
Fwd: Covid jabs and 'valid informed consent' - a medical ethics disaster

Elizabeth Hart <elizmhart@gmail.com>
To: Elizabeth Hart <elizmhart@gmail.com>

Fri, Dec 16, 2022 at 8:59 PM

FYI, please see below my recent email to Jennifer Martin, President-Elect of the Royal Australasian College of Physicians, re **'valid informed consent' before administration of the Covid jabs, and medical indemnity for health practitioners administering the Covid needles.**

My email to Jennifer Martin includes reference to confirmation I've received from the Albanese government that: **"Informed consent should be obtained for every COVID-19 vaccination, as per usual consent procedures for other vaccinations".**

However, it's my very strong suspicion that most of the millions of adults and children jabbed with Covid needles in Australia have **not** provided 'valid informed consent' before this medical intervention, because people have **not** been properly informed about the risks and benefits in their own situation.

And it's impossible to give 'voluntary' informed consent under jab **mandates**...

In Australia, the community has been bombarded by individuals claiming to be 'experts', exhorting people of all ages and health status to get the jabs. **But are these so-called 'experts' actually qualified to be pressing these medical interventions across the community?** This is an area that requires urgent investigation, including the potential conflicts of interest of individuals pushing the jabs, e.g. members of **the vaccine industry-funded Immunisation Coalition.**

On the subject of 'valid consent' *The Australian Immunisation Handbook* states:

*Valid consent is the **voluntary agreement** by an individual to a proposed procedure, which is given after sufficient, appropriate and reliable information about the procedure, including the potential risks and benefits, has been conveyed to that individual.*

And

*For consent to be legally valid, the following elements must be present...**It must be given voluntarily in the absence of undue pressure, coercion or manipulation...It can only be given after the potential risks and benefits of the relevant vaccine, the risks of not having it, and any alternative options have been explained to the person.***

My emphasis.

Again, please see below my email to Jennifer Martin. This includes an email thread including my email to the Editor in Chief of *The BMJ*, Kamran Abbasi, on informed consent and medical indemnity, and also the response from Angus Dalgleish, a professor of oncology at St George's University of London, and a Fellow of the Royal Australasian College of Physicians.

In his response to Kamran Abbasi and me, **Angus Dalgleish raises the alarm about his experience with cancer patients suffering after Covid booster shots, arguing "This must be aired and debated immediately."**

Angus Dalgleish initiates his response to Kamran Abbasi and me saying: "I write in total support of Elizabeth Hart", **and he calls for the halt of the Covid vaccine programme.**

The grossly disproportionate and ill-targeted international Covid response is shaping up to be the biggest crime of all time. In Australia, the failure to obtain 'valid informed consent', and the Morrison government misleading health practitioners about them being protected with special medical indemnity for administration of the Covid needles, is looming as a massive scandal, **particularly when coupled with the appalling situation of Covid jabs being mandated in Australia - e.g. No Jab, No Job.**

Please give careful consideration to the email thread below, which also includes my correspondence with Health Minister Mark Butler and the Department of Health and Aged Care.

Elizabeth Hart
Independent researcher investigating vaccine products and conflicts of interest in vaccination policy

vaccinationispolitical.net

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

From: **Elizabeth Hart** <elizmhart@gmail.com>

Date: Mon, Dec 5, 2022 at 5:46 PM

Subject: Health practitioners, Covid jabs and 'valid informed consent' - a medical ethics disaster

To: President <president@racp>

Cc: Gus Dalglish <dalglish@squ>, Kamran Abbasi <kabbasi@bmj>, Emma McArthur <ejminoz@>, Rennick Gerard (Senator) <senator.rennick@aph>, Antic, Alex (Senator) <senator.antic@aph>, Malcolm Roberts <senator.roberts@aph>

For the attention of:

Jennifer Martin

President-Elect

Royal Australasian College of Physicians

Jennifer Martin, the Albanese government has now **provided information** that confirms the Morrison government misled (i.e. *lied to*) health practitioners into believing they are covered by a specific government medical indemnity scheme for administering Covid-19 jabs - it's now clear health practitioners are **not** covered by a specific Covid-19 government medical indemnity scheme. (See **my emails to health minister Mark Butler.**)

The Albanese government has also confirmed: "Informed consent should be obtained for every COVID-19 vaccination, as per usual consent procedures for other vaccinations".

Given that it's likely millions of people in Australia have been jabbed under **mandates**, e.g. No Jab, No Job; No Jab, No Restaurant; No Jab, No Sport; No Jab, No Travel, No Jab, No Theatre etc, **how can people have given authentic voluntary informed consent to this medical intervention?** People have been pressured, coerced and manipulated into submitting to Covid jabs under **mandates**, against the criteria for 'valid consent' detailed in **The Australian Immunisation Handbook**, i.e. **"Valid consent is the voluntary agreement by an individual to a proposed procedure, which is given after sufficient, appropriate and reliable information about the procedure, including the potential risks and benefits, has been conveyed to that individual...For consent to be legally valid...It must be given voluntarily in the absence of undue pressure, coercion or manipulation..."**

For many people, No Jab, No Job mandates remain in place, e.g. in the health area, plus other areas of employment and sport.

I've now raised this matter with the Editor in Chief of *The BMJ*, Kamran Abbasi, arguing that the failure to obtain valid informed consent before the Covid jabs is a very serious situation, at the heart of medical ethics, and it should be a priority topic on *The BMJ*. See **my email to Kamran Abbasi** below, which also includes my emails to health minister Mark Butler.

My email to Kamran Abbasi was copied to a large group of key people, including Angus Dalglish, a professor of oncology at St George's, University of London.

Angus Dalglish is a Fellow of the Royal Australasian College of Physicians.

I appreciate that he has given his wholehearted support to my raising these concerns, with him responding to me and Kamran Abbasi, i.e.

Dear Kamran Abbasi,

I write in total support of Elizabeth Hart.

COVID no longer needs a vaccine programme given the average age of death of COVID in the UK is 82 and from all other causes 81 and falling.

The link with clots, myocarditis, heart attacks and strokes is now well accepted as is the link with myelitis and neuropathy.

(We predicted these side effects in our QRBD article Sorensen et al, 2020, as the blast analysis revealed 79% homologies to human epitopes, especially PF4 and myelin)

However, there is now another reason to halt all vaccine programmes.

As a practicing Oncologist I am seeing people with stable disease rapidly progress after being forced to have a booster, usually so they can travel.

Even my own family and colleagues are developing B cell based disease after the boosters, they describe being distinctly unwell a few days to weeks after the booster

With my brother in law developing leukaemia, my pharmacist NHL, a former PhD student NHL, and now an old school friend who has felt like he has had

Long COVID since receiving his booster who after getting severe bone pain has been diagnosed as having multiple mets from myeloma.

I am experienced enough to know that these are not the coincidental anecdotes that many suggest, especially as the same pattern is

Being seen in Germany, Australia and the USA.

The reports of innate immune suppression after mRNA for several weeks would fit as all these patients to date have melanoma or B cell based cancers

Which are very susceptible to immune control and that is before the reports of suppressor gene suppression by mRNA reports.

This must be aired and debated immediately.

Angus Dalglish MD FRACP FRCP FRCPATH FMedSci

Jennifer Martin, **the mandating of Covid jabs in Australia is a medical ethics disaster, and potentially a health disaster too according to Angus Dalglish's evaluation.**

Millions of people who weren't at serious risk of Covid, including children, have been pressured to take these jabs, and it's likely authentic 'valid consent' was not obtained - what does this mean for the health practitioners inserting the needle?

What is the Royal Australasian College of Physicians' position on this matter? Should you not be providing leadership to address this vital ethical issue?

I've copied Angus Dalglish, Kamran Abbasi and my colleague Emma McArthur on this email, and also Australian senators Gerard Rennick, Alex Antic and Malcolm Roberts.

Please see the email thread below, including Angus Dalglish's reply to Kamran Abbasi and me.

I request your urgent response.

Sincerely

Elizabeth Hart

Independent researcher investigating vaccine products and conflicts of interest in vaccination policy

vaccinationispolitical.net

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

From: **Gus Dalglish**

Date: Tue, Nov 22, 2022 at 9:29 PM

Subject: Re: Health practitioners, Covid jabs and 'valid informed consent' - a medical ethics disaster

To: Elizabeth Hart, Kamran Abbasi

Cc: Peter Doherty, Peter Openshaw, Arne Akbar, Ramesh Thakur, Andrew Pollard, John Ioannidis, Jodie McVernon, Neil Ferguson, Patrick Vallance, Chris Whitty, Sharon Davies, Peter Doshi, Theodora Bloom, Allyson Pollock, Simon Wain-Hobson, Richard Ebright, Marc Lipsitch, Michael Osterholm, Tom Inglesby, Carl Heneghan, Michael Levitt, Jayanta Bhattacharya, Karol Sikora, Johan Giesecke, Ian Frazer, Peter Collignon, Roy Anderson, Adrian Smith, David Cannadine, V. Ramakrishnan, Chris Conlon, Robert Clancy, Sunetra Gupta, Heidi Larson, Graham Medley, Melinda Mills, John Bell, David Kennedy, Peter A. McCullough, Nick Hudson, Emma McArthur, Anthony Harnden, Adam Finn, Adrian Hill, Sarah Gilbert, Chennupati Jagadish, Geert Vanden Bossche, Robert Malone, Jonathan Engler, Andrew Read, Bret Weinstein, Tess Lawrie, Fiona Godlee, David Oliver, Jonathan Ball, Eleanor Riley, Christopher Goodnow, Media Royal College of Physicians, John Shine, Brendan Crabb, Sharon Lewin, Kathryn North, John Edmunds, Norman Fenton, Robert Dingwall, Ultan Power, Martin Kulldorff

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However, there is now another reason to halt all vaccine programmes.

As a practicing Oncologist I am seeing people with stable disease rapidly progress after being forced to have a booster, usually so they can travel.

Even my own family and colleagues are developing B cell based disease after the boosters, they describe being distinctly unwell a few days to weeks after the booster

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Being seen in Germany, Australia and the USA.

The reports of innate immune suppression after mRNA for several weeks would fit as all these patients to date have melanoma or B cell based cancers

Which are very susceptible to immune control and that is before the reports of suppressor gene suppression by mRNA reports.

This must be aired and debated immediately.

Angus Dagleish MD FRACP FRCP FRCPATH FMedSci

From: Elizabeth Hart <elizmhart@gmail.com>

Date: Monday, 21 November 2022 at 11:28

To: Kamran Abbasi

Cc: Peter Doherty, Peter Openshaw, Arne Akbar, Ramesh Thakur, Andrew Pollard, Gus Dagleish, John Ioannidis, Jodie McVernon, Neil Ferguson, Patrick Vallance, Chris Whitty, Sharon Davies, Peter Doshi, Theodora Bloom, Allyson Pollock, Simon Wain-Hobson, Richard Ebright, Marc Lipsitch, Michael Osterholm, Tom Inglesby, Carl Heneghan, Michael Levitt, Jayanta Bhattacharya, Karol Sikora, Johan Giesecke, Ian Frazer, Peter Collignon , Roy Anderson, Adrian Smith, David Cannadine, V. Ramakrishnan, Chris Conlon, Robert Clancy, Sunetra Gupta, Heidi Larson, Graham Medley, Melinda Mills, John Bell, David Kennedy, Peter A. McCullough, Nick Hudson, Emma McArthur, Anthony Harnden, Adam Finn, Adrian Hill, Sarah Gilbert, Chennupati Jagadish, Geert Vanden Bossche, Robert Malone, Jonathan Engler, Andrew Read, Bret Weinstein, Tess Lawrie, Fiona Godlee, David Oliver, Jonathan Ball, Eleanor Riley, Christopher Goodnow, Media Royal College of Physicians, John Shine, Brendan Crabb, Sharon Lewin, Kathryn North, John Edmunds, Norman Fenton, Robert Dingwall, Ultan Power, Martin Kulldorff

Subject: Health practitioners, Covid jabs and 'valid informed consent' - a medical ethics disaster

For the attention of:

Kamran Abbasi

Editor in chief of *The BMJ*

Copied to:

People influential on international public health/vaccination policy via the scientific and medical establishment, and other parties

Kamran Abbasi, I've raised with you previously the subject of **mandated Covid jabs and health practitioners' obligation to obtain 'voluntary informed consent'**, 19 October 2022.

The BMJ claims to be evidence-based and patient-centred and customer-focused - surely ensuring 'valid informed consent' before medical interventions, such as Covid jabs, should be foremost in your values?

Sadly, 'valid informed consent' appears to have been sacrificed during the grossly disproportionate and ill-targeted Covid debacle. This scandal is now unfolding in Australia.

FYI, please see below **my response to Australian federal health minister Mark Butler, on the subject of health practitioners' medical indemnity insurance for Covid-19 jab administration, and health practitioners' obligation to obtain 'informed consent'**.

This information has major implications for health practitioners administering Covid-19 jabs in Australia - **they need to know they're not covered by a specific government Covid-19 medical indemnity scheme, and that they're obligated to obtain informed consent before every Covid-19 jab.**

But I strongly suspect many health practitioners have failed to obtain 'valid informed consent' before the Covid jabs. How have things gone so terribly wrong?

This is a very serious situation Kamran Abbasi, at the heart of medical ethics. **This should be a priority topic on *The BMJ*.**

Sincerely

Elizabeth Hart

Independent researcher investigating vaccine products and conflicts of interest in vaccination policy

vaccinationispolitical.net

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From: **Elizabeth Hart** <elizmhart@gmail.com>

Date: Mon, Nov 21, 2022 at 2:58 PM

Subject: Response re: Are health practitioners covered for indemnity insurance re the Covid jabs?

To: <minister.butler@health>

Cc: Rennick Gerard (Senator) <senator.rennick@aph>, Antic, Alex (Senator) <senator.antic@aph>, Malcolm Roberts <senator.roberts@aph>, Emma McArthur <ejminoz@>, Medical Indemnity <Medical.Indemnity@>

For the attention of:

Mark Butler

Minister for Health and Aged Care

Australian Government Department of Health and Aged Care

Mark Butler, it appears that health practitioners have been misled by the former Morrison Government into believing they are covered by a specific government medical indemnity scheme for administering Covid-19 jabs, as it has now been confirmed by your department that health practitioners are not covered by a specific Covid-19 government medical indemnity scheme.

In his response to my previous emails to you (see below), Nigel Murray, Assistant Secretary, MBS Policy and Specialist Services Branch says: (Letter dated 17 November 2022, my highlighting.)

I can advise that rather than putting in place a medical indemnity scheme for health professionals, the former Government established the no-fault Scheme, which commenced operations on 13 December 2021.

and

While a medical indemnity scheme for health professionals administering the COVID-19 vaccine was not established per se, the creation of the no-fault Scheme was intended to support increased participation by health professionals in the COVID-19 Vaccination roll-out.

But the promise of "a medical indemnity scheme for health professionals administering the COVID-19 vaccine" probably did intend "to support increased participation by health professionals in the COVID-19 Vaccination roll-out".

In July 2021, the Morrison Government stated it was establishing a "fit-for-purpose COVID-19 vaccine medical indemnity scheme" to "support increased vaccination uptake by assuring Australians that health professionals, including GPs, nurses and pharmacists administering COVID vaccines as part of the Commonwealth vaccination program have appropriate indemnity coverage", with a further announcement in August 2021 stating "The Morrison Government has finalised the details of the no fault COVID-19 Vaccine Claim Scheme following extensive consultation with the peak medical, healthcare, business and insurance sectors to ensure a comprehensive National Scheme", noting "It also ensure [sic] that health professionals administering vaccines will be able to continue with their crucial role in the vaccine roll out with assurance that the claims scheme will offer them protection". (See media releases attached.)

But it now turns out health professionals are not personally protected by a specific Covid-19 medical indemnity scheme.

The letter from Nigel Murray also confirms: "Informed consent should be obtained for every COVID-19 vaccination, as per usual consent procedures for other vaccinations."

Mark Butler, it appears health practitioners don't have specific government medical indemnity re the Covid jab rollout, although they might think they do. They will have to look to their own medical indemnity insurance to protect them. And they should be obtaining informed consent for every Covid-19 jab...but is this actually happening?

What is the quality of information being provided to people, including parents of children, to enable them to properly evaluate the threat of SARS-CoV-2/Covid-19, and the risks and benefits of the multiple Covid jabs, in their own specific circumstances? Why are people of most ages and health status being called upon to have the Covid-19 jabs? Who is actually at serious risk with SARS-CoV-2/Covid-19? Does having repeated Covid jabs compromise the immune system and make people more vulnerable?

Nigel Murray includes reference to the **COVID-19 vaccination - Patient resources** webpage in his letter (see attached), but this webpage only includes information re Covid jabs for children, not for adults. Nigel Murray's letter also includes a link to a **Consent form for COVID-19 vaccination** (see attached).

How does this information re Covid jabs referred to by Nigel Murray stack up in the 'valid informed consent' stakes? I would say not very well at all...

This is an extremely serious situation Mark Butler - it's highly likely 'valid informed consent' has not been properly obtained by many health practitioners before administering Covid-19 jabs.

The health practitioners inserting the needle must be warned they're not protected by a specific government Covid medical indemnity scheme after all...and they need to consider the quality of the information they're providing to people to gain their 'valid informed consent' to the jabs. They must also consider the impact of jab mandates - which pressure, coerce and manipulate people to submit to Covid jabs, in contravention of The Australian Immunisation Handbook, i.e. jab mandates inhibit a 'voluntary' decision.

Mark Butler, please advise what steps you are taking to address this matter.

This email is being circulated to other parties, including the response from your department.

Sincerely

Elizabeth Hart
Independent researcher investigating vaccine products and conflicts of interest in vaccination policy
vaccinationispolitical.net

On Wed, Nov 9, 2022 at 11:26 AM Elizabeth Hart <elizmhart@gmail.com> wrote:

For the attention of:

Mark Butler
Minister for Health and Aged Care
Australian Government Department of Health and Aged Care

Mark Butler, are health practitioners covered by indemnity insurance if they fail to obtain valid informed consent before administering Covid jabs?

I have raised this matter previously with you in my emails dated **4 October 2022** and **7 October 2022**, copies attached.

Emma McArthur has also previously sought clarification on this matter in her email dated **11 November 2021** to Greg Hunt, then Minister for Health and Aged Care, in which she asked:

Please could you advise to what extent the Commonwealth Covid-19 vaccine claims scheme provides insurance and indemnity for the civil and criminal liability that would arise where battery and clinical negligence occur due to a failure to obtain valid informed consent?

Please could you also provide the terms and conditions for this scheme.

Emma McArthur received **a response to her queries** from Louise Morgan, Acting Assistant Secretary, COVID-19 Vaccine Claims Scheme Taskforce, Medical Benefits Division, dated 21 December 2021.

The response from Louise Morgan notes the COVID-19 Vaccine Claims Scheme opened to potential claimants on 13 December 2021, and **"has been established as a fit-for-purpose, time-limited claims scheme to respond to the unprecedented circumstances of the COVID-19 pandemic"**.

Louise Morgan also notes:

The Scheme does not provide an indemnity for practitioners or insurers, it does however provide patients who have suffered one of the eligible clinical conditions or an administration injury as a direct result of a COVID-19 vaccine, with faster access to compensation rather than a costly and complex court process.

I can advise that informed consent should be obtained for every COVID-19 vaccination, as per usual consent procedures for other vaccinations.

(My emphasis.)

Mark Butler, according to Louise Morgan, **it appears there is no indemnity for practitioners or insurers...and that informed consent should be obtained for every COVID-19 vaccination, as per usual consent procedures for other vaccinations**. In her response, Louise Morgan also referred to the Australian Immunisation Handbook, **"which has information about 'valid consent', including criteria for consent to be legally valid..."**

This is a very interesting response from Louise Morgan, because in July 2021, Greg Hunt announced that the Morrison Government was establishing a **"fit-for-purpose COVID-19 vaccine medical indemnity scheme"** to **"support increased vaccination uptake by assuring Australians that health professionals, including GPs, nurses and pharmacists administering COVID vaccines as part of the Commonwealth vaccination program have appropriate indemnity coverage"**. (Media release: **COVID-19 indemnity scheme to protect health professionals and patients**, see copy attached.)

The media release notes **"The scheme will support claims made against privately practising health professionals who administer a COVID-19 vaccine approved for use by the Therapeutic Goods Administration (TGA)"**.

A further media release published on 28 August 2021 states: **"The Morrison Government has finalised the details of the no fault COVID-19 Vaccine Claim Scheme following extensive consultation with the peak medical, healthcare, business and insurance sectors to ensure a comprehensive National Scheme"**.

The media release notes **"It also ensure [sic] that health professionals administering vaccines will be able to continue with their crucial role in the vaccine roll out with assurance that the claims scheme will offer them protection."** (See: **No Fault COVID-19 Indemnity Scheme**, copy attached.)

To summarise, in July 2021, **Greg Hunt announced health professionals, including GPs, nurses and pharmacists administering COVID vaccines as part of the Commonwealth vaccination program would have appropriate indemnity coverage**, and the media release published in August 2021 appears to confirm this.

But the letter to Emma McArthur from Louise Morgan dated 21 December 2021 clearly states there is **no indemnity for practitioners or insurers...and that informed consent should be obtained for every COVID-19 vaccination, as per usual consent procedures for other vaccinations.**

So far, I haven't found a media release refuting the announcements of indemnity protection for health practitioners.

Again Mark Butler, I ask you to clarify this matter - **are health practitioners such as GPs, nurses and pharmacists covered by indemnity insurance if they fail to obtain informed consent before the Covid jabs?**

I request your early response.

Sincerely

Elizabeth Hart

Independent researcher investigating vaccine products and conflicts of interest in vaccination policy

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