

Informed consent and mass population Covid-19 vaccination - considering Rogers v Whitaker

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To: minister.butler@health.gov.au
Cc: Emma McArthur <ejminoz@gmail.com>

For the attention of:

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

Mark Butler, millions of adults and children in Australia have been ordered to have Covid-19 vaccinations, regardless of their health status and risk of Covid-19.

I suggest in most instances Covid-19 vaccination is an *unnecessary medical intervention*, against a disease it was known from the beginning wasn't a serious threat to most people, with the WHO acknowledging "Most people infected with the virus will experience mild to moderate illness and recover without requiring special treatment..." (See attached WHO statement on Coronavirus (COVID-19).)

The vast majority of people are not 'patients' in need of a medical intervention to correct a health problem, or protect them from serious harm. The majority of people are effectively protected via their own immune response, without need for the artificial interference of repeated Covid-19 vaccine products.

Consider the case of Rogers v Whitaker 1992, which underpins health practitioners' legal and ethical obligation to obtain informed consent. In this case, Maree Whitaker, a patient with an existing eye condition, consulted Christopher Rogers, an ophthalmic surgeon. This was a one on one consultation between a patient and a medical professional with specific expertise.

Contrast this case with the millions of people who have been pressured, coerced, manipulated, and even *mandated*, to have a medical intervention of no benefit to them. Moreover, these individuals were compelled to present at a 'vaccination clinic' in order to be injected with a medical product, by a health practitioner who is unlikely to have specific expertise in Covid-19 or Covid-19 vaccine products.

Mark Butler, your department has confirmed to me: "Informed consent should be obtained for every COVID-19 vaccination, as per usual consent procedures for other vaccinations." This isn't happening - people are not being properly informed. Additionally, people under mandates are clearly not able to give lawful consent if they are attending the vaccination clinic under duress, faced with the threat of loss of livelihood or freedom of movement and association.

The medical profession is very much in the frame for this medical and political disaster, as they should have refused to cooperate with *mandated* medical interventions - are they now at risk of liability for administering unnecessary Covid-19 vaccinations, without authentic voluntary informed consent? (See my presentation to the Australian Medical Network: Voluntary Informed Consent and Covid Jab Mandates - Are we sitting on a powder keg? February 2023. PowerPoint slides for this presentation.)

Both the Albanese government and the former Morrison government have confirmed that health practitioners do not have specific medical indemnity for administering the Covid-19 vaccinations, in response to my colleague Emma McArthur's and my own correspondence on this matter, as summarised in my email to you dated 21 November 2022, see: Response re: Are health practitioners covered for indemnity insurance re the Covid jabs? (Copies of letters we received from the Department of Health and Aged Care are attached.)

Health practitioners, businesses and others who have overridden voluntary informed consent obligations must be warned about the potential ramifications.

Mark Butler, the Australian federal, state and territory governments must take immediate steps to address this matter, in the first instance ensuring all Covid-19 vaccination mandates are dropped.

I request your urgent response.

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

5 attachments



mc22-018819-signed-highlighted-1.pdf

doh-reply-21-12-2021.pdf 120K

doh-reply-28-01-2022.pdf 100K

doh-reply-17-january-2023.pdf