
Covid jabs, informed consent, indemnity, and medical ethics... Response to Gus Dagleish

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

Sat, Dec 3, 2022 at 3:11 PM

From: Elizabeth Hart <elizmhart@gmail.com>

Date: Fri, Dec 2, 2022 at 2:32 PM

Subject: Covid jabs, informed consent, indemnity, and medical ethics... Response to Gus Dagleish

To: Gus Dagleish <dagleis@sgul>

Cc: Kamran Abbasi <kabbasi@bmj>, Peter Doherty <pcd@unimelb>, p.openshaw@imperial <p.openshaw@imperial>, a.akbar@ucl, Ramesh Thakur <ramesh.thakur@anu>, andrew.pollard@paediatrics.ox <jioannid@stanford>, j.mcvernon@unimelb, neil.ferguson@imperial, gcsa@go-science, c.whitty@nhs, Sharon Davies <sdavies@bmj>, Peter Doshi <pdoshi@bmj>, Theodora Bloom <tbloom@bmj>, allyson.pollock@ncl, simon.wain-hobson@pasteur, ebright@waksman.rutgers, mlipsitc@hsph.harvard, mto@umn, tinglesby@jhu, carl.heneghan@phc.ox, michael.levitt@stanford, Jayanta Bhattacharya <jay@stanford>, karol.sikora@buckingham, johan.giesecke@ki, Ian Frazer <i.frazer@uq>, Collignon, Peter (Health) <peter.collignon@act>, roy.anderson@imperial, president@royalsociety, dcannadi@princeton, V. Ramakrishnan <ramak@merck-lmb.cam>, InstituteDirector@turing, chris.conlon@ndm.ox, Prof Robert Clancy <robert.clancy181@>, sunetra.gupta@zoo.ox, Heidi.Larson@lshtm, graham.medley@lshtm, melinda.mills@sociology.ox, regius@medsci.ox, dak30@psu, Peter A. McCullough <PeterAMcCullough@>, Nick Hudson <nick.hudson@pandata>, Emma McArthur <ejminoza@>, anthony.harnden@phc.ox, Adam.Finn@bristol, adrian.hill@ndm.ox, sarah.gilbert@ndm.ox, president@science, Geert Vanden Bossche <geert.vandenbossche@>, Robert Malone (rwmalonemd@), Jonathan Engler <jengler@>, a.read@psu, Bret Weinstein <bret.weinstein@>, Tess Lawrie <tess@e-bmc>, fionagodlee@, david.oliver@rcplondon, jonathan.ball@nottingham, eleanor.riley@ed, Christopher Goodnow <c.goodnow@garvan>, media@rcp, John Shine <j.shine@garvan>, Brendan Crabb <brendan.crabb@burnet>, Sharon Lewin <sharon.lewin@unimelb>, kathryn.north@unimelb, john.edmunds@lshtm, Norman Fenton <n.fenton@qmul>, robert.dingwall@ntu, u.power@qub, kuldorff@brownstone

For the attention of:

Gus Dagleish
Professor of Oncology
St George's
University of London

Gus re **your recent article published on *The Daily Sceptic***, which is actually your email response to me and *BMJ* editor Kamran Abbasi and others, re **my email to Kamran Abbasi** noting **that the failure to obtain 'valid informed consent' before the Covid jabs is at the heart of medical ethics, (including jab mandates), and that this should be a priority topic on *The BMJ*.**

I'm disappointed your response was edited before being published on *The Daily Sceptic*, with the leading sentence of your email being removed, i.e.:

| I write in total support of Elizabeth Hart.

This sentence is important because it demonstrates 'total support' from an establishment insider - a professor of oncology at St George's University of London - **for my request to *BMJ* Editor in Chief Kamran Abbasi to make 'informed consent' before medical interventions, such as Covid jabs, a priority topic on *The BMJ*.** I understand you focusing on the cancer and boosters angle but, the point is, your response was prompted by my emails, and the picture is much bigger than just people with cancer being adversely affected after boosters...**this is about people of all ages and health status, including children and young people, being pressured to have the jabs.**

My email to Kamran Abbasi includes **my emails to Australian federal health minister Mark Butler, which detail that the former Australian government led by Scott Morrison lied to health practitioners about them having medical indemnity specifically for administering Covid jabs.**

This is very significant - **health practitioners in Australia were told they would have protection for giving the Covid jabs...and now it turns out they haven't got this protection.** So it seems the Morrison government **tricked** health practitioners into cooperating with the Covid jab rollout, **which included millions of people being pressured, coerced and manipulated to submit to Covid jabs under mandates** - in order to attend their place of work (No Jab, No Job), travel interstate and overseas, and participate in civil society - e.g. sporting activities, theatres, restaurants and shopping in most states, and attendance at major venues such as the Adelaide

Oval, the Fringe, even the zoo! Similarly parents have been pressured to have their children Covid jabbed, despite the Australian Technical Advisory Group on Immunisation (ATAGI) acknowledging **children are at little risk of Covid-19 - children and so many others have been subjected to unnecessary medical interventions.**

People were effectively 'cancelled out' of society in Australia if they refused to have the jabs. This is an appalling situation in a supposed 'free' country.

Given the coercion, obviously many people have not given **'voluntary' informed consent** to this medical intervention.

This is important to think about, because there are major implications for health practitioners' obligation to obtain 'valid informed consent' before the jabs, which the current Albanese government has confirmed is still required. There are major implications for medical ethics...

While the introduction to your article on *The Daily Sceptic* describes my email to Kamran Abbasi as a 'colleague's plea', I'm not your 'colleague' in the sense that I'm not inside the scientific/medical establishment. I'm an 'outsider', an independent researcher, without conflicts of interest, who has been investigating vaccination policy and practice for the past 14 years. During the course of my work, **it's become clear the entire international vaccination policy area is a cesspit of conflicts of interest and pharma dominance, and particularly influenced by the Bill & Melinda Gates Foundation.** For 14 years my concerns about vaccination policy and practice have been ignored and suppressed by the medical/scientific establishment, and quite frankly, **it's time for the Covid debacle to blow this thing out of the water...**

I'm raising this matter with you because you including the sentence **"I write in total support of Elizabeth Hart"** in your response to me and Kamran Abbasi is important...and it's important also that this sentence was removed when your response was published on *The Daily Sceptic*, and also left out of a recent article on *The Conservative Woman*, see: **Cancer specialist says Covid boosters are harming his patients.** This *TCW* article also fails to properly acknowledge my original email on informed consent.

Just think about this - an independent researcher, outside the scientific/medical establishment, who is challenging the Covid narrative **and exposing that the former Australian Morrison government lied to health practitioners to get their cooperation for the Covid jab rollout, has been airbrushed out of this story...** This matters because Covid has finally shone a light on the widespread corruption in the vaccine industry; it's highlighted the rot within the scientific and medical establishment and this must be investigated and exposed.

During the Covid debacle, the public has been subjected to the relentless tyranny of 'experts' for almost three years, and it's way past time for this to blow sky high!

I do appreciate your support Gus, but the discussion must be broadened - **'the people' have been run over roughshod during this biggest crime of all time...it's time for us to be included in the conversation.** Given what has occurred with the grossly disproportionate and ill-targeted Covid response, soon there won't be any trust left in the scientific and medical establishment, what a mess.

Elizabeth

Elizabeth Hart

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

vaccinationispolitical.net

On Tue, Nov 22, 2022 at 9:29 PM Gus Dalglish <dalgles@sgul.ac.uk> wrote:

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 Dalgleish MD FRACP FRCP FRCPath FMedSci

From: Elizabeth Hart <elizhart@gmail.com>

Date: Monday, 21 November 2022 at 11:28

To: Kamran Abbasi <kabbasi@bmj>

Cc: Peter Doherty <pcd@unimelb>, p.openshaw@imperial, a.akbar@ucl, Ramesh Thakur <ramesh.thakur@anu, andrew.pollard@paediatrics.ox, Gus Dalgleish <dagleis@sgul>, jioannid@stanford, j.mcvernon@unimelb, neil.ferguson@imperial, gcsa@go-science, c.whitty@nhs, Sharon Davies <sdavies@bmj>, Peter Doshi <pdoshi@bmj>, Theodora Bloom <tbloom@bmj>, allyson.pollock@ncl, simon.wain-hobson@pasteur, ebright@waksman.rutgers, mlipsitc@hsph, mto@umn, tingesby@jhu, carl.heneghan@phc.ox, michael.levitt@stanford, Jayanta Bhattacharya <jay@stanford>, karol.sikora@buckingham, johan.giesecke@ki, Ian Frazer <i.frazer@uq, Collignon, Peter (Health) <peter.collignon@act, roy.anderson@imperial, president@royalsociety, dcannadi@princeton, V. Ramakrishnan <ramak@mrc-lmb.cam>, InstituteDirector@turing, chris.conlon@ndm.ox, Prof Robert Clancy <robert.clancy181@>, sunetra.gupta@zoo.ox, Heidi.Larson@lshtm, graham.medley@lshtm, melinda.mills@sociology.ox, regius@medsci.ox, dak30@psu, Peter A. McCullough <PeterAMcCullough@>, Nick Hudson <nick.hudson@pandata>, Emma McArthur <ejminoz@>, anthony.harnden@phc.ox, Adam.Finn@bristol, adrian.hill@ndm.ox, sarah.gilbert@ndm.ox, president@science, Geert Vanden Bossche <geert.vandenbossche@>, Robert Malone (rwmalonemd@, Jonathan Engler <jengler@>, a.read@psu, Bret Weinstein <bret.weinstein@>, Tess Lawrie <tess@e-bmc.co>, fionagodlee@, david.oliver@rcplondon, jonathan.ball@nottingham, eleanor.riley@ed, Christopher Goodnow <c.goodnow@garvan>, media@rcp, John Shine <j.shine@garvan>, Brendan Crabb <brendan.crabb@burnet>, Sharon Lewin <sharon.lewin@unimelb>, kathryn.north@unimelb, john.edmunds@lshtm, Norman Fenton <n.fenton@qmul>, robert.dingwall@ntu, u.power@qub, kulldorff@brownstone

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 jobs 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 jobs, 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

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

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.gov.au>

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

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 job mandates - which pressure, coerce and manipulate people to submit to Covid jabs, in contravention of *The Australian Immunisation Handbook*, i.e. job 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

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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

vaccinationispolitical.net