

# Washington DOH Found 358,193 Vaccine Breakthrough Cases

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*The WA State Department of Health states in their [SARS-CoV-2 Vaccine Breakthrough Surveillance and Case Information](#) report dated February 16, 2022:*

The criteria for identifying vaccine breakthrough cases include a positive lab test (either a PCR test or an antigen test) at least 14 days after a person received their last recommended dose of an authorized COVID-19 vaccine.

We wait 14 days because some people could get COVID-19 soon after vaccination when their body hasn’t had enough time yet to build full protection. These infections are not considered vaccine breakthrough cases because they could have been exposed before they were vaccinated. It typically takes about two weeks after the final dose of vaccine for the body to build a high level of protection against the disease.

The first COVID-19 vaccines were administered in Washington in mid-December 2020, so we started our surveillance for people who meet these case criteria during the week that began on January 17, 2021.

From January 17 [2021] – February 05, 2022:

- 358,193 SARS-CoV-2 vaccine breakthrough cases have been identified in Washington State. Of these breakthrough cases:
  - 19% reported symptoms
  - 2% were hospitalized
  - 0.4% died of COVID-related illness

[bold emphasis added]

Key points for reflection:

- 358,193 lab-identified “breakthrough cases”, with 2% hospitalizations and 0.4% deaths are staggering and represent vaccine failure.
- In order to fully understand the impact of the shots on an individual’s risk from SARS-CoV-2, more data is needed to be shared with the public. We need:
  - the number of breakthrough cases, hospitalizations, and deaths in those who have received one, two, three, four, and more injections but who were diagnosed before the 14 day window had passed since the last dose.
- By claiming none of the COVID-19 cases occurring inside of the 14-day window are “breakthrough” cases, they are artificially increasing the rates of infection in the “non-vaccinated” group.
- Under the DOH’s criteria, an individual diagnosed with COVID-19 who is beyond 14 days from their second dose, but has been recommended a third dose, is not considered a “breakthrough case.” They are considered a “non-vaccinated” case. Some hospitals and clinics only have “vaccinated” and “unknown” status on their forms. Someone with three shots could technically be marked as “unknown” using this criteria.
- By not examining the number and severity of cases of COVID-19 in those who have had 1 or more shots in various windows of time, the DOH is not able to properly determine if the shot increases risk of infection, or increases risk of severity, hospitalization, or death within those windows.
- Is DOH collecting data on the rates of non-COVID hospitalizations and deaths in the vaccinated? Deaths due to heart attack, stroke, autoimmune disease, etc?
- In order to fully understand the impact of the shots on an individual’s risk of harm, proper data must be gathered. It is estimated that the underreporting factor for COVID shots to VAERS is [between 6.5 \(CDC claim\) and 40 \(independent evaluation\)](#) .
- Why is the DOH not collecting numbers of breakthrough cases among those with natural immunity? Why aren’t they collecting the severity of the breakthrough illness? Hospitalization rates and deaths among those with natural immunity who have a breakthrough case?
- If DOH truly wants to protect the public moving forward, they will gather and report ALL the data so that individuals can decide which is safest and most effective for themselves and their families. [More than 150 studies on natural immunity are showing it is superior](#). Why is this mentioned nowhere on taxpayer funded “health” department websites?

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