

Truly Informed Consent Checklist for Pfizer BioNTech Injections for Children
A “Vaccine” Injury Prevention Project, By Diane Perlman, PhD ConsciousPoliticiansDC@gmail.com

“... we’re never going to learn about how safe this vaccine is unless we start giving it.” – Professor Eric Rubin of Harvard University, testifying before FDA’s Vaccines and Related Biological Products Advisory Committee (VRBPAC), October 26, 2021, on myocarditis and deaths, before voting to approve.
https://www.youtube.com/watch?app=desktop&v=laaL0_xKmmA

Are you accurately informed? An hour of deep investigation can prevent a lifetime of regret.

Children are incapable of informed consent. Many parents defer to the CDC, despite incomplete safety studies, flimsy, falsified data, exclusion of subjects, whistleblower testimony, expert warnings, no long-term data and over 142,000 public comments urging committee members to vote “No” on approval.

What you don’t know can hurt your child. Do not delegate your responsibility to anyone. You owe it to your child to be fully informed about short and long-term safety **before** injecting them with mRNA, which has polyethylene glycol and undisclosed ingredients. There is *no* data on interactions with other vaccines. No party has any liability for adverse reactions, as occurred with 12 - 17-year-olds.

The **Nuremberg Code**, the most important human rights document on medical ethics states, **“The voluntary consent of the human subject is absolutely essential.** ... the person involved should have legal capacity to give consent; should ... be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, over-reaching, or other ulterior form of constraint or coercion, and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision. .. there should be made known to him ... the effects upon his health or person which may possibly come from his participation in the experiment.”

Do not be manipulated by fear and false information. “Vaccines” do not prevent infection or transmission. Healthy children have preexisting, innate, immune effector cells. Their immune systems handle Covid better than adults, with zero risk of dying. Most have no or mild symptoms and achieve enduring, robust natural immunity against future variants, superior to “vaccine” immunity which wanes over time. Natural immunity contributes to herd immunity. The Amish reached herd immunity in 3 months without lockdowns, distancing or masks, as have other groups. Children do not transmit Covid to adults. mRNA shots can alter their immune systems and subject them continuing booster shots. “Mass vaccination campaigns in children will prevent them from contributing to herd immunity” and provoke “more infectious viral variants.” Dr. Geert Vanden Bossche, DVM, PhD. Watch this most important, warning interview explaining science <https://thehighwire.com/videos/vaccine-expert-warns-of-covid-vaccination-catastrophe/>

Children with Covid rarely require treatment. If they do, effective protocols that have been censored, developed by independent, ethical doctors are on <https://covid19criticalcare.com> and other places. They know how to treat Covid. Treating vaccine injuries is new and challenging. Boost everyone’s immunity with a healthy diet, sunlight, adequate Vitamin D levels, zinc, C, A, melatonin, etc. to reduce severity.

Risk/Benefit Analysis. Older people with co-morbidities have the highest risk from Covid. Healthy, younger people have virtually zero risk from Covid. Risks from the “vaccines” increase with decreasing age. The very few children who died *with* Covid, not *from* Covid, had serious illnesses like leukemia, cystic fibrosis, diabetes, and obesity. Healthy children have no benefit from vaccines which undermine their effective innate immunity, subject them to boosters and render them more vulnerable in the future.

Do not act under pressure or be controlled by fear. Not from authorities, peers or your children’s peers. Do your own research. Think for yourself. You will live with any consequences. Challenge the basis for making social life contingent on getting the shots. These are manipulative forms of coercion, though they seem plausible. **The best defense against any virus is a strong, healthy immune system.**

TRULY INFORMED CONSENT CHECKLIST

Any person who gives consent to a medical procedure for themselves or their dependents must be fully informed of ALL the known or potential adverse effects of the treatment. If they have not been FULLY INFORMED those responsible for obtaining consent are guilty of malpractice. (Gary Kohls, MD)

1. **Yes__ No __** I agree to allow my child to receive the Pfizer BioNTech mRNA injection knowing that there is no reliable safety data and that they will be participating in a medical experiment, which requires *fully* informed consent according to the Nuremberg Code.
2. **Yes__ No __** I am informed that mRNA injections are technically not “vaccines.” They are genetic interventions never used before on humans and based on insufficient animal studies. They wane over time, do not prevent infection or transmission, and will be followed by boosters. Impacts may be irreversible.
3. **Yes__ No __** I am informed that there is no fully approved FDA Covid vaccine that is available in the US.
4. **Yes__ No __** I am informed that the FDA and CDC approved of the Pfizer mRNA injections to children based on an Emergency Use Authorization (EUA), even **though there is no emergency for 5 - 11-year-olds.**
5. **Yes__ No __** I am informed that most children who get Covid have mild symptoms, if any, and acquire superior, robust and enduring natural immunity shown to persist for many years or a lifetime and is effective against variants. T-cell tests demonstrate natural immunity whether or not there are also antibodies.
6. **Yes__ No __** I am informed that about 50% have natural immunity far superior to “vaccine” immunity, have *no* benefit from “vaccines” and a 30% higher risk of adverse reactions to the shots, including death.
7. **Yes__ No __** I am informed that the Pfizer shots instruct the cells to manufacture spike proteins which circulate the body and lodge in the organs, in high concentrations in the endothelial cells, ovaries and testes, spleen, heart, and cross the blood-brain barrier.
8. **Yes__ No __** I am informed that the adverse effects from mRNA “vaccines” may include anaphylactic shock, allergic reactions, blood clotting, micro-clotting and other bleeding disorders, thrombosis in the brain, other thrombotic events, myocarditis, pericarditis, heart damage, stroke, tinnitus, vertigo, and more.
9. **Yes__ No __** I am informed that if one has adverse reactions after the first shot, they should not get the second under any circumstances, and that more severe reactions and deaths occur after the second shot.
10. **Yes__ No __** I am informed that “vaccines” pose an elevated risk of myocarditis, highest in young males, causing permanent heart damage and death, including among healthy athletes. There is no data on myocarditis for ages 5 - 11. My child will be part of a medical experiment on myocarditis in this age group.
11. **Yes__ No __** I am informed that some countries halted mRNA injections in children due to myocarditis.
12. **Yes__ No __** I am informed that long-term effects in weeks, months, years or decades are unknown. They may include antibody dependent enhancement, autoimmune diseases, neurodegenerative disorders, heart problems, thrombotic conditions, prion disease and an increase in chronic diseases and reproductive harms including infertility.

Basis for approval for Emergency Use Authorization

13. **Yes__ No __** I am informed that the “safety” studies were conducted by Pfizer, who will profit from approval, and not by independent scientists, and that all data was controlled by Pfizer, including elimination of subjects who had adverse reactions to the first or second dose.
14. **Yes__ No __** I am informed that many voting committee members have financial ties to Pfizer.
15. **Yes__ No __** I am informed that Pfizer’s studies were rushed, methodologically flawed, conducted on very few subjects, and followed for a very short time, incapable of picking up signals for adverse reactions and Pfizer is being investigated for falsification of data, failure to investigate adverse reactions, and more.
16. **Yes__ No __** I am informed that adverse reactions other than fever, chills, headaches, soreness and fatigue were not recorded and that subjects who had serious adverse reactions were eliminated from the study. Their reactions were often dismissed and misdiagnosed as psychological or coincidences.
17. **Yes__ No __** I am informed that based on studies on 12 – 17-year-olds, it is a statistical certainty that there will be adverse reactions, injuries, disabilities, trauma and deaths among 5 – 11-year-olds.
18. **Yes__ No __** I am informed that health economists estimate of the risk/benefit analysis of the Number Needed to Vaccinate (NNTV) concludes that **“For every one child saved by the shot, another 117 would be killed by the shot.”** <https://tobyrogers.substack.com/p/what-is-the-number-needed-to-vaccinate>