth and Justice have fallen.

Case files

[David Dickson Filing PDF Files](#)
[Crown Filing PDF Files](#)

Zipped files for download at bnttom of page.

Court Update - December 9th, 2021.

<https://dksdata.com/CourtUpdate>

LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Episode 3 – Weighed & Measured

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The Pfizer drop was a distraction like so many others.
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The screenshot shows the website for DKS DATA Consulting Group. The header features a mountain landscape with the text "A panoramic approach to Business Solutions for the long term." and a logo of a white horse's head with a paw print. The navigation menu includes Home, COVID 19, Milgram Experiment 2020, Court Update, About us, and Contact us. The main content area is titled "David Dickson Court Files" and lists the following information:

COURT FILE NUMBER 2103-14553
COURT OF QUEENS BENCH OF ALBERTA
JUDICIAL DISTRICT EDMONTON
APPLICANT
DAVID THOMAS DICKSON
RESPONDENT
HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF ALBERTA

Case files

- [David Dickson Filing PDF Files](#)
- [Crown Filing PDF Files](#)

David Dickson Contents

- [Tab 00 Contents 1 page](#)
- [Tab 01 Application 3 pages](#)
- [Tab 02 Dickson Affidavit David Dickson October 2021 12 pages](#)
- [Tab 03 Exhibit A \(David T. Dickson C.V\) 9 pages](#)
- [Tab 04 Exhibit B \(Mask Exemptions, Orders 22, 34, 40, 42, 43, 44, 45\) 22 pages](#)
- [Tab 05 Exhibit C \(David T. Dickson Medical History\) 2 pages](#)
- [Tab 06 Exhibit D \(AEFI Alberta, Canada, UK, US\) 6 pages](#)
- [Tab 07 Exhibit E \(AEFI Canada Historical\) 1 page](#)

<https://dksdata.com/CourtUpdate>

LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Filed in The Court of Queens Bench October 19, 2021

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

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COURT FILE NUMBER	2103 - 14553
COURT	COURT OF QUEEN'S BENCH OF ALBERTA
JUDICIAL DISTRICT	EDMONTON
APPLICANT	DAVID THOMAS DICKSON
RESPONDENT	HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF ALBERTA
DOCUMENT	ORIGINATING APPLICATION
ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT	David Dickson 21 Riverview Drive Parkland County, AB T7Y 1B9 Ph: (780) 951-9686 Fax: (780) 987 3907 Email: david.dickson@dksdata.com

NOTICE TO THE RESPONDENTS:

This Application is made against you. You are a Respondent.

You have the right to state your side of this matter before the Court.

To do so, you must be in Court when the application is heard as shown below:


Date	Oct 22, 2021
Time	10am
Where	Law Courts Bldg
Before Whom	Justice Chambers

Judge in Motions Court

Go to the end of this document to see what else you can do and when you must do it.

Basis for this claim:

1. It is in the best interest of persons living in the Province of Alberta that the administration of COVID-19 vaccinations be halted due to the seriousness and prevalence of COVID-19 vaccination side effects, risks and injuries.
2. It is in the best interest of persons living in the Province of Alberta to be provided with full and informed consent related to the COVID-19 vaccines, including advising patients of the risks associated with the COVID-19 vaccines.



To appear by video:
<https://www.albertacourts.ca/epicourt-operators-schedule/scheduling>
Civil Chambers - Virtual Courtroom 50 (ELC QB)
To appear by telephone:
Dial in Number: 780-951-3573
Access code: 989 378 739

<https://dksdata.com/CourtUpdate>

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Exhibit D (page 1) Filed October 19, 2021

Episode 3 – Weighed & Measured

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Alberta Adverse Events Following Vaccination (AEFI) reported as of October 14th, 2021. Includes overlay of all Canadian vaccine AEFI in previous years.
<https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#vaccinations>

- 1,749 adverse events following immunization (AEFI) have been reported to Alberta Health. This represents 1,717 people, and 1,815 symptoms.
 - 1,102 related to Pfizer
 - 446 related to Moderna
 - 201 related to AstraZeneca
- There have been 4,546 vaccine refusals and 2,478 contraindications to receiving the vaccine

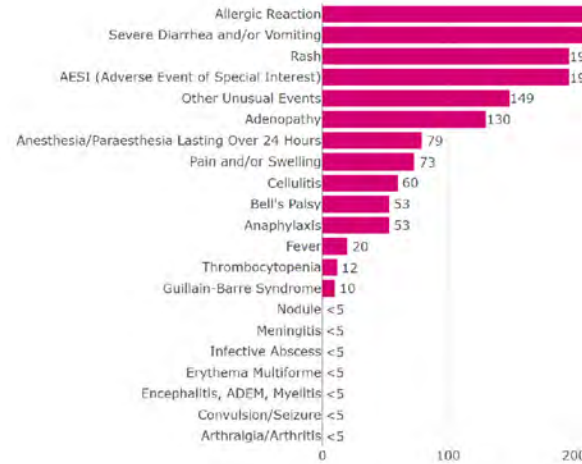


Figure 1: Total AEFI reports received, by bi-annual calendar year (serious and non-serious) for 2018 compared to the average of the previous four years.



Figure 1: Total AEFI reports received, by bi-annual calendar year (serious and non-serious) for 2019 compared to the average of the previous 4 years.



Figure 1: Total AEFI reports received, by bi-annual calendar year (serious and non-serious) for 2020 compared to the average of the previous 4 years.

Number of adverse events following immunization (AEFI) by condition reported in Alberta

LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Exhibit D (page 2) Filed October 19, 2021

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

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<https://www.youtube.com/user/dksdata/>

<https://rumble.com/user/dksdata/>

<https://www.bitchute.com/channel/84TyFCzLhbGG/>

<https://www.linkedin.com/in/dave-dickson-DKSDATA>

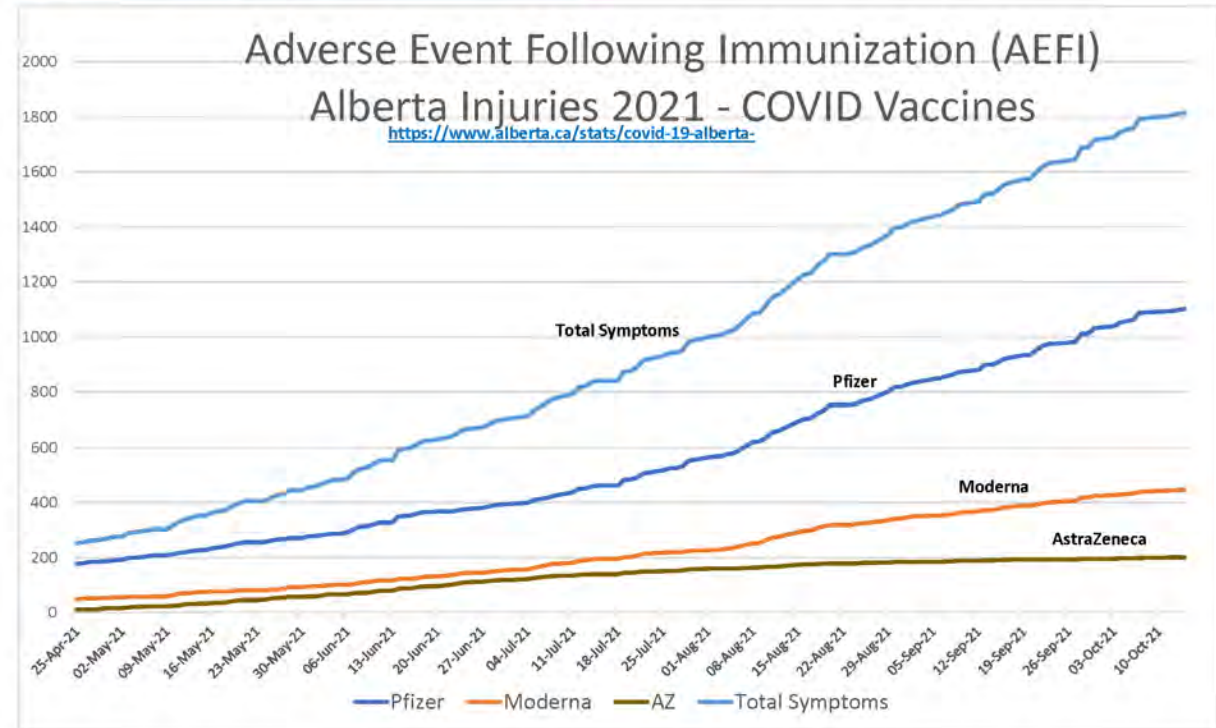
<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

Alberta Adverse Events Following Vaccination (AEFI) reported publicly online from April 25th, 2021 to October 14th, 2021.

<https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#vaccinations>



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<https://dksdata.com/CourtUpdate>

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Exhibit D (page 3) Filed October 19, 2021

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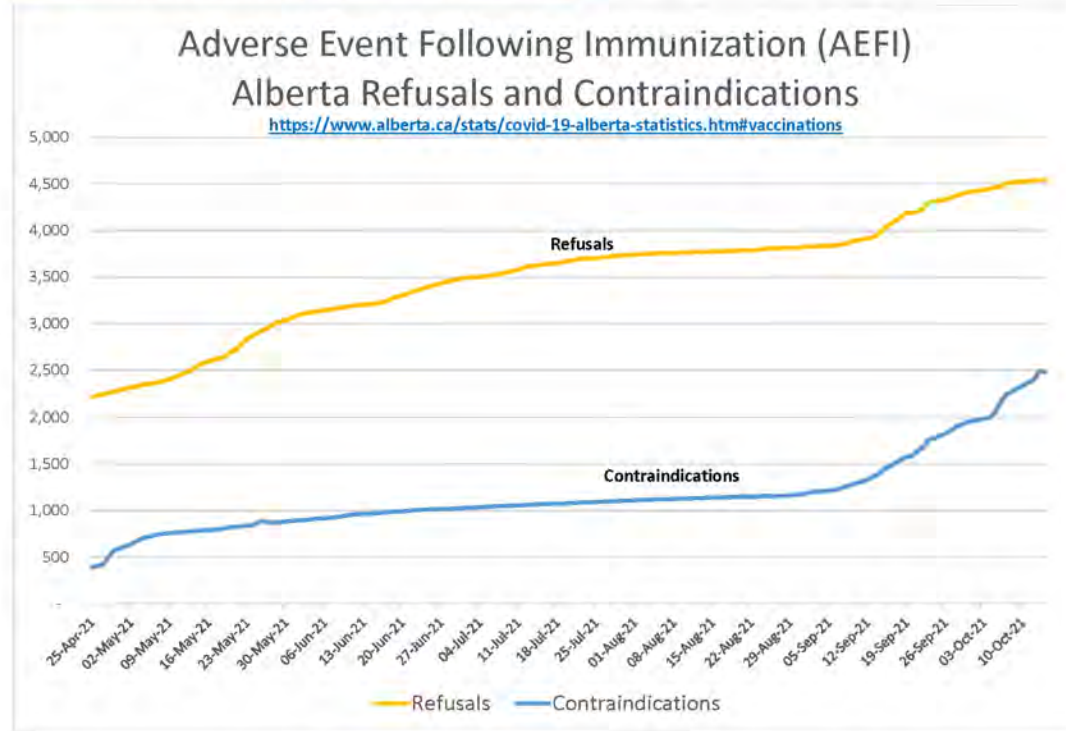
<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

Alberta Adverse Events Following Vaccination (AEFI) Refusals and Contraindications reported publicly online from April 25th, 2021 to October 14th, 2021.

<https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#vaccinations>



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<https://dksdata.com/CourtUpdate>

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<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

<https://www.facebook.com/DavidandKarenD/>

US Adverse Events Following Vaccination (AEFI) reported as of October 8th, 2021.

In the US 186,917,921 people are fully vaccinated and 216,573,911 have had at least one dose.

<https://usafacts.org/visualizations/covid-vaccine-tracker-states/>

Remember these numbers below are considered 1% of the actual numbers.

VAERS (US) REPORTS 1% of all deaths and injuries.

<https://thevaccinereaction.org/2020/01/only-one-percent-of-vaccine-reactions-reported-to-vaers/>

<https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>

VAERS (US)

<https://vaers.hhs.gov/data/datasets.html>

Adverse effects 779,636 = 1 in 234 fully vaccinated people.

<https://medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=CAT&EVENTS=ON&VAX=COVID19>

Deaths 16,766 = 1 in 11,149 people fully vaccinated people.

<https://www.medalerts.org/vaersdb/findfield.php?EVENTS=ON&VAX=COVID19&VAXTYPES=COVID-19&DIED=Yes>

Average Reported deaths from 1990 to 2020 = 159

Total reported deaths (2020/2021) with COVID 19 vaccines = **16,310**

105 times the annual average

3.35 times ALL previous years cumulatively.

Year	Reported Deaths	Deaths Cumulative	Average
1990	76	76	159
1991	160	236	159
1992	218	454	159
1993	219	673	159
1994	223	892	159
1995	140	1,115	159
1996	123	1,255	159
1997	133	1,378	159
1998	132	1,511	159
1999	144	1,643	159
2000	141	1,787	159
2001	174	1,928	159
2002	135	2,102	159
2003	198	2,237	159
2004	162	2,436	159
2005	131	2,598	159
2006	123	2,729	159
2007	162	2,852	159
2008	182	3,014	159
2009	191	3,196	159
2010	161	3,387	159
2011	173	3,548	159
2012	166	3,721	159
2013	129	3,887	159
2014	131	4,016	159
2015	150	4,147	159
2016	178	4,297	159
2017	165	4,475	159
2018	165	4,640	159
2019	183	4,805	159
2020	166	4,988	159
COVID	16,766	5,154	159



LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Exhibit D (page 5) Filed October 19, 2021

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<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

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UK Adverse Events Following Vaccination (AEFI) reported as of October 6th, 2021.

In the UK 45,078,529 people are fully vaccinated and 49,068,705 have had at least one dose. <https://coronavirus.data.gov.uk/details/vaccinations>

UK Normal years AEFI reactions for comparison.

<https://vk.ovg.ox.ac.uk/vk/vaccine-side-effects>

In the UK between 1997 and 2003 there were a total of **130 reports of anaphylaxis** following ALL immunisations. Around 117 million doses of vaccines were given in the UK during this period. This means that the overall rate of anaphylaxis is around 1 in 900,000."

Anaphylaxis. In COVID Vaccines alone in the UK – October 6th, 2021

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting>

"Anaphylaxis (Severe allergic reactions)

*The MHRA continues to monitor reports of severe allergic reactions with the Pfizer/BioNTech vaccine and has received **489** UK spontaneous adverse reactions associated with anaphylaxis or anaphylactoid reactions. The nature and frequency of these reports is in line with that reported in previous updates, and severe allergic reactions to the Pfizer/BioNTech vaccine remain very rare. The MHRA's guidance remains that those with a previous history of allergic reactions to the ingredients of the vaccine should not receive it.*

*The MHRA is closely monitoring reports of anaphylaxis with the COVID-19 Vaccine Moderna and has received **40** reports of anaphylaxis in association with the vaccine. Anaphylaxis is a potential side effect of the vaccine, and it is recommended that those with known hypersensitivity to the ingredients of the vaccine should not receive it.*

*The MHRA also closely monitors reports of anaphylaxis or anaphylactoid reactions with the COVID-19 Vaccine AstraZeneca and has received **823** UK spontaneous adverse reactions associated with anaphylaxis or anaphylactoid reactions reported and is very rare. An update to the product information has been made to reflect the fact that reports of anaphylaxis have been received for the COVID-19 Vaccine AstraZeneca."*

Reported **1,352** cases of Anaphylaxis in **TEN MONTHS** for three vaccines vs. 130 cases of Anaphylaxis in **SIX YEARS** for ALL vaccines.

Thrombo-embolic events with concurrent low platelets

"Up to 6 October 2021, the MHRA had received Yellow Card reports of 424 cases of major thromboembolic events (blood clots) with concurrent thrombocytopenia (low platelet counts) in the UK following vaccination with COVID-19 Vaccine AstraZeneca. Forty six of the 424 reports have been reported after a second dose. Of the 424 reports, 213 occurred in women, and 207 occurred in men aged from 18 to 93 years. The overall case fatality rate was 17% with 72 deaths, six of which occurred after the second dose."

LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Exhibit D (page 6) Filed October 19, 2021

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<https://www.linkedin.com/in/dave-dickson-DKSDATA>

<https://www.researchgate.net/profile/David-Dickson-7>

<https://www.facebook.com/dksdata>

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UK Deaths and Adverse Events Following Vaccination (AEFI) reported as of October 6th, 2021.

In the UK 45,078,529 people are fully vaccinated and 49,068,705 have had at least one dose. <https://coronavirus.data.gov.uk/details/vaccinations>

Pfizer

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977005/COVID-19 mRNA Pfizer- BioNTech Vaccine Analysis Print.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977005/COVID-19_mRNA_Pfizer-BioNTech_Vaccine_Analysis_Print.pdf)

562 reported deaths out of 339,672 adverse reactions reported.

AstraZeneca

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977006/COVID-19 vaccine AstraZeneca analysis print.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977006/COVID-19_vaccine_AstraZeneca_analysis_print.pdf)

1,106 reported deaths out of 832,283 adverse reactions reported.

Moderna

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1013605/COVID-19 Moderna Vaccine Analysis Print 18.08.2021.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1013605/COVID-19_Moderna_Vaccine_Analysis_Print_18.08.2021.pdf)

20 reported deaths out of 53,584 adverse reactions reported.

'Other' Covid Vaccine

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977007/COVID-19 vaccine brand unspecified analysis print.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977007/COVID-19_vaccine_brand_unspecified_analysis_print.pdf)

31 reported deaths out of 3,452 adverse reactions reported.

In the UK, as of October 6th, 2021, there had been 1,719 deaths reported post vaccination and 1,228,991 adverse reactions.

In the UK between 1997 and 2003 there were a total of 130 reports of anaphylaxis following ALL immunisations.

COVID Vaccinations As of October 6th, 2021 - Reported cases of Anaphylaxis in the UK. 1,352.

ONS UK	Reactions	Deaths	Months	Per month Reactions	Per month Deaths	Full Covid	Deaths per 100,000
AZ	832,283	1,106	10	83,228	111		
Pfizer	339,672	562	10	33,967	56		
Moderna	53,584	20	10	5,358	2		
Other	3,452	31	10	345	3		
Total	1,228,991	1,719	10	122,899	172	45,078,529	3.813

ONS UK	Reactions	Deaths	Months	Per month Reactions	Per month Deaths	First Dose	Deaths per 100,000
AZ	832,283	1,106	8.00	104,035	138		
Pfizer	339,672	562	8.00	42,459	70		
Moderna	53,584	20	8.00	6,698	3		
Other	3,452	31	8.00	432	4		
Total	1,228,991	1,719	10.00	122,899	172	49,068,705	3.503

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting>
<https://coronavirus.data.gov.uk/details/vaccinations> * (as of September 29th, 2021)

This is Exhibit "D" referred to in the Affidavit of:

David Thomas Dickson

Sworn before me this

18th day of October, 2021

Chakre Moxon
Commissioner for Oaths, Justice of the Peace,
or Notary Public in and for Alberta

Chakre Moxon
Print Name and Expiry Date

A Commissioner for Oaths

in and for the Province of Alberta

Appointment expires 2022/12/20

LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Exhibit S (page 1) Filed November 26, 2021

Episode 3 – Weighed & Measured

<https://dksdata.com/COVID19>

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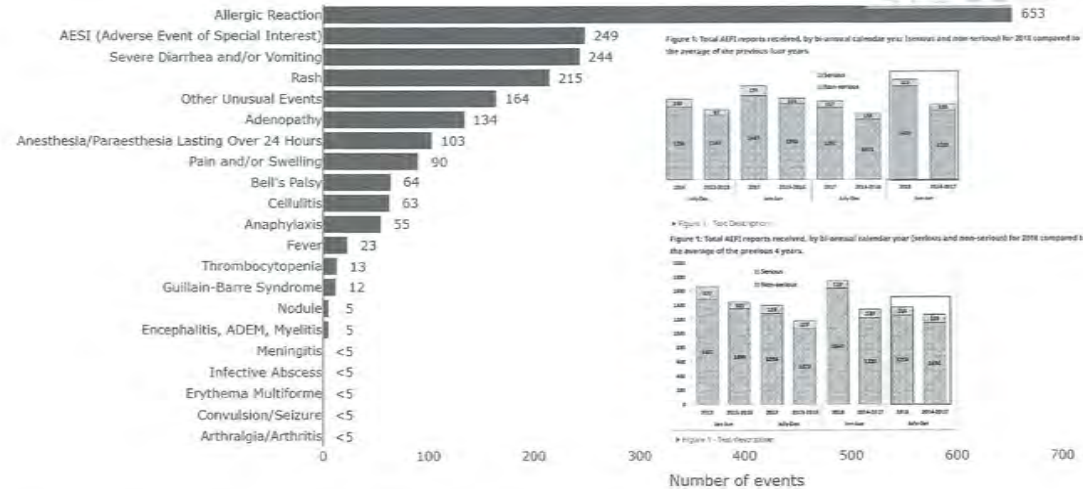
<https://www.facebook.com/dksdata>

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Alberta Adverse Events Following Vaccination (AEFI) reported as of November 24th, 2021.

<https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#vaccinations>

- 2,024 adverse events following immunization (AEFI) have been reported to Alberta Health. This represents 1,977 people, and 2,105 symptoms.
 - 1,292 related to Pfizer
 - 522 related to Moderna
 - 209 related to AstraZeneca
- There have been 4,715 vaccine refusals and 3,787 contraindications to receiving the vaccine



Number of adverse events following immunization (AEFI) by condition reported in Alberta

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WITH DAVID DICKSON

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US Adverse Events Following Vaccination (AEFI) reported as of November 12th, 2021.

In the US 194,747,839 people are fully vaccinated and 225,606,197 have had at least one dose.

<https://usafacts.org/visualizations/covid-vaccine-tracker-states/>

Remember these numbers below are considered 1% of the actual numbers.

VAERS (US) REPORTS 1% of all deaths and injuries.

<https://thevaccinereaction.org/2020/01/only-one-percent-of-vaccine-reactions-reported-to-vaers/>

<https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>

VAERS (US)

<https://vaers.hhs.gov/data/datasets.html>

Adverse effects 894,145 = 1 in 10,330 fully vaccinated people.

<https://medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=CAT&EVENTS=ON&VAX=COVID19>

Deaths 18,853 = 1 in 9,681 people fully vaccinated people.

<https://www.medalerts.org/vaersdb/findfield.php?EVENTS=ON&VAX=COVID19&VAXTYPES=COVID-19&DIED=Yes>

Average Reported deaths from 1990 to 2020 = 159

Total reported deaths (2020/2021) with COVID 19 vaccines = 18,461
118 times the annual average
3.66 times ALL previous years cumulatively.

Year	Reported Deaths	Deaths Cumulative	Average
1990	76	76	159
1991	160	236	159
1992	218	454	159
1993	219	673	159
1994	223	892	159
1995	140	1,115	159
1996	123	1,255	159
1997	133	1,378	159
1998	132	1,511	159
1999	144	1,643	159
2000	141	1,787	159
2001	174	1,928	159
2002	135	2,102	159
2003	199	2,237	159
2004	162	2,436	159
2005	131	2,598	159
2006	123	2,729	159
2007	162	2,852	159
2008	182	3,014	159
2009	191	3,196	159
2010	161	3,387	159
2011	173	3,548	159
2012	166	3,721	159
2013	129	3,887	159
2014	131	4,016	159
2015	150	4,147	159
2016	178	4,297	159
2017	165	4,475	159
2018	165	4,640	159
2019	183	4,805	159
2020	166	4,988	159
COVID	18,853	5,154	159



LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

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<https://www.facebook.com/dksdata>

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UK Adverse Events Following Vaccination (AEFI) reported as of November 10th, 2021.

In the UK 45,942,003 people are fully vaccinated and 50,455,318 have had at least one dose. 11,452,654 had a third dose (which was up to 14,266,368 for the third dose by November 18th). <https://coronavirus.data.gov.uk/details/vaccinations>

UK Normal years AEFI reactions for comparison.

<https://vk.ovg.ox.ac.uk/vk/vaccine-side-effects>

In the UK between 1997 and 2003 there were a total of **130 reports of anaphylaxis** following ALL immunisations. Around 117 million doses of vaccines were given in the UK during this period. This means that the overall rate of anaphylaxis is around 1 in 900,000."

Anaphylaxis. In COVID Vaccines alone in the UK – November 10th, 2021

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting>

"Anaphylaxis (Severe allergic reactions)

The MHRA continues to monitor reports of severe allergic reactions with the COVID-19 Pfizer/BioNTech Vaccine and has received 540 UK spontaneous adverse reactions associated with anaphylaxis or anaphylactoid reactions. Severe allergic reactions to the COVID-19 Pfizer/BioNTech Vaccine remain very rare. The MHRA's guidance remains that those with a previous history of allergic reactions to the ingredients of the vaccine should not receive it.

The MHRA is closely monitoring reports of anaphylaxis with the COVID-19 Vaccine Moderna and has received 41 reports of anaphylaxis in association with the vaccine. Anaphylaxis is a potential side effect of the vaccine, and it is recommended that those with known hypersensitivity to the ingredients of the vaccine should not receive it.

The MHRA also closely monitors reports of anaphylaxis or anaphylactoid reactions with the COVID-19 Vaccine AstraZeneca and has received 843 UK spontaneous adverse reactions associated with anaphylaxis or anaphylactoid reactions reported and such reports are very rare. The product information reflects the fact that reports of anaphylaxis have been received for the COVID-19 Vaccine AstraZeneca."

Reported 1,424 cases of Anaphylaxis in TEN MONTHS for three vaccines vs. 130 cases of Anaphylaxis in SIX YEARS for ALL vaccines.

Thrombo-embolic events with concurrent low platelets

"Up to 10 November 2021, the MHRA had received Yellow Card reports of 425 cases of major thromboembolic events (blood clots) with concurrent thrombocytopenia (low platelet counts) in the UK following vaccination with COVID-19 Vaccine AstraZeneca. Forty-six of the 425 reports have been reported after a second dose. Of the 425 reports, 215 occurred in females, and 206 occurred in males aged from 18 to 93 years. The overall case fatality rate was 17% with 73 deaths, six of which occurred after the second dose."

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WITH DAVID DICKSON

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UK Adverse Events Following Vaccination (AEFI) reported as of November 10th, 2021.

In the UK 45,942,003 people are fully vaccinated and 50,455,318 have had at least one dose. 11,452,654 had a third dose (which was up to 14,266,368 for the third dose by November 18th). <https://coronavirus.data.gov.uk/details/vaccinations>

Pfizer

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977005/COVID-19_mRNA_Pfizer-BioNTech_Vaccine_Analysis_Print.pdf
611 reported deaths out of 370,739 adverse reactions reported.

AstraZeneca

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977006/COVID-19_vaccine_AstraZeneca_analysis_print.pdf
1,122 reported deaths out of 840,295 adverse reactions reported.

Moderna

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1013605/COVID-19_Moderna_Vaccine_Analysis_Print_18.08.2021.pdf
19 (down from a total of 20 three weeks before!) reported deaths out of 56,310 adverse reactions reported.

'Other' Covid Vaccine

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/977007/COVID-19_vaccine_brand_unspecified_analysis_print.pdf
32 reported deaths out of 3,665 adverse reactions reported.

In the UK, as of November 10th, 2021, there had been 1,784 deaths reported post vaccination and 1,271,009 adverse reactions.

In the UK between 1997 and 2003 there were a total of 130 reports of anaphylaxis following ALL immunisations.

COVID vaccinations as of November 10th, 2021 - Reported cases of Anaphylaxis in the UK. 1,424.

Risk on Anaphalaxis rate 1997-2003 for ALL Vaccines = 1 in 900,000. COVID 19 Rate = 1 in 67,695.

ONS UK	Reactions	Deaths	Months	Per month Reactions	Per month Deaths	Full Covid	Deaths per 100,000
AZ	840,295	1,122	10	84,030	112		
Pfizer	370,739	611	10	37,074	61		
Moderna	56,310	19	10	5,631	2		
Other	3,665	32	10	367	3		
Total	1,271,009	1,784	10	127,101	178	45,942,003	3.883

ONS UK	Reactions	Deaths	Months	Per month Reactions	Per month Deaths	First Dose	Deaths per 100,000
AZ	840,295	1,122	10	84,030	112		
Pfizer	370,739	611	10	37,074	61		
Moderna	56,310	19	10	5,631	2		
Other	3,665	32	10	367	3		
Total	1,271,009	1,784	10	127,101	178	50,455,318	3.536

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting>

<https://coronavirus.data.gov.uk/details/vaccinations> * (as of September 29th, 2021)

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Affidavit of David Dickson October 2021 (page 4-5)
Filed October 19, 2021

19) In quotes directly from the NACI document published on November 19, 2021, and allegedly fully reviewed by the CMOH and the GOA (“Pfizer-biontech-10-mcg-children-5-11-years-age.pdf”²) [emphasis added].

“While it is not justified to vaccinate children only to benefit others, the indirect, population-level benefits of vaccination can also benefit children. The overall safety and effectiveness data are limited for children. While it is justifiable to make recommendations based on available data for children 5-11 years of age, including following the dosing intervals associated with the clinical trial data, the precautionary principle also justifies taking action under conditions of scientific uncertainty to mitigate vaccine-related risks, including through active post-market surveillance. This includes using data available from other age groups and applying vaccination principles. Generally, a vaccination program is justified if its anticipated benefits outweigh its potential risks. Children aged 5-11 years are unlikely to be deemed capable of consenting to vaccination, and decisions related to their vaccination will likely be made by parents or guardians. Given the shortterm uncertainties surrounding pediatric vaccination at this time, children and their parents or guardians should be supported and respected in their decisions regarding COVID-19 vaccinations for the child, whatever decisions they make, and should not be stigmatised for accepting, or not accepting, the vaccination offer.”

“Any uncommon, rare, or very rare AE that occurs at the frequency less often than 1 in 1,000 would not be detected with this trial size. NACI will closely review emerging evidence and will update their recommendation, as well as its strength, as the evidence base evolves.”

“Data from older age groups also suggests an extended interval may also be associated with a reduced risk of myocarditis/pericarditis following a second dose of an mRNA COVID-19 vaccine.”

“Currently, the risk of myocarditis/pericarditis in children following immunization with the 10 mcg dose of the Pfizer-BioNTech vaccine is unknown.”

“Real-world evidence in large pediatric populations is required to provide risk estimates of myocarditis/pericarditis and any other AE that may occur in children aged 5-11 years at a frequency less often than 1 in 1,000.”

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LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Episode 3 – Weighed & Measured

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Affidavit of David Dickson October 2021 (page 4-5)
Filed October 19, 2021

20) Additionally, in a quote directly from the NACI document published on October 22, 2021, relating to all COVID vaccines, and allegedly fully reviewed by the CMOH and GOA (“recommendations-use-

¹ <https://www.albertahealthservices.ca/topics/Page17769.aspx>

² <https://www.canada.ca/content/dam/phac-aspc/documents/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-covid-19-vaccines/pfizer-biontech-10-mcg-children-5-11-years-age/pfizer-biontech-10-mcg-children-5-11-years-age.pdf>

- 4 -

covid-19-vaccines-en.pdf³). Note the constant reference to a lack of information on safety, effectiveness and efficacy, contrary to the statements by the GOA and CMOH [emphasis added].

“Evidence from clinical trial data is limited due to limitations in the size and duration of follow-up of trial populations. However, clinical trials and studies in the real-world setting are ongoing.”

“Evidence of protection against asymptomatic SARS-CoV-2 infection is emerging for the mRNA and Janssen vaccines.”

“There is currently limited evidence on the duration of protection and on the efficacy of these vaccines in reducing transmission of SARS-CoV-2...”

“There is currently minimal evidence to inform on differences in vaccine efficacy, effectiveness, or safety between individuals with and those without prior evidence of SARS-CoV-2 infection at the time of vaccination.”

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LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Exhibit U (page 49) Filed November 26, 2021

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COVID 19 Consent Forms (to date)

Online reference: <https://www.albertahealthservices.ca/frm-21765.pdf>

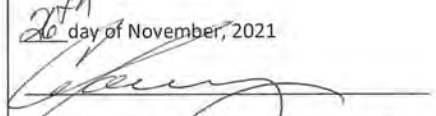
- 21765 (Rev2020-12v4) – Dated December 29th, 2020
- 21765 (Rev2021-05v2) – Dated May 20th, 2021
- 21765 (Rev2021-05v3) – Dated May 28th, 2021
- 21765 (Rev2021-09v2) – Dated September 16th, 2021
- 21765 (Rev2021-11) – Dated November 3rd, 2021
- 21765 (Rev2021-11v2) – Dated November 8th, 2021
- 21765 (Rev2021-11v3) – Dated November 12th, 2021
- 21765 (Rev2021-11v4) – Dated November 24th, 2021

This is Exhibit "U" referred to in the Affidavit of:

David Thomas Dickson

Sworn before me this

20th
day of November, 2021


Commissioner for Oaths, Justice of the Peace,

or Notary Public and Commissioner for Oaths
in and for the Province of Alberta
Appointment expires 2022/02/22

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LIES, DAMNED LIES AND SADISTICS

WITH DAVID DICKSON

Affidavit of David Dickson October 2021 (page 5)

Filed October 19, 2021

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15) Doctors are required by law to complete vaccine adverse impact assessments.¹⁰ This does not appear to be taking place in all incidences within Alberta. I am personally aware of several adverse event incidents where a doctor has refused and/or been unable to report an adverse event as a result of not having the information made available to them, which is required to complete the reporting. I am personally aware of cases where a doctor has not been able to report an adverse event due to not having the batch number of the vaccine. This is not available in many cases resulting in a significant underreporting of vaccine adverse events. Such underreporting results in an inability to provide fully informed consent. The requirement under the Alberta Public Health Act IMMUNIZATION REGULATION to report adverse events is as follows:

“5(1) A health practitioner shall ensure that an adverse event following immunization is reported to a regional health authority within 3 days of the health practitioner determining or being informed that a patient of the health practitioner has experienced an adverse event following immunization that has not been reported to a regional health authority.”

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What Next...

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Episode 4
How we got here.
The Psychology of COVID Restrictions.

The Micro Push
Behavioral Priming
Perception Without Awareness (PWA)
Engaged Followership (Milgram)
Social Conformity (Asch)
False Hope (Richter)

In the present, if we lose our history, we will not have a future.

Data, when analysed, becomes INFORMATION.

When INFORMATION is shared, it becomes knowledge.

When knowledge is truly understood, it becomes *wisdom*.

When *wisdom* is shared, it becomes history to be shared and learnt from.

In the end, that is how we gain common sense.

Without all of these pieces, we will never grow... just continue to repeat our mistakes in a never-ending cycle.

~David Dickson

Adverse Event	Follow-up	Outcome
...

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What Next...

How we got here.

The Psychology of COVID Restrictions.

- The Micro Push
- Behavioral Priming
- Perception Without Awareness (PWA)
- Engaged Fellowship (Milgram)
- Social Conformity (Asch)
- False Hope (Richter)

“When a restriction is perceived as a ‘protection’ to be cherished, it becomes a chain you must break.”

David Dickson

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Episode 3 – Weighed & Measured

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What Next...

How we got here.
The Psychology of COVID Restrictions.

The Milgram Experiment
Please Continue



"When a restriction is perceived as a 'protection' to be cherished, it becomes a chain you must break."

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What Next...

How we got here.
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How we got here. The Psychology of COVID Restrictions.



"When a restriction is perceived as a 'protection' to be cherished, it becomes a chain you must break."

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