

Federal Judge Orders CDC to Release V-safe Texts Detailing COVID Vaccine Injuries

By [John-Michael Dumais](#)

Global Research, January 23, 2024

[Children's Health Defense](#) 16 January 2024

Region: [USA](#)

Theme: [Law and Justice](#), [Science and Medicine](#)

All Global Research articles can be read in 51 languages by activating the Translate Website button below the author's name (only available in desktop version).

To receive Global Research's Daily Newsletter (selected articles), [click here](#).

Click the share button above to email/forward this article to your friends and colleagues. Follow us on [Instagram](#) and [Twitter](#) and subscribe to our [Telegram Channel](#). Feel free to repost and share widely Global Research articles.

[New Year Donation Drive: Global Research Is Committed to the "Unspoken Truth"](#)

In a "[huge win for transparency](#)," a federal judge this month [ordered](#) the Centers for Disease Control and Prevention (CDC) to disclose the entirety of a critical COVID-19 vaccine safety database to independent researchers and the public.

The ruling requires the CDC to produce more than 7.8 million free-text reports detailing adverse reactions submitted by [COVID-19](#) vaccine recipients through the [V-safe](#) monitoring app. The agency must release the texts according to a strict schedule over the next year.

The judge rejected the CDC's claims that confidentiality concerns and resource limitations prevented the agency from publicly releasing the trove of first-hand testimonies.

Instead, U.S. District Judge Matthew Kacsmaryk for the Northern District of Texas, Amarillo Division, embraced arguments from the plaintiffs — the nonprofit watchdog group [Freedom Coalition of Doctors for Choice](#) — that obscuring the data enabled potentially misleading safety conclusions by hindering full understanding of the vaccines' impacts.

[Prior lawsuits](#) forced the CDC to release superficial, check-the-box summaries of common symptoms generated by the V-safe system. However, the free-text fields that the CDC is now required to release represent the lone channel for reporting serious conditions like [myocarditis](#), [blood clots](#) or [strokes](#).

The CDC so far has analyzed data only from the first one to two weeks after vaccination, painting an incomplete picture of the long-term dangers of the mRNA shots. The release of the full qualitative accounts offers the public the opportunity to undertake more detailed and accurate safety assessments.

In his ruling, [Kacsmayk wrote](#):

“If ‘some scientists’ — sponsored or platformed by Defendants — ‘have chosen to use’ only the first week or two of data to report the vaccine is safe and effective, then other scientists should be permitted to access the data to ‘pierce the veil of administrative secrecy,’ ‘open agency action to the light of public scrutiny,’ and ‘promote the disclosure of information.’ ...

“With billions of taxpayer dollars expended to develop, distribute, administer, and fund messaging campaigns, Plaintiff assumes a hefty and viable public interest in examining the raw clinical data.”

“This is a huge win for transparency,” Aaron Siri, attorney for the plaintiff, told Del Bigtree on the Jan. 11 episode of [The Highwire](#). “It’ll be an incredible opportunity to actually see what was being told to the CDC by the public.”

THIS. IS. SO. AWESOME.

If the vaccine is so safe and effective, the CDC should be tripping over itself to publish this information widely rather than trying everything it can to withhold it.

A HUGE victory.

Epidemiologists worldwide are CELEBRATING. <https://t.co/UFqQEwhblj>

— Steve Kirsch (@stkirsch) [January 12, 2024](#)

“There is substantial public interest in the data that supported, and continues to support, the [government’s promotion of the COVID-19 vaccines](#) and boosters,” Kacsmayk wrote, adding that the data should be provided to “treating physicians, researchers, parents, [vaccine] recipients, and non-recipients.”

[Brian Hooker, Ph.D.](#), chief scientific officer for Children’s Health Defense, told [The Defender](#), “It is criminal that the CDC would not make this information public automatically.”

“It belies the fact that they don’t want the American people to know the extent of the damage from the COVID-19 vaccine,” Hooker added. “The judge’s order represents a clarion call for transparency around vaccine harms and stands to impact pivotal decision-making processes for future public health emergencies.”

“I think this is going to be the death blow to this cover-up,” speculated Bigtree. “This may change this whole conversation forever.”

The first tranche of nearly 400,000 free-text entries, which the judge ordered to be released by Feb. 15, will be available for public viewing and analysis on the Informed Consent Action Network’s (ICAN) [V-safe data page](#).

Details on Lawsuit and Court Ruling

The legal effort to unseal the V-safe data originated with a Freedom of Information Act

(FOIA) request for the free-text entries and associated registration codes [filed](#) Jan. 3, 2023, by the Freedom Coalition of Doctors for Choice.

The Texas-based group was formed specifically to procure and circulate the V-safe's user-reported vaccine impacts to enable outside evaluation.

Despite acknowledging that some redaction of respondents' identifying details could prove necessary, the CDC refused to produce any records, citing confidentiality concerns and resource limitations.

"The non-exempt information within the Free-Text Responses is not reasonably segregable, because having to review and redact 7.8 million Free-Text Responses to segregate non-exempt information would impose an unreasonable burden on the agency," the CDC contended, according to court documents.

The plaintiff coalition pushed back on those claims in follow-up appeals, arguing the urgency of understanding the vaccines' complete safety profile justified the effort to supply the raw narratives.

Coalition attorney Siri specifically called the single week of data the CDC wanted to disclose "misleading," adding, "Those free text fields and the data in those free text fields are so critical," because "those 10 million individuals [who took the COVID-19 vaccine] could write in whatever they wanted."

The 10 million who signed up for the V-safe were "clearly all fans of the vaccine," who were "not forced" to get the shots and "wanted the vaccine to work for them ... [and] to track [their] health," Bigtree said.

The fact that 7.8 million entries were made "should be troubling, because I don't think people are writing in, 'Thank you,'" Siri said. "They're writing in symptoms, they're writing in issues of concern."

Siri shared what one V-safe user reported, without receiving any response from the CDC:

Here is an example of a V-safe entry by a Ph.D. who got the C-19 V to set an example for her students. Soon after the shot, she reported to V-safe serious harm with the plea "Help me!" yet over 100 days later reported to V-safe "still full disability, ... 100+ days of speech,... <https://t.co/zQko9URglH>

— Aaron Siri (@AaronSiriSG) [January 12, 2024](#)

Of the 10.1 million people enrolled in V-safe, [782,913 \(7.7%\) needed medical care](#) after getting the vaccine, while 2.5 million (25%) suffered a [side effect serious enough](#) that it affected their day-to-day lives.

The CDC wanted to deny access to the text fields. Instead, it wanted to categorize the vaccine recipients' input, and put a code on different issues, according to Bigtree.

"So you ended up getting around that," Bigtree told Siri. "They didn't get to code this and say, 'Well, there was like about 500 that were about some sort of chest pains.'"

Kacsmark said the plaintiffs presented information that some of the CDC's vaccine studies "may be misleading or based upon cherry-picked data." He wrote:

"One study reported that 0.8% to 1.1% of users reported needing medical care according to the check-the-box data. ... However, when the raw data was released pursuant to separate FOIA litigation, it showed some 7.7% of V-safe users reported needing medical care and an additional 25% missing school or work or unable to perform normal activities."

Kacsmark adopted the plaintiff's transparency stance and downplayed the confidentiality risk with the expectation that names and birthdates could be scrubbed through software review. He wrote:

"Production is not unreasonably burdensome for at least four reasons: the requested records are not so voluminous; only a small percent of records will require any redaction; the redaction process is largely straightforward and capable of automated assistance; and blanket exemption claims covering a mass of records are impermissible."

While accepting that the assessment could tax CDC resources, Kacsmark insisted the unprecedented scale of the [vaccination campaign](#) warranted commensurate accountability. "Even if production entails a heavy burden, production is still warranted," he wrote.

Beyond compelling the release of all entries, the judge also granted the plaintiff's requests for expedited processing and a fee waiver in acknowledgment of the extreme public benefit.

Free-text Data Sole Channel for Conveying Full Depth of Vaccine Injuries

The [V-safe system](#) was designed to capture survey data from vaccine recipients daily for the first seven days, weekly for the following five weeks, and at three-, six- and 12-month intervals.

While the prior check-the-box disclosures offered a superficial glimpse into common reactions, the free-text narratives represent the sole channel for conveying the full depth of vaccine experiences, including severe and unintended consequences.

The check-box categories focused narrowly on acute symptoms like pain, swelling, fatigue and nausea — symptoms the CDC claimed demonstrate the vaccine is working, according to the court document — and provided little room for conveying substantive harms.

v-safeSM
after vaccination
health checker

English 中文 Tiếng Việt Español 한국어

75%

Symptom Check

Have they had any of these symptoms today where they got the shot (injection site)? *

Select all that apply.

☒ **Pain**

☐ Redness

☐ Swelling

☐ Itching

☐ None

How would you rate their symptoms?

- Mild:** you notice symptoms, but they aren't a problem
- Moderate:** symptoms that limit your normal daily activities
- Severe:** symptoms make normal daily activities difficult or impossible

Pain *

☐ Mild ☒ **Moderate** ☐ Severe

☐ Chills

☐ Headache

☐ Joint pains

☐ Muscle or body aches

☐ Fatigue or tiredness

☒ **Nausea**

☐ Vomiting

☐ Diarrhea

☐ Abdominal pain

☐ Rash, not including the immediate area around the injection site

☐ None

Source: The Highwire, Ep. 354

“Any concerning symptoms would necessarily be restricted to only the free-text responses, to date unexamined by independent researchers not sponsored by Defendants,” Kacsmaryk wrote.

“They [CDC policymakers] relegate[d] [serious symptoms] to the free-text fields,” Siri told Bigtree. “And that’s what makes getting that data, those 7.8 million free-text entries, so critical so we could see what symptoms were reported.”

In its analyses, the CDC has thus far predominantly emphasized check-box outcomes from only the first week post-vaccination.

“Notably, Plaintiff points to several studies published and presented by CDC that rely upon ... the V-safe data,” Kacsmaryk said in his ruling. “All but one of these studies considered only the first seven days after receiving a vaccine.”

In a [Substack article](#), Siri explained why the V-safe is better than the Vaccine Adverse Event

Reporting System ([VAERS](#)):

“Unlike VAERS, the data in v-safe is gathered from a known and quantifiable universe of individuals. In fact, v-safe has precisely 10,108,273 registered users as of August 2022. These users are asked to answer the same questions. By aggregating answers to identical questions in v-safe, the rate of an adverse reaction can be calculated. That is not possible with VAERS.”

v-safe™
after vaccination
health checker

English 中文 한국어 Tiếng Việt Español Française

0%

Hi there!
Let's start today's health check-in for .

How are they feeling today? *

Good Fair Poor

Since we last contacted you, have they experienced any new symptoms or health conditions? *

☒ Yes
☐ No

Free-text field:
Please describe the symptoms or health conditions. *

Did any of their symptoms or health conditions cause them to: *

Select all that apply.

☒ Be unable to work or attend school
☐ Be unable to do their normal daily activities
☒ Get care from a doctor or other healthcare professional
☐ None of the above

What type of healthcare visit did they have? *

Select all that apply.

☐ Telehealth, virtual health, or email health consultation
☐ Outpatient clinic or urgent care clinic visit
☐ Emergency room or emergency department visit
☐ Hospitalization

Other - please describe

Since their last check-in, did they have a positive COVID-19 test or were they told by a health care provider that they had COVID-19? *

☒ Yes
☐ No

When were they diagnosed? *

If you are not sure of the exact date, please enter a best guess.

- Month - - Day - - Year -

How is their health now compared to before their COVID-19 vaccination? *

☐ Better
☒ About the same
☐ Worse

Source: The Highwire, Ep. 354

According to the lawsuit complaint, the [CDC's V-safe protocol](#) clearly anticipated that all data might eventually be shared.

“A final data set at the end of the v-safe program with de-identified aggregate data will be made available for external data requests or through Freedom of Information Act (FOIA) requests,” the protocol stated.

What Happens Next

The court order mandated the release of the first tranche of at least 390,000 individual V-safe free text submissions by Feb. 15, 2024, and the remainder on a monthly timeline, through Jan. 15, 2025.

[ICAN](#), which bankrolled the FOIA lawsuit, pledged to immediately publish those initial entries upon receipt with no restrictions.

DUE-BY DATE	TERM MINIMUM	CUMMULATIVE MINIMUM
February 15, 2024	390,000	390,000
March 15, 2024	390,000	780,000
*April 15, 2024	390,000	1,170,000
May 15, 2024	650,000	1,820,000
June 15, 2024	650,000	2,470,000
*July 15, 2024	650,000	3,120,000
August 15, 2024	780,000	3,900,000
September 15, 2024	780,000	4,680,000
*October 15, 2024	780,000	5,460,000
November 15, 2024	780,000	6,240,000
December 15, 2024	780,000	7,020,000
*January 15, 2025	780,000	7,800,000

Source: Court order

“Scientists around the world are going to be getting real science in their hands, real data that they can start crunching so all of us in the world can actually know what happened here,” Bigtree said, confirming ICAN’s intentions of sharing the revelations publicly.

The [ICAN press release](#) stated:

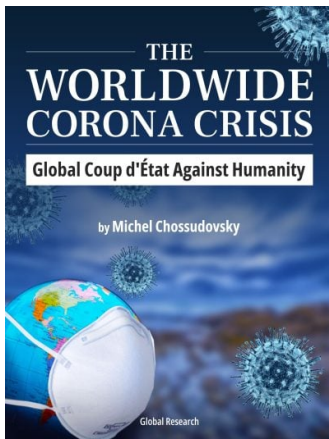
“This ruling sends a clear message to our federal agencies: we are not moving on and forgetting about the pandemic or the actions they. ICAN will not stop until ALL the data is released to the public and there is true transparency and accountability around COVID-19.”

*

Note to readers: Please click the share button above. Follow us on Instagram and Twitter and subscribe to our Telegram Channel. Feel free to repost and share widely Global Research articles.

John-Michael Dumais is a news editor for The Defender. He has been a writer and community organizer on a variety of issues, including the death penalty, war, health freedom and all things related to the COVID-19 pandemic.

Featured image is from CHD



The Worldwide Corona Crisis, Global Coup d'Etat Against Humanity

by Michel Chossudovsky

Michel Chossudovsky reviews in detail how this insidious project “destroys people’s lives”. He provides a comprehensive analysis of everything you need to know about the “pandemic” — from the medical dimensions to the economic and social repercussions, political underpinnings, and mental and psychological impacts.

“My objective as an author is to inform people worldwide and refute the official narrative which has been used as a justification to destabilize the economic and social fabric of entire countries, followed by the imposition of the “deadly” COVID-19 “vaccine”. This crisis affects humanity in its entirety: almost 8 billion people. We stand in solidarity with our fellow human beings and our children worldwide. Truth is a powerful instrument.”

Reviews

This is an in-depth resource of great interest if it is the wider perspective you are motivated to understand a little better, the author is very knowledgeable about geopolitics and this comes out in the way Covid is contextualized. —Dr. Mike Yeadon

In this war against humanity in which we find ourselves, in this singular, irregular and massive assault against liberty and the goodness of people, Chossudovsky’s book is a rock upon which to sustain our fight. –Dr. Emanuel Garcia

In fifteen concise science-based chapters, Michel traces the false covid pandemic, explaining how a PCR test, producing up to 97% proven false positives, combined with a relentless 24/7 fear campaign, was able to create a worldwide panic-laden “plandemic”; that this plandemic would never have been possible without the infamous DNA-modifying Polymerase Chain Reaction test – which to this day is being pushed on a majority of innocent people who have no clue. His conclusions are evidenced by renown scientists. —Peter Koenig

Professor Chossudovsky exposes the truth that “there is no causal relationship between the virus and economic variables.” In other words, it was not COVID-19 but, rather, the deliberate implementation of the illogical, scientifically baseless lockdowns that caused the shutdown of the global economy. –David Skripac

A reading of Chossudovsky’s book provides a comprehensive lesson in how there is a global coup d’état under way called “The Great Reset” that if not resisted and defeated by freedom

loving people everywhere will result in a dystopian future not yet imagined. Pass on this free gift from Professor Chossudovsky before it's too late. You will not find so much valuable information and analysis in one place. -Edward Curtin

ISBN: 978-0-9879389-3-0, Year: 2022, PDF Ebook, Pages: 164, 15 Chapters

Price: ~~\$11.50~~ FREE COPY! [Click here \(docsend\) and download.](#)

We encourage you to support the eBook project by making a donation through Global Research's [DonorBox "Worldwide Corona Crisis" Campaign Page](#).

The original source of this article is [Children's Health Defense](#)
Copyright © [John-Michael Dumais](#), [Children's Health Defense](#), 2024

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [John-Michael
Dumais](#)

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca
www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca