

Fecha de ingreso: 27/05/2021 10:59
Lugar de Ingreso: División Jurídico Notarial

Datos del documento

Titulares: DIVISION SERVICIOS JURIDICOS
Resumen: ACCESO A LA ADMINISTRACION PUBLICA
MARIA BETTINA GALO
Cantidad de Actuaciones: 9

Campos del tipo de documento

Procedencia: 12/001/1.511
Nómina Procedencia:
Oficio:



DOCUMENTO COMPLETO

IDOC

Actuación

Fecha Creación: 23/06/2021 9:27
Usuario Creación: MIRIAM OLID
Dependencia: 12/001/1.51 Dpto. De Secretaría Y Acuerdos
Finalizada Por: Gustavo Cardoso, Miriam Olid
Adjuntos: 1
001-1-3590-2021 PRORROGA ACCESO A LA INFORMACIÓN Maria Bettina Galo.pdf

Firmado Por: MIRIAN GRICEL OLID PRESA
Fecha Firma: 23/06/2021 9:27

Firmado Por: GUSTAVO CARDOSO MUÑOZ
Fecha Firma: 23/06/2021 10:35

Ministerio de Salud Pública

Dirección General de Secretaría

VISTO: la solicitud de información pública efectuada por la Sra. María Bettina Galo Viegas, titular de la cédula de identidad N° xxxxxxxx, al amparo de lo dispuesto por la Ley N° 18.381 de 17 de octubre de 2008;

RESULTANDO: que la peticionante solicita información sobre: **1)** cantidad de infectados por el virus de la influenza (gripe) en cualquiera de sus variantes, en los años 2015, 2016, 2017, 2018, 2019, 2020 y 2021, detallados por año; **2)** cantidad de ingresos por gripe y cualquier patología asociada a todos los CTI del Uruguay detallado por años; **3)** cantidad de fallecidos en cada uno de esos años por el virus de la influenza y todas sus variantes (gripe); **4)** cantidad de fallecidos por Sars-Cov.2 /Covid 19 en 2020 y 2021, detallados por años y meses; **5)** cantidad de vacunados en total, desde el comienzo de la vacunación contra el Sars-Cov.2 /Covid 19, detallando qué vacuna se dio, edad, sexo, departamento del domicilio y de la vacunación; **6)** cantidad de ingresos a CTI pos vacunación, indicando edad, sexo, dosis, vacuna dada y efecto adverso presentado; **7)** cantidad de positivos Covid pos vacunación, detallando edad, sexo, dosis y vacuna dada; **8)** cantidad de fallecidos pos vacunas, indicando sexo, edad, vacuna inoculada, dosis y efectos adversos que lo llevan a la muerte; **9)** sobre el RT-PCR: **9.1-** cuántos hisopados RT-PCR se han practicado desde el comienzo de la declaración de pandemia en Uruguay; **9.2-** a qué CT se realizaron los PCR desde el comienzo de la declaración de pandemia; **9.3-** a qué valor fueron adquiridos los Kit RT-PCR y a qué empresas, detallando país de origen; **9.4-** qué otros análisis se practican sobre la base de los PCR para determinar Covid 19; **10)** los estudios serológicos que se practican determinan la cantidad de anticuerpos contra el Sars-Cov.2 que tiene cada persona, esto significa que efectivamente la persona tiene inmunidad contra el SarsCov.2/Covid19; **11)** cuántos pacientes en Uruguay han dejado de ser atendidos a raíz del Covid19, motivos y patologías; **12)** que tratamiento se instruye al paciente con un RT-PCR positivo a Covid 19 en los centros de salud; **13)** existen en el mundo

otros tratamientos que se han investigado, publicado y corroborado por pares, que no son las vacunas Covid 19, se han estudiado para tratamientos contra el Covid: Invermectina, Dióxido de Cloro, etc. y si la respuesta es no, por qué causa? **14)** quienes son todas las personas afectadas al GACH directa o indirectamente; **15)** quienes son las personas afectadas al tratamiento de la Pandemia en el Ministerio de Salud Pública, detallando especialidad, conocimiento, experiencia en patologías relacionadas; **16)** método por el que se aprueban las vacunas en general y en particular las de terapias génicas contra el Covid 19 en Uruguay; **17)** quiénes son los responsables de determinar en Uruguay la eficacia y seguridad de las vacunas Covid 19 y **18)** el Sars-Cov.2 ha sido aislado, secuenciado y purificado según método científico para elementos pequeños en Uruguay? si la respuesta es sí, indicar por quién, documentación al respecto, publicación, corroborado por pares (quiénes);

CONSIDERANDO: I) que se ha entendido necesaria una prórroga para recabar la información respectiva;

II) que corresponde en consecuencia prorrogar el plazo que alude el Artículo 15 de la Ley N° 18.381, a regir a partir del vencimiento del original;

ATENTO: a lo precedentemente expuesto y a lo establecido por Resolución Ministerial N° 38/991 de 22 de enero de 1991;

LA DIRECCIÓN GENERAL DE SECRETARÍA

en ejercicio de las atribuciones delegadas

RESUELVE:

- 1º) Prorrógase el plazo que refiere el Artículo 15 de la Ley N° 18.381 de 17 de octubre de 2008, en referencia a la solicitud de la Sra. María Bettina Galo Viegas, titular de la cédula de identidad N° xxxxxxxxx, por el máximo legal a partir del vencimiento del plazo original.
- 2º) Notifíquese a la parte interesada a través de Secretaría de la Dirección General de Secretaría. Cumplido, pase a la Dirección General de la Salud.

Ref. N° 001-3-3590-2021
MO

Se otorgó N° de Res. DIGESE 429-2021



DOCUMENTO COMPLETO

IDOC

Actuación

Fecha Creación: 19/07/2021 12:22
Usuario Creación: MARTIN THOMASSET
Dependencia: 12/001/1.511 División Jurídico Notarial
Finalizada Por: Martin Thomasset
Adjuntos: 1
Acceso. Galo. 3590.pdf

Firmado Por: MARTÍN LUIS THOMASSET LOUREIRO
Fecha Firma: 19/07/2021 12:23

A DIRECCIÓN GENERAL DE SECRETARÍA

Exp. Ref. N° 3/3590/2021.-

Mediante acceso a la información pública, María Bettina Galo Viegas solicita la siguiente información:

1. Cantidad de infectados por el Virus de la Influenza (Gripe) en cualquiera de sus variantes en los años 2015, 2016, 2017, 2018 , 2019, 2020, 2021, detallados por año.

Los datos se obtienen de la vigilancia centinela de infecciones respiratorias agudas graves (IRAG) en seis prestadores de salud hasta 2019 y ocho a partir de 2020 ubicados en todo el territorio nacional.

Tabla 1. Número de casos de influenza detectados en los centros de vigilancia centinela de IRAG. Uruguay, 2015-2021 (hasta semana epidemiológica 24).

Año	Número de casos
2015	40
2016	53
2017	117
2018	57
2019	47
2020	3
2021 (hasta SEPI 24)	0

Fuente: Departamento de Vigilancia en Salud.

2. Cantidad de ingresos por Gripe y cualquier patología asociada a todos los CTI del Uruguay detallado por años.

Consultadas la Dirección General del Sistema Nacional de Salud y la División Epidemiología, se responde que no se cuenta con dicha información discriminada.

3. Cantidad de muertos en cada uno de esos años por el virus de la Influenza y todas sus variantes (Gripe)

Fallecidos por Influenza (gripe) y Neumonía viral no especificada y Neumonía no especificada:

*Dpto de Estadísticas Vitales - DIGESA - MSP***Referencias Influenza [gripe] y neumonía (CIE 10: J09–J18)****Influenza (gripe)**

J09 -debida a virus de la influenza aviar identificado (Influenza A o H1N1)

J10- debida a otro virus identificado (Influenza B)(Parainfluenza)(gripe AH3)

J11- debida a virus no identificado (gripe)

Neumonías

J12.9 - viral no especificada

J18.9 - Neumonía no especificada

Causa	2015	2016	2017	2018	2019	2020
J09	0	9	2	8	7	1
J10	1	2	0	1	2	0
J11	2	5	5	3	4	0
J129	1	5	0	1	3	0
J189	1054	1278	1032	1024	1135	769

El Ministerio de Salud Pública no cuenta a la fecha con la información referente al año 2021, en la medida que el año se encuentra en curso y por ende sus resultados no están disponibles.

Se adjunta además enlace al siguiente informe: "Vigilancia de la Mortalidad por todas las causas Enero a julio 2015-2020" <https://www.gub.uy/ministerio-salud-publica/sites/ministerio-salud-publica/files/documentos/noticias/Informe%20preliminar%20de%20mortalidad%20global%20enero-julio.pdf>

4. Cantidad de muertos por Sars-Cov.2 /Covid19 en 2020 y 2021, detallados por años y meses.

El Ministerio de Salud Pública publica todos los datos disponibles sobre fallecimientos a través de los boletines epidemiológicos, disponibles en <https://www.gub.uy/ministerio-salud-publica/tematica/boletines-epidemiologicos> y también en la APP Coronavirus.

De cualquier forma, existe una revisión posterior a cargo de un comité de técnicos de la Dirección General de la Salud, cuyo último informe disponible (correspondiente a fines del año 2020) surge del siguiente enlace:

<https://www.gub.uy/ministerio-salud-publica/comunicacion/noticias/informe-epidemiologico-sobre-mortalidad-covid-19-del-31-diciembre-2020>

5. Cantidad de Vacunados en total desde el comienzo de la Vacunación contra el Sars-Cov.2 /Covid19. Detallando qué vacuna se dio, edad, sexo, departamento del domicilio y de la Vacunación.

Se cuenta a la fecha con la información que se adjunta, en función del departamento de vacunación (corresponde destacar que no se cuenta con departamento de domicilio).

Artigas

Grupo etario	Masculino						Femenino					
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech	
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2
12 a 17 años	NA	NA	NA	NA	816	NA	NA	NA	NA	NA	851	-
18 a 49 años	NA	NA	3.554	3.186	506	187	NA	NA	3.997	3.582	1.200	671
50 a 70 años	10	-	1.734	1.687	97	63	2	-	1.811	1.793	162	136
71 a 79 años	136	-	24	21	221	210	148	-	25	21	261	244
80 y más años	6	-	8	5	173	167	15	-	6	4	232	211
Total	152	-	5.320	4.899	1.813	627	165	-	5.839	5.400	2.706	1.262

Canelones

Grupo etario	Masculino						Femenino					
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech	
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2
12 a 17 años	NA	NA	NA	NA	5327	NA	NA	NA	NA	NA	6030	-
18 a 49 años	NA	NA	26.829	22.419	2.714	1.711	NA	NA	30.304	25.547	8.810	6.166
50 a 70 años	559	-	12.929	13.533	976	635	597	-	13.894	14.615	162	136
71 a 79 años	1.473	-	124	105	1.200	1.153	1.784	-	146	122	1.492	244
80 y más años	151	-	16	2	1.523	1.557	218	-	26	4	2.565	2.601
Total	2.183	-	39.898	36.059	11.740	5.056	2.599	-	44.370	40.288	19.059	9.147

Cerro Largo

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	616	NA	NA	NA	NA	NA	NA	703	-
18 a 49 años	NA	NA	3.491	2.996	280	153	NA	NA	4.160	3.643	826	583	
50 a 70 años	7	-	1.430	1.437	88	53	6	-	1.656	1.661	162	136	
71 a 79 años	154	-	28	21	170	180	170	-	21	22	167	244	
80 y más años	11	-	3	2	133	145	17	-	1	1	171	184	
Total	172	-	4.952	4.456	1.287	531	193	-	5.838	5.327	2.029	1.147	

Colonia

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	1491	NA	NA	NA	NA	NA	NA	1672	-
18 a 49 años	NA	NA	6.813	6.017	987	412	NA	NA	7.618	6.877	2.529	1.641	
50 a 70 años	12	-	3.573	3.468	329	232	4	-	3.642	3.631	162	136	
71 a 79 años	37	-	7.198	6.981	1.548	1.350	18	-	7.323	7.295	2.059	244	
80 y más años	2	-	4	3	425	414	3	-	4	4	721	699	
Total	51	-	17.588	16.469	4.780	2.408	25	-	18.587	17.807	7.143	2.720	

Durazno

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	771	NA	NA	NA	NA	NA	NA	863	-
18 a 49 años	NA	NA	4.383	4.100	340	202	NA	NA	4.925	4.658	832	625	
50 a 70 años	0	-	1.864	1.835	87	55	0	-	1.928	1.900	162	136	
71 a 79 años	4	-	22	18	392	373	2	-	17	14	450	244	
80 y más años	9	-	46	37	1.025	965	4	-	36	29	1.279	1.221	
Total	13	-	6.315	5.990	2.615	1.595	6	-	6.906	6.601	3.586	2.226	

Flores

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	470	NA	NA	NA	NA	NA	NA	565	-
18 a 49 años	NA	NA	1.698	1.540	274	102	NA	NA	1.635	1.527	615	365	
50 a 70 años	15	-	969	961	45	31	14	-	945	939	162	136	
71 a 79 años	0	-	0	0	0	0	0	-	0	0	0	244	
80 y más años	52	-	22	17	312	322	38	-	14	13	368	426	
Total	67		2.689	2.518	1.101	455	52	-	2.594	2.479	1.710	1.171	

Florida

Grupo etario	Masculino						Femenino					
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech	
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2
12 a 17 años	NA	NA	NA	NA	852	NA	NA	NA	NA	NA	885	-
18 a 49 años	NA	NA	4.237	3.850	611	230	NA	NA	4.338	3.994	1.298	794
50 a 70 años	8	-	2.304	2.277	127	65	0	-	2.172	2.146	162	136
71 a 79 años	17	-	22	22	596	571	17	-	20	19	553	244
80 y más años	0	-	2	2	309	306	3	-	9	2	393	383
Total	25	-	6.565	6.151	2.495	1.172	20	-	6.539	6.161	3.291	1.557

Lavalleja

Grupo etario	Masculino						Femenino					
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech	
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2
12 a 17 años	NA	NA	NA	NA	577	NA	NA	NA	NA	NA	627	-
18 a 49 años	NA	NA	3.171	2.863	287	149	NA	NA	3.550	3.296	819	609
50 a 70 años	0	-	1.875	1.926	99	68	1	-	1.845	1.925	162	136
71 a 79 años	3	-	22	17	499	516	2	-	32	28	443	244
80 y más años	0	-	3	3	209	206	1	-	3	0	264	257
Total	3	-	5.071	4.809	1.671	939	4	-	5.430	5.249	2.315	1.246

Maldonado

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	1465	NA	NA	NA	NA	NA	NA	1686	-
18 a 49 años	NA	NA	10.852	9.141	1.012	606	NA	NA	11.570	9.915	2.780	2.013	
50 a 70 años	7	-	5.019	5.176	284	203	7	-	5.008	5.143	162	136	
71 a 79 años	20	-	55	50	855	887	32	-	53	42	936	244	
80 y más años	0	-	0	0	387	420	0	-	2	0	658	737	
Total	27	-	15.926	14.367	4.003	2.116	39	-	16.633	15.100	6.222	3.130	

Montevideo

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	14917	NA	NA	NA	NA	NA	NA	16422	-
18 a 49 años	NA	NA	93.476	78.810	11.921	9.141	NA	NA	97.912	82.640	32.524	26.335	
50 a 70 años	101	-	42.496	41.652	3.840	3.175	83	-	47.805	47.193	162	136	
71 a 79 años	363	-	353	334	8.055	8.055	418	-	467	428	11.533	244	
80 y más años	62	-	27	10	5.608	5.595	108	-	64	16	11.586	11.700	
Total	526	-	136.352	120.806	44.341	25.966	609	-	146.248	130.277	72.227	38.415	

Paysandú

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	1647	NA	NA	NA	NA	NA	NA	1922	-
18 a 49 años	NA	NA	6.129	5.087	1.049	387	NA	NA	6.400	5.441	2.345	1.345	
50 a 70 años	26	-	2.973	2.889	178	84	16	-	2.942	2.857	162	136	
71 a 79 años	219	-	38	34	399	380	236	-	37	34	411	244	
80 y más años	11	-	3	1	253	242	16	-	3	1	417	394	
Total	256	-	9.143	8.011	3.526	1.093	268	-	9.382	8.333	5.257	2.119	

Río Negro

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	742	NA	NA	NA	NA	NA	NA	838	-
18 a 49 años	NA	NA	2.991	2.583	418	123	NA	NA	3.112	2.715	866	439	
50 a 70 años	17	-	1.542	1.465	85	44	11	-	1.345	1.290	162	136	
71 a 79 años	244	-	28	26	184	169	150	-	19	18	160	244	
80 y más años	10	-	0	0	177	159	8	-	1	1	150	140	
Total	271	-	4.561	4.074	1.606	495	169	-	4.477	4.024	2.176	959	

Rivera

Grupo etario	Masculino						Femenino					
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech	
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2
12 a 17 años	NA	NA	NA	NA	1091	NA	NA	NA	NA	NA	1251	-
18 a 49 años	NA	NA	4.292	4.817	764	213	NA	NA	5.550	6.041	1.758	851
50 a 70 años	5	-	2.086	2.645	144	66	5	-	2.345	2.766	162	136
71 a 79 años	175	-	28	35	156	143	212	-	24	29	248	244
80 y más años	6	-	3	3	128	128	11	-	1	0	183	170
Total	186	-	6.409	7.500	2.283	550	228	-	7.920	8.836	3.602	1.401

Rocha

Grupo etario	Masculino						Femenino					
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech	
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2
12 a 17 años	NA	NA	NA	NA	831	NA	NA	NA	NA	NA	912	-
18 a 49 años	NA	NA	2.904	2.553	812	278	NA	NA	3.331	2.937	1.525	756
50 a 70 años	30	-	1.573	1.569	160	91	22	-	1.704	1.680	162	136
71 a 79 años	165	-	13	12	153	139	150	-	15	16	186	244
80 y más años	25	-	0	0	125	129	35	-	1	1	199	221
Total	220	-	4.490	4.134	2.081	637	207	-	5.051	4.634	2.984	1.357

Salto

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	1569	NA	NA	NA	NA	NA	NA	1604	-
18 a 49 años	NA	NA	5.417	4.489	942	348	NA	NA	6.536	5.455	2.137	1.149	
50 a 70 años	48	-	2.811	2.736	204	128	47	-	2.985	2.895	162	136	
71 a 79 años	328	-	50	36	366	332	331	-	49	37	406	244	
80 y más años	26	-	3	3	237	216	27	-	3	0	316	279	
Total	402		8.281	7.264	3.318	1.024	405	0	9.573	8.387	4.625	1.808	

San José

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	962	NA	NA	NA	NA	NA	NA	1137	-
18 a 49 años	NA	NA	5.659	4.883	940	420	NA	NA	6.119	5.366	2.102	1.297	
50 a 70 años	2	-	3.063	2.991	188	110	2	-	3.310	3.234	162	136	
71 a 79 años	9	-	25	24	676	653	6	-	39	35	797	244	
80 y más años	1	-	4	2	359	344	1	-	3	2	536	534	
Total	12	-	8.751	7.900	3.125	1.527	9	-	9.471	8.637	4.734	2.211	

Soriano

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	928	NA	NA	NA	NA	NA	NA	1041	-
18 a 49 años	NA	NA	4.449	4.157	514	245	NA	NA	5.253	4.934	1.457	961	
50 a 70 años	9	-	2.234	2.216	99	70	4	-	2.109	2.220	162	136	
71 a 79 años	7	-	37	32	490	472	6	-	40	31	523	244	
80 y más años	3	-	4	2	234	228	1	-	4	0	338	327	
Total	19	-	6.724	6.407	2.265	1.015	11	-	7.406	7.185	3.521	1.668	

Tacuarembó

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	1042	NA	NA	NA	NA	NA	NA	1192	-
18 a 49 años	NA	NA	3.528	3.265	905	187	NA	NA	4.213	3.972	1.752	726	
50 a 70 años	37	-	1.821	1.862	195	71	18	-	1.948	2.035	162	136	
71 a 79 años	11	-	21	16	334	329	12	-	21	21	401	244	
80 y más años	1	-	4	4	161	156	6	-	3	1	240	260	
Total	49	-	5.374	5.147	2.637	743	36	-	6.185	6.029	3.747	1.366	

Treinta y tres

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	499	NA	NA	NA	NA	NA	NA	568	-
18 a 49 años	NA	NA	1.992	1.926	305	121	NA	NA	2.331	2.237	690	368	
50 a 70 años	0	-	1.006	1.160	58	29	1	-	1.108	1.270	162	136	
71 a 79 años	5	-	19	17	204	185	2	-	15	13	228	244	
80 y más años	0	-	2	1	133	124	1	-	2	1	166	156	
Total	5	-	3.019	3.104	1.199	459	4	-	3.456	3.521	1.814	904	

No especificado

Grupo etario	Masculino						Femenino						
	AstraZeneca		CoronaVac		Pfizer/BioNtech		AstraZeneca		CoronaVac		Pfizer/BioNtech		
	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	Dosis 1	Dosis 2	
12 a 17 años	NA	NA	NA	NA	34.949	NA	NA	NA	NA	NA	NA	28.779	-
18 a 49 años	NA	NA	311.599	243.646	36.346	14.098	NA	NA	271.428	213.991	58.275	32.604	
50 a 70 años	2.946	-	207.015	194.595	13.074	7.353	2.716	-	224.611	212.364	17.871	12.363	
71 a 79 años	10.813	-	2.491	2.034	42.670	37.864	13.378	-	3.150	2.548	61.995	55.509	
80 y más años	1.271	-	264	80	29.429	25.891	1.990	-	389	122	59.686	51.841	
Total	15.030	-	521.369	440.355	156.468	85.206	18.084	-	499.578	429.025	226.606	152.317	

NA: No aplica.

La vacuna de AstraZeneca se aplica a partir de los 90 días de la primera dosis.

El registro de departamento depende del sitio de la vacunación.

6. Cantidad de ingresos a CTI post vacunación, indicar detalladamente edad, sexo, dosis y vacuna dada, y qué efecto adverso presentaron.

Toda la información disponible a la fecha surge de los informes preliminares que pueden obtenerse del siguiente enlace:

<https://www.gub.uy/ministerio-salud-publica/comunicacion/noticias/tercer-estudio-efectividad-vacunacion-anti-sars-cov-2-uruguay-30-junio-2021>

Del mismo surgen todos los ingresos por COVID-19, con todas las variables requeridas, con excepción de la discriminación por sexo.

En relación al informe de efectos adversos, está siendo elaborado y será publicado a la brevedad.

7. Cantidad de positivos Covid post vacunación, detallando edad, sexo, dosis y vacuna dada.

Toda la información disponible a la fecha se encuentra en el siguiente informe:

<https://www.gub.uy/ministerio-salud-publica/comunicacion/noticias/tercer-estudio-efectividad-vacunacion-anti-sars-cov-2-uruguay-30-junio-2021>

8. Cantidad de muertos pos vacunas, indicando sexos, edades, vacunas inoculadas, a qué dosis fallecen y efectos adversos que lo llevan a la muerte.

Toda la información disponible a la fecha se encuentra en el siguiente informe:

<https://www.gub.uy/ministerio-salud-publica/comunicacion/noticias/tercer-estudio-efectividad-vacunacion-anti-sars-cov-2-uruguay-30-junio-2021>

No hay fallecimientos reportados en los cuales se haya demostrado que la vacuna COVID-19 es la causa de fallecimiento como efecto adverso.

9. 1. SOBRE EL RT-PCR: 91. Cuántos Hisopados RT-PCR se han practicado desde el comienzo de la declaración de pandemia en Uruguay.

La información surge del siguiente enlace <https://www.gub.uy/sistema-nacional-emergencias/pagina-embedida/visualizador-casos-coronavirus-covid-19-uruguay>

9. 2.A qué CT se realizaron los PCR desde el comienzo de la declaración de pandemia.

El Ministerio de Salud Pública no discrimina por CT. El valor del CT de cada kit de reactivo para interpretar el resultado de la PCR está establecido por el fabricante del kit.

9. 3.A qué valor fueron adquiridos los Kit RT-PCR y a qué empresas, detallar país de origen.

Se adjunta información remitida por el Departamento de Adquisiciones y Suministros:

Insumo	Determinación SARS COVID x PCR en tiempo real
Marca	GeneFinder - Elitech Group
Pais de Origen	No surge de los antecedentes
Precio unitario	\$ 218.350 (Iva 10 % Incluido)
Proveedor	CABINSUR S.A.
Fecha de compra	25/01/2021

Insumo	Determinación SARS COVID x PCR en tiempo real
Marca	Thermo Scientific Superscript
Pais de Origen	No surge de los antecedentes
Precio unitario	\$ 218.350 (Iva 10 % Incluido)
Proveedor	CABINSUR S.A.
Fecha de compra	28/10/2020

Insumo	Kits para diagnóstico en tiempo real QRT - PCR
Marca	Thermo Scientific Superscript
Pais de Origen	No surge de los antecedentes
Precio unitario	\$ 180.987,00 (Iva 22 % Incluido)
Proveedor	TAGACA S.R.L.
Fecha de compra	29/07/2020

9. 4. Qué otros análisis se practican sobre la base de los PCR para determinar Covid19?

No logra comprenderse la pregunta, por lo cual no es posible responder la misma.

10. Los estudios serológicos que se practican determinan la cantidad de anticuerpos contra el Sars-Cov.2 que tiene cada persona, esto significa que efectivamente la persona tiene inmunidad contra el Sars-Cov.2/Covid19?

La respuesta a la siguiente pregunta (y a otras de interés) surgen del siguiente enlace <https://www.gub.uy/ministerio-salud-publica/comunicacion/noticias/preguntas-respuestas-frecuentes-sobre-utilizacion-test-serologicos-para-covid>

11. Cuántos pacientes en Uruguay han dejado de ser atendidos a raíz del Covid19, motivos y patologías.

No existen denuncias en el Ministerio de Salud Pública en las cuales se haya constatado omisión de asistencia por causa de COVID-19.

12. Qué tratamiento se instruye al paciente con un RT-PCR positivo a Covid19 en los centros de Salud?

El que determine el médico tratante y su prestador de salud, dependiendo de las condiciones del caso en cuestión.

13. Existen en el mundo otros tratamientos que se han investigado, publicado y corroborado por pares, que no son las Vacunas Covid19, se han estudiado para tratamientos contra el Covid: Ivermectina, Dióxido de Cloro, etc. y si la respuesta es no, por qué causa?

La presente pregunta no requiere el acceso a información concreta, sino que se explique una decisión del Poder Ejecutivo. Corresponde destacar por lo tanto, que la Ley N° 18.381 establece un procedimiento para solicitar información pública en poder

de organismos públicos, lo cual no es equiparable al pedido de informes parlamentario previsto en el artículo 118 de la Constitución. La Ley N° 18.381 reglamenta un canal para solicitar información concreta, no para obligar a la Administración a que elabore análisis o informes técnicos a medida. No es un mecanismo de solicitud de opiniones, explicaciones, justificaciones o debates. Como destaca el artículo 14 de la Ley N° 18.381 *"Esta ley tampoco faculta a los peticionarios a exigir a los organismos que efectúen evaluaciones o análisis de la información que posean..."* Tampoco corresponde al Ministerio de Salud Pública generar citas, ni de estudios, ni de bibliografía. El Ministerio de Salud Pública dicta actos administrativos, recomendaciones e informes técnicos públicos, a cuyo contenido corresponde remitirse, no siendo la Ley N° 18.381 una vía para solicitar ampliación de los mismos.

14. Quiénes son todas las personas afectadas al GACH directa o indirectamente?

El GACH no funcionó en la órbita del Ministerio de Salud Pública sino de Presidencia de la República, razón por la cual no es posible acceder a lo solicitado. <https://www.gub.uy/presidencia/politicas-y-gestion/integrantes-del-grupo-asesor-cientificohonorario-gach>

15. Quiénes son las personas afectadas al tratamiento de la Pandemia en el Ministerio de Salud Pública, especialidad, conocimiento, experiencia en patologías relacionadas.

Las decisiones para el "tratamiento" de la pandemia, dentro del Ministerio de Salud Pública, son adoptadas por los Sres. Ministro, Subsecretario, Director General de la Salud, Subdirectora General de la Salud, Director General del Sistema Nacional de Salud y Directora General de Coordinación, cuyos datos surgen del siguiente enlace: <https://www.gub.uy/ministerio-salud-publica/institucional/estructura-del-organismo>

16. Método por el que se aprueban las vacunas en general y en particular las de terapias Génicas contra el Covid19 en Uruguay.

Se adjunta las siguientes respuestas, informadas en Expediente N° 3/6959/2020:

3. Describir el proceso de aceptación de una vacuna, describiendo el paso a paso desde que ingresa al país hasta que se inyecta en la persona.

En la hipótesis de que la vacuna ingrese por el Fondo Rotatorio de la Organización Panamericana de Salud/ Organización Mundial de la Salud, las mismas son precalificadas por el referido organismo internacional.

Por el contrario, si las vacunas provienen de un laboratorio farmacéutico, el Departamento de Medicamentos analiza el dossier de registro con los datos de calidad, seguridad y eficacia correspondientes, previo asesoramiento de la División Epidemiología. Por otra parte, se analiza el certificado de análisis de liberación del lote emitido por el país de origen.-

Por otra parte, el laboratorio Calmette realiza un control de identidad, lote, vencimiento, cantidad enviada y las condiciones de temperatura en las que arriba el producto, revisando que los monitores de temperatura de las vacunas no tengan alarmas durante el traslado de las mismas, almacenándolas en las cámaras de frío del laboratorio, desde donde se distribuyen a los puestos de vacunación, sean públicos o privados, siendo cada prestador quien debe mantener la cadena de frío hasta su aplicación.

4. ¿Qué análisis se le hacen a las vacunas en territorio nacional?

Conforme se responde en la pregunta anterior, el país revisa el certificado de análisis de liberación emitido por el país de origen, sin perjuicio del control del producto efectuado desde el ingreso al país hasta su efectiva administración, en lo referido a la individualización, lotes, vencimientos, conservación de cadena de frío, etc.

17. Quiénes son los responsables de determinar en Uruguay la eficacia y seguridad de las vacunas Covid19.

Fue contestado en la pregunta anterior.

18. El Sars-Cov2 ha sido Aislado, Secuenciado y Purificado según método científico para elementos pequeños en Uruguay? Si la respuesta es Sí, indicar por favor por quién, documentación al respecto, publicación, corroborado por pares (quiénes)

No tenemos conocimiento que en el país se haya cultivado el SARS CoV 2 ya que exige condiciones de bioseguridad con las cuales el país no cuenta.

Se eleva, sugiriendo hacer lugar parcial a lo solicitado, en función del alcance del presente informe.



DOCUMENTO COMPLETO

IDOC

Actuación

Fecha Creación: 20/07/2021 9:43
Usuario Creación: MIRIAM OLID
Dependencia: 12/001/1.51 Dpto. De Secretaría Y Acuerdos
Finalizada Por: Gustavo Cardoso, Miriam Olid
Adjuntos: 1
001-3-3590-2021 respuesta parcial ACCESO A LA INFORMACIÓN MARIA GALO.pdf

Firmado Por: MIRIAN GRICEL OLID PRESA
Fecha Firma: 20/07/2021 9:43

Firmado Por: GUSTAVO CARDOSO MUÑOZ
Fecha Firma: 20/07/2021 17:26

Ministerio de Salud Pública

Dirección General de Secretarías

VISTO: la solicitud de información pública efectuada por la Sra. María Bettina Galo Viegas, titular de la cédula de identidad N° xxxxxxxx al amparo de lo dispuesto por la Ley N° 18.381 de 17 de octubre de 2008;

RESULTANDO: que la peticionante solicita información sobre: **1)** cantidad de infectados por el virus de la influenza (gripe) en cualquiera de sus variantes, en los años 2015, 2016, 2017, 2018, 2019, 2020 y 2021, detallados por año; **2)** cantidad de ingresos por gripe y cualquier patología asociada a todos los CTI del Uruguay detallado por años; **3)** cantidad de fallecidos en cada uno de esos años por el virus de la influenza y todas sus variantes (gripe); **4)** cantidad de fallecidos por Sars-Cov.2 /Covid 19 en 2020 y 2021, detallados por años y meses; **5)** cantidad de vacunados en total, desde el comienzo de la vacunación contra el Sars-Cov.2 /Covid 19, detallando qué vacuna se dio, edad, sexo, departamento del domicilio y de la vacunación; **6)** cantidad de ingresos a CTI pos vacunación, indicando edad, sexo, dosis, vacuna dada y efecto adverso presentado; **7)** cantidad de positivos Covid post vacunación, detallando edad, sexo, dosis y vacuna dada; **8)** cantidad de fallecidos post vacunas, indicando sexo, edad, vacuna inoculada, dosis y efectos adversos que lo llevan a la muerte; **9)** sobre el RT-PCR: **9.1-** cuántos hisopados RT-PCR se han practicado desde el comienzo de la declaración de pandemia en Uruguay; **9.2-** a qué CT se realizaron los PCR desde el comienzo de la declaración de pandemia; **9.3-** a qué valor fueron adquiridos los Kit RT-PCR y a qué empresas, detallando país de origen; **9.4-** qué otros análisis se practican sobre la base de los PCR para determinar Covid 19; **10)** los estudios serológicos que se practican determinan la cantidad de anticuerpos contra el Sars-Cov.2 que tiene cada persona, esto significa que efectivamente la persona tiene inmunidad contra el SarsCov.2/Covid19; **11)** cuántos pacientes en Uruguay han dejado de ser atendidos a raíz del Covid19, motivos y patologías; **12)** que tratamiento se instruye al paciente con un

RT-PCR positivo a Covid 19 en los centros de salud; **13)** existen en el mundo otros tratamientos que se han investigado, publicado y corroborado por pares, que no son las vacunas Covid 19, se han estudiado para tratamientos contra el Covid: Invermectina, Dióxido de Cloro, etc. y si la respuesta es no, por qué causa? **14)** quienes son todas las personas afectadas al GACH directa o indirectamente; **15)** quienes son las personas afectadas al tratamiento de la pandemia en el Ministerio de Salud Pública, detallando especialidad, conocimiento, experiencia en patologías relacionadas; **16)** método por el que se aprueban las vacunas en general y en particular las de terapias génicas contra el Covid 19 en Uruguay; **17)** quiénes son los responsables de determinar en Uruguay la eficacia y seguridad de las vacunas Covid 19 y **18)** el Sars-Cov.2 ha sido aislado, secuenciado y purificado según método científico para elementos pequeños en Uruguay? si la respuesta es sí, indicar por quién, documentación al respecto, publicación, corroborado por pares (quiénes);

CONSIDERANDO I) que en merito a lo informado por la División Servicios Jurídicos, corresponde acceder a lo peticionado con excepción de aquella información que no se ajusta a los requisitos normativos, la Ley 18.381 establece un procedimiento para solicitar información pública en poder de organismos públicos, reglamenta un canal para solicitar información concreta, no para obligar a la Administración a que elabore análisis o informes técnicos a medida. No es un mecanismo de solicitud de opiniones, explicaciones, justificaciones o debates, como destaca el artículo 14 de la mencionada norma, estableciendo que “esta Ley tampoco faculta a los peticionantes a exigir a los organismos que efectúen evaluaciones o análisis de la información que poseen, salvo aquellos que por sus cometidos institucionales deban producir”;

II) que de acuerdo a lo dispuesto por el artículo 16 de la citada disposición legal, el acto que resuelva la petición debe emanar del jerarca máximo del Inciso o quien posea facultades delegadas al efecto;

ATENCIÓN: a lo precedentemente expuesto y a lo establecido por Resolución Ministerial N° 38/991 de 22 de enero de 1991;

LA DIRECCIÓN GENERAL DE SECRETARÍA
en ejercicio de las atribuciones delegadas

RESUELVE:

- 1º) Autorízase el acceso a la información en forma parcial, en referencia a la solicitud efectuada por la Sra. María Bettina Galo Viegas, titular de la cédula de identidad N° xxxxxxx, al amparo de lo dispuesto por la Ley N° 18.381 de 17 de octubre de 2008.
- 2º) Notifíquese a la parte interesada a través de Secretaría de la Dirección General de Secretaría. Pase al Departamento de Comunicaciones para su publicación en la página web Institucional. Cumplido, archívese.

Ref. N° 001-3-3590-2021

AA

Se otorgó N° de Res. DIGESE 555-2021



ДЕРЖАВНА УСТАНОВА
«ЦЕНТР ГРОМАДСЬКОГО ЗДОРОВ'Я
МІНІСТЕРСТВА ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ»

вул. Ярославська, 41, м. Київ, 04071, тел. (044) 425-43-54

E-mail: info@phc.org.ua, код ЄДРПОУ 40524109

«15» 03 2021 № 13/216-к/148-к/21
на № _____ від _____

extra_law_ppg

Державна установа «Центр громадського здоров'я Міністерства охорони здоров'я України» (далі - Центр) розглянула у межах компетенції запит щодо реєстрації в референс-лабораторії вірусологічних досліджень Центру штаму SARS-CoV-2 та інформує про таке.

Центр, відповідно до пункту 1 розділу I Статуту Державної установи «Центр громадського здоров'я Міністерства охорони здоров'я України», затвердженого наказом МОЗ України від 30.06.2020 № 1483, є санітарно-профілактичним закладом охорони здоров'я, головним завданням якого є діяльність у галузі громадського здоров'я, а саме здійснення епідемічного нагляду (спостереження), виконання повноважень щодо захисту населення від інфекційних хвороб та неінфекційних захворювань, лабораторній діяльності, біобезпеки, інфекційної безпеки донорської крові та/або її компонентів у межах, визначених цим Статутом.

У референс-лабораторії вірусологічних досліджень Центру штаму SARS-CoV-2 відсутній, референс-лабораторія вірусологічних досліджень Центру не проводить вірусні дослідження з метою виділення вірусу SARS-CoV-2 на культурі клітин.

Генеральний директор

Роман РОДИНА



Christine Massey <cmssyc@gmail.com>

Fwd: Access to Info Request to PHO: studies re isolation of SARS-COV-2

Christine Massey <cmssyc@gmail.com>

Thu, Jul 16, 2020 at 5:40 PM

To: privacy@oahpp.ca

Bcc: "<cetaboy@yahoo.com>" <cetaboy@yahoo.com>

July 16, 2020

Ontario Agency for Health Protection and Promotion aka Public Health Ontario (PHO)
480 University Avenue
Suite 300
Toronto ON
M5G 1V2
privacy@oahpp.ca

Dear Freedom of Information and Privacy Coordinator,

This is a Freedom of Information Request for Access to General Records, made under *FIPPA*.

Description of Requested Records:

All records in the possession, custody or control of the Ontario Agency for Health Protection and Promotion aka Public Health Ontario (PHO) describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; lung cells from a lung cancer patient).

Please note that I am using "isolation" in the every-day sense of the word: *the act of separating a thing(s) from everything else*. I am not requesting records where "isolation of SARS-COV-2" refers instead to:

- the culturing of something, or
- the performance of an amplification test (i.e. a PCR test), or
- the sequencing of something.

Please also note that my request is not limited to records that were authored by PHO or that pertain to work done by PHO. My request includes any sort of record, for example (but not limited to) any published peer-reviewed study downloaded or printed by PHO.

If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each record with certainty (i.e. title, author(s), date, journal, where the public may access it).

Format:

Pdf documents sent to me via email; I do not wish for anything to be shipped to me.

Contact Information:

Last name: Massey

First name: Christine

Address: #221 - 93 George St. S., Brampton ON L6Y 1P4

Phone: 905-965-6254

Email: cmssyc@gmail.com

Application Fee:

I will submit a \$5 cheque by mail.

Thank you in advance and best wishes,
Christine Massey, M.Sc.
Brampton ON L6Y 1P4



Christine Massey <cmssyc@gmail.com>

Fwd: Access to Info Request to PHO: studies re isolation of SARS-COV-2

Christine Massey <cmssyc@gmail.com>

Thu, Oct 1, 2020 at 12:29 PM

To: privacy@oahpp.ca

Dear FOI coordinator,

I am looking forward to PHO's response to my request submitted on July 16, and just wanted to update you with my new address for your records (although I prefer email communication and don't want anything shipped to me):

21 Keystone Avenue
Toronto ON
M4C 1G9

Cheers and thank you,
Christine

[Quoted text hidden]



Christine Massey <cmssyc@gmail.com>

RE: Your Access Request No. 2020-08

Ilone Harrison <Ilone.Harrison@oahpp.ca>
To: Christine Massey <cmssyc@gmail.com>

Thu, Jun 3, 2021 at 1:04 PM

Dear Ms. Massey,

Thank you for following up with Public Health Ontario (PHO) about your request for:

All records in the possession, custody or control of the Ontario Agency for Health Protection and Promotion aka Public Health Ontario (PHO) describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; lung cells from a lung cancer patient).

Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to:

- the culturing of something, or*
- the performance of an amplification test (i.e. a PCR test), or*
- the sequencing of something.*

Please also note that my request is not limited to records that were authored by PHO or that pertain to work done by PHO. My request includes any sort of record, for example (but not limited to) any published peer-reviewed study downloaded or printed by PHO.

If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each record with certainty (i.e. title, author(s), date, journal, where the public may access it).

Public Health Ontario recognizes that Freedom of Information (FOI) processes are an important service and a right for Ontarians, but in these extraordinary circumstances, public health and safety are of utmost importance. During the COVID-19 pandemic response, our ability to process FOI requests is directly impacted and we continue to experience delays related to:

- the conduct of full and comprehensive searches for records by program areas which may be prioritizing critical COVID-19 response activities in connection with the emergency;
- our ability to conduct reviews of those responsive records that have already been received from program

areas; and

- conducting necessary consultations with third parties or other institutions that may be prioritizing work related to COVID-19 or may be operating at a reduced capacity.

We will continue to make reasonable efforts to process incoming and existing requests. However, please be advised that your request may take longer than normal to process. We will try our best to keep you updated on the progress of your request.

Throughout the pandemic, PHO has published a wide range of resources related to COVID-19. In the interim, you may wish to review these resources. Please visit our [main COVID-19 webpage](#) to access them.

Please contact me if you have any questions.

Yours truly,

Ilone M. Harrison *FIP CIPM CIPP/C CIAPP-P*

Privacy Officer

Public Health Ontario | Santé publique Ontario

661 University Avenue, Suite 1701 | 661, Avenue Université, Bureau 1701

Toronto ON M5G 1M1

t: 647-260-7187

e: ilone.harrison@oahpp.ca

From: Christine Massey [mailto:cmssyc@gmail.com]

Sent: June 2, 2021 7:40 PM

To: Ilone Harrison <Ilone.Harrison@oahpp.ca>; Privacy <Privacy@oahpp.ca>; Colleen Geiger <Colleen.Geiger@oahpp.ca>

Subject: Re: FIPPA request to OAHPP/PHO re "vaccine" consent, outcome tracking

Dear Ilone and Ms. Geiger,

Thank you, my \$5.00 application fee payable to Public Health Ontario is in the mail, addressed to [661 University Avenue](#).

Also, almost a year ago, on **July 16, 2020**, I emailed another request to PHO, asking for records describing the purification of "SARS-COV-2" from any patient sample in the world. I mailed in a \$5 cheque the following day. A screenshot of the request has been posted on my website for many months:

<https://www.fluoridefreepeel.ca/wp-content/uploads/2020/07/FOI-to-PHO-isolation-July-16-2020-2.jpg>

On October 1, 2020 I advised PHO via email of my address change, for your records, and indicated that I still preferred email communication and still didn't want anything shipped to me, as had been stated in my request. A screenshot of that email is attached.

According to my bank, PHO cashed the cheque for that request on **October 30, 2020**. A screenshot of the cheque and the date of transaction, from my online banking, is attached.

I've still never received any response whatsoever to this request.

I have moved again since, but still prefer email communication and do not want anything shipped to me. Is PHO ever going to provide their response to that request?

Thank you, best wishes,

Christine



Christine Massey <cmssyc@gmail.com>

Your Access Request No. 2020-08

Ilone Harrison <Ilone.Harrison@oahpp.ca>
To: Christine Massey <cmssyc@gmail.com>

Wed, Aug 4, 2021 at 10:47 AM

Dear Ms. Massey,

I am writing to you in connection with your request for access to information, specifically for:

All records in the possession, custody or control of the Ontario Agency for Health Protection and Promotion aka Public Health Ontario (PHO) describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; lung cells from a lung cancer patient).

Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to:

- the culturing of something, or*
- the performance of an amplification test (i.e. a PCR test), or*
- the sequencing of something.*

Please also note that my request is not limited to records that were authored by PHO or that pertain to work done by PHO. My request includes any sort of record, for example (but not limited to) any published peer-reviewed study downloaded or printed by PHO.

If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each record with certainty (i.e. title, author(s), date, journal, where the public may access it).

The type of work described in your request is not done by Public Health Ontario (PHO) and there are no records at PHO that are responsive to your request.

PHO performs testing for SARS-CoV-2 virus, the virus that causes COVID-19, but the work that PHO does has been excluded from your request as per paragraph 2. Information about PHO's COVID-19 testing is available on our website:

- [Coronavirus Disease 2019 \(COVID-19\) – PCR](#)
- [Coronavirus Disease 2019 \(COVID-19\) – Serology](#)
- [COVID-19 Virus Variant of Concern \(VoC\) Surveillance — see SARS-CoV-2 \(COVID-19 Virus\) Variant of Concern \(VoC\) Surveillance](#)

FIPPA section 50(1) allows you to appeal this decision, within 30 days, to the Information and Privacy Commissioner of Ontario (IPC). The IPC's contact information is:

2 Bloor Street East

[Suite 1400](#)

Toronto, Ontario

[M4W 1A8](#)

Telephone: (416) 326-3333 (Toll Free: 1-800-387-0073)

If you decide to appeal, you should provide a copy of your original request and this decision letter. You will also need to send the IPC an appeal fee of \$25.00, by cheque or money order payable to the Minister of Finance.

Please do not hesitate to contact me for clarification or to discuss any aspect of your request or this decision.

Yours truly,

Ilone M. Harrison *FIP CIPM CIPP/C CIAPP-P*

Privacy Officer

Public Health Ontario | Santé publique Ontario

[661 University Avenue, Suite 1701](#) | 661, Avenue Université, Bureau 1701

Toronto ON M5G 1M1

t: 647-260-7187

e: ilone.harrison@oahpp.ca



Christine Massey <cmssyc@gmail.com>

FOI request to Durham Region Health Dept. re: "SARS-COV-2" purification

Christine Massey <cmssyc@gmail.com>
To: foi@durham.ca

Fri, Aug 6, 2021 at 6:07 PM

August 6, 2021

To:
The Regional Municipality of Durham
Access and Privacy Office
Legislative Services Division
605 Rossland Road East, Level 1, P.O. Box 623
Whitby, ON L1N 6A3

Dear Regional Clerk,

This is a formal request for access to general records, made under the *Municipal Freedom of Information and Protection of Privacy Act*.

I have already submitted payment of the \$5 application fee via email transfer to payments@durham.ca.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of the Region of Durham Public Health Department describing the **purification** (i.e. via filtration and ultra-centrifugation) of any "**COVID-19 virus**" (aka "SARS-COV-2", including any alleged "variants" i.e. "B.1.1.7", "B.1.351", "P.1") directly from a sample taken from a diseased human, where the patient sample was not first combined with any other source of **genetic** material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to **purify** the suspected "virus" and instead:

- cultured an unpurified sample or other unpurified substance, and/or
- performed an amplification test (i.e. a PCR test) on the total RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or
- fabricated a genome based on PCR-detected sequences in the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or
- produced electron microscopy images of unpurified things in a cell culture.

Clarification of Request

For further clarity, please note I am already aware that according to virus theory a "virus" requires host cells in order to replicate, and I am **not** requesting records describing the **replication** of a "virus" without host cells.

Further, I am **not** requesting private patient information, or records that describe a suspected "virus" floating in a vacuum; I am simply requesting records that describe its **purification (separation)** from everything else in the patient sample, as per standard laboratory practices for the purification of other very small things).

Please also note that my request is **not limited** to records that were authored by your institution or that pertain to work done at/by your institution. Rather, my request includes any record matching the above description, for example (but not limited to): any published peer-reviewed study authored by anyone, anywhere, ever that has been downloaded or printed by your institution.

If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible.

Format:

Electronic (i.e. pdf) documents sent to me via email; I do not wish for anything to be shipped to me.

Name of applicant and address for correspondence

Last name: Massey

First name: Christine

Address:

Phone:

Email: cmssyc@gmail.com

Thank you in advance and best wishes,

Christine Massey, M.Sc.

|



Christine Massey <cmssyc@gmail.com>

Decision (Our File: 2021-171)

FOI <FOI@durham.ca>
To: Christine Massey <cmssyc@gmail.com>

Thu, Aug 12, 2021 at 9:32 AM

Hi Christine,

Hope you're doing well. Please find enclosed the Region of Durham's response to your access request 2021-171. Our Health Department advised us that Public Health Ontario may have records you're seeking.

If you have any questions, please feel free to contact us.

Have a wonderful day,



Robyn Bonneau | Privacy Analyst

Access and Privacy Office
The Regional Municipality of Durham

605 Rossland Rd E, Level 1, Whitby, ON L1N 6A3

robyn.bonneau@durham.ca | 905-668-7711 ext. 2741 | durham.ca



From: FOI
Sent: August 9, 2021 2:47 PM
To: 'Christine Massey' <cmssyc@gmail.com>
Subject: Notice of Receipt (Our File: 2021-171)

Hi Christine,

This email is to acknowledge receipt of your access request submitted August 6, 2021, and your \$5 e-transfer payment. We have assigned your request as file number 2021-171.

The Access and Privacy Office will respond to your request according to the provisions of the

Municipal Freedom of Information and Protection of Privacy Act. If records are retrieved in response to your request, our office will deliver the records to you in an electronic format.

If you have any questions or would like to communicate with someone about your access request, please e-mail the Access and Privacy Office at foi@durham.ca or by phone at (905) 668-7711, ext. 2741.

Have a great day,



Robyn Bonneau | Privacy Analyst

Access and Privacy Office
The Regional Municipality of Durham

605 Rossland Rd E, Level 1, Whitby, ON L1N 6A3

robyn.bonneau@durham.ca | 905-668-7711 ext. 2741 | durham.ca



THIS MESSAGE IS FOR THE USE OF THE INTENDED RECIPIENT(S) ONLY AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, PROPRIETARY, CONFIDENTIAL, AND/OR EXEMPT FROM DISCLOSURE UNDER ANY RELEVANT PRIVACY LEGISLATION. No rights to any privilege have been waived. If you are not the intended recipient, you are hereby notified that any review, re-transmission, dissemination, distribution, copying, conversion to hard copy, taking of action in reliance on or other use of this communication is strictly prohibited. If you are not the intended recipient and have received this message in error, please notify me by return e-mail and delete or destroy all copies of this message.

2 attachments



image001.jpg
19K



171Decision.pdf
227K



Sent via Email

August 10, 2021

Christine Massey
cmssyc@gmail.com

Dear Ms. Massey:

**The Regional
Municipality of
Durham**

Corporate Services
Department,
Legislative Services

605 Rossland Rd. E.
Level 1
PO Box 623
Whitby, ON L1N 6A3
Canada

905-668-7711
1-800-372-1102
Fax: 905-668-9963

durham.ca

**Don Beaton,
BCom, M.P.A.,
Commissioner of
Corporate Services**

Access Request – Decision Letter
Request Number: 2021-171

I am writing regarding your access request made under the *Municipal Freedom of Information and Protection of Privacy Act* (hereafter, 'the Act'), received in full by our office on August 9, 2021.

The Region of Durham undertook all reasonable searches in relation to the information you requested and found no records pertaining to your request.

I am the person responsible for the decision with respect to your request. You may request the Information and Privacy Commissioner (IPC) to review this decision within thirty days from the date of this letter. The IPC's address is Suite 1400, 2 Bloor Street East, Toronto, Ontario, M4W 1A8. The appeal fee is \$25.00 payable by cheque or money order to the Minister of Finance and must be included with your correspondence.

This completes our processing of your request. Should you have any questions, please contact the Access and Privacy Office at (905) 668-7711, ext. 2741 or at foi@durham.ca. We would appreciate you using the above listed access request number in any future correspondence.

Sincerely,

Cheryl
Bandel for  Digitally signed by
Cheryl Bandel for
Date: 2021.08.11
13:46:24 -04'00'

Ralph Walton
Regional Clerk/Director of Legislative Services



Christine Massey <cmssyc@gmail.com>

FOI request to Grey Bruce Health Unit re: "SARS-COV-2" purification

Christine Massey <cmssyc@gmail.com>
To: publichealth@publichealthgreybruce.on.ca

Wed, Apr 7, 2021 at 6:44 PM

April 7, 2021

To:

Grey Bruce Health Unit
101 17th Street East
Owen Sound Ontario N4K 0A5
Phone: 519-376-9420 or 1-800-263-3456

Submitted via email to: publichealth@publichealthgreybruce.on.ca

Dear Freedom of Information Officer,

This is a formal request for access to general records, made under the *Freedom of Information and Protection of Privacy Act*.

Please advise ASAP how to submit the \$5 application fee during the "pandemic", otherwise I will mail a cheque to the address listed there.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of Grey Bruce Health Unit describing the **purification** of any "**SARS-COV-2**" aka "COVID-19 virus" (including any "variants") (via maceration, filtration and use of an ultracentrifuge; also referred to at times by some people as "isolation"), directly from a sample taken from a diseased human, where the patient sample was not first combined with any other source of **genetic** material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to **purify** the suspected "virus" and instead:

- cultured an unpurified sample or other unpurified substance, and/or
- performed an amplification test (i.e. a PCR test) on all the RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or
- sequenced the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or
- produced electron microscopy images of unpurified things.

Clarifications re my request

For further clarity, please note I am already aware that according to virus theory a "virus" requires host cells in order to replicate, and I am **not** requesting records describing the **replication** of a "virus" without host cells.

Further, I am **not** requesting records that describe a suspected "virus" floating in a vacuum; I am simply requesting records that describe its **purification** (**separation** from everything else in the patient sample, as per standard laboratory practices for the purification of other small things).

Please also note that my request is **not limited** to records that were authored by Grey Bruce Health Unit or that pertain to work done at/by Grey Bruce Health Unit. Rather, my request includes any record matching the above description, for example (but not limited to) any published peer-reviewed study authored by anyone, anywhere that has been downloaded or printed by Administration or Staff at Grey Bruce Health Unit and relied on as evidence of a disease-causing "virus".

If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible.

Format:

Pdf documents sent to me via email; I do not wish for anything to be shipped to me.

Contact Information:

Last name: Massey

First name: Christine

Address:

Phone:

Email: cmssyc@gmail.com

Thank you in advance and best wishes,
Christine Massey, M.Sc.



Christine Massey <cmssyc@gmail.com>

FOI request to Grey Bruce Health Unit re: "SARS-COV-2" purification

Christine Massey <cmssyc@gmail.com>
To: publichealth@publichealthgreybruce.on.ca

Fri, Jul 9, 2021 at 2:02 PM

Hello,

Since no one ever responded to my email, I have now mailed a cheque to:

Grey Bruce Health Unit

101 17th Street East

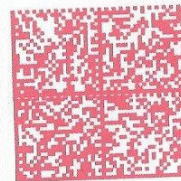
Owen Sound Ontario N4K 0A5

Christine

[Quoted text hidden]

Grey Base Health Unit
101 17th Street E
Owen Sound ON
N4K 0A5

CONFIDENTIAL



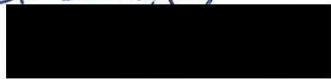
FP049 4461203
000005 WQQJC
0816 140319

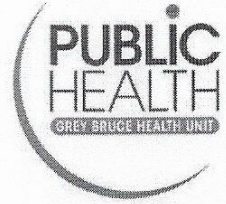


Christine Massey



Peterborough, ON





August 16, 2021

Christine Massey

[REDACTED]
Peterborough, ON
[REDACTED]

Dear Christine Massey,

RE: Release of Information Request
GBHU – File Number FOI-2021-2

FINAL DECISION: NO RESPONSIVE RECORDS LOCATED

I am writing regarding your access request under the *Municipal Freedom of Information and Protection of Privacy Act* (hereafter, 'the act') received by our office .

A search has been conducted in regards to your request and no records responsive to your request have been located.

You may request the Information and Privacy Commissioner to review this decision within thirty days from the date of this letter. The Commissioner's address is Suite 1400, 2 Bloor Street East, Toronto, Ontario, M4W 1A8. The appeal fee is \$25.00 (for general record requests) payable by cheque or money order to the Minister of Finance and must be included with your correspondence.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew McMurdie".

Matthew McMurdie
Director of Corporate Services and Privacy Officer
Grey Bruce Health Unit

A healthier future for all.

101 17th Street East, Owen Sound, Ontario N4K 0A5

www.publichealthgreybruce.on.ca

519-376-9420

1-800-263-3456

Fax 519-376-0605

Begäran om allmän handling John Blaid 2021-08-20

From: Info Folkhälsomyndigheten <info@folkhalsomyndigheten.se>

To: [REDACTED]

Date: 2021-08-24 9:33

Hej!

Nej, några sådana handlingar finns inte.

Med vänlig hälsning,
Registrator

Folkhälsomyndigheten
171 82 Solna

Folkhälsomyndigheten
Box 505
831 26 Östersund

Webbplats: <http://www.folkhalsomyndigheten.se>

Från: John Blaid [REDACTED]

Skickat: den 23 augusti 2021 15:54

Till: Info Folkhälsomyndigheten <info@folkhalsomyndigheten.se>

Ämne: Re: Svar - Begäran om allmän handling John Blaid 2021-08-20

Hej,

Så ni har inga allmänna handlingar eller potentiella allmänna handlingar men har ni några studier/rapporter som uppfyller min förfrågan nedan som **inte** är tillgänglig för allmänheten?

Med vänlig hälsning
John Blaid

From: Info Folkhälsomyndigheten <info@folkhalsomyndigheten.se>

To: [REDACTED]

Sent: 2021-08-23 8:13

Subject: Svar - Begäran om allmän handling John Blaid 2021-08-20

Hej

Det som efterfrågas finns inte sammanställt på myndigheten, vi har därför inga allmänna handlingar eller potentiella allmänna handlingar i frågan att lämna ut.

Med vänlig hälsning,
Registrator

Folkhälsomyndigheten
171 82 Solna

Folkhälsomyndigheten
Box 505

Webbplats: <http://www.folkhalsomyndigheten.se>

Från: John Blaid [REDACTED]

Skickat: den 20 augusti 2021 10:17

Till: Kundtjänst Mikrobiologen <kundtjanst.mikrobiologen@folkhalsomyndigheten.se>

Ämne: Tillgång till dokumentation gällande isolering och rening av "SARS-COV-2"

Detta är en formell begäran om tillgång till allmän dokumentation

Beskrivning av begärd dokumentation:

Alla studier och/eller rapporter som Folkhälsomyndigheten innehar, förvarar eller kontrollerar som beskriver **rening** (dvs. genom filtrering och ultracentrifugering) av alla "**COVID-19-virus**" (även kallat "SARS-COV-2" inklusive eventuella påstådda "varianter", dvs "B.1.1.7", "B.1.351", "P.1") direkt från ett prov från en sjuk människa, där patientprovet inte först kombinerades med någon annan källa av **genetiskt** material (dvs apnjurceller aka Vero -celler; fetalt bovint serum).

Observera att jag **inte** begär studier/rapporter där forskare misslyckades med att **rena** det misstänkta "viruset" (separera det påstådda "viruset" från allt annat i patientprovet) och istället:

- odlade ett orenat prov eller annat orenat ämne, och/eller
- utförde ett amplifieringstest (dvs ett PCR -test) på det totala RNA från ett patientprov eller från en cellodling, eller på genetiskt material från orenat ämne, och/eller
- tillverkade ett genom baserat på PCR-detekterade sekvenser i det totala RNA från ett patientprov eller från en cellodling eller från någon orenad substans, och/eller
- producerade elektronmikroskopibilder av orenade saker i en cellkultur.

Förtydligande av begäran

För ytterligare klarhet, observera att jag redan är medveten om att i enlighet med virusteorin att ett "virus" kräver värdceller för att replikera så jag begär **inte** dokument som beskriver **replikering** av ett "virus" utan värdceller.

Dessutom begär jag **inte** privat patientinformation eller dokument som beskriver ett misstänkt "virus" som flyter i ett vakuum; Jag begär helt enkelt dokument som beskriver dess **rening** (**separering** från allt annat i patientprovet, enligt standardlaboratorium för rening av andra mycket små saker).

Observera att min begäran innefattar alla studier/rapporter som matchar ovanstående beskrivning, till exempel (men inte begränsat till) alla publicerade peer-reviewed studier som är **författade av någon, var som helst**.

Om något studie och/eller rapport matchar ovanstående beskrivning av begärd dokumentation och för närvarande är tillgänglig i det offentliga rummet, vänligen ange tillräckligt med information om varje dokument så att jag kan identifiera och komma åt var och en med säkerhet (dvs. titel, författare, datum, journal, där allmänheten kan komma åt den). Ange webbadresser där det är möjligt.

Format :

Pdf -dokument skickade till mig via e -post; Jag önskar inte att något ska skickas till mig.

Med vänlig hälsning

Subject: Access to Info Request: records re PURIFICATION OF “SARS-COV-2”

August 11th 2021

**To: Phillip Husband Esq.
DC Health
899 North Capitol Street, NE, 6th Floor
Washington, DC 20002
Phillip.Husband@dc.gov
Phone: (202) 442-5977
Fax: (202) 442-4797**

Dear Mr. Husband,

This is a formal request for access to general records, made under Maryland’s Public Information Act.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of the DC Health Department of Health (MDH) describing the **purification** of any **“COVID-19 virus”** (aka “SARS-COV-2”, including any alleged “variants” i.e. “B.1.1.7”, “B.1.351”, “P.1”) directly from a sample taken from a diseased human, where the patient sample was not first combined with any other source of **genetic** material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to **purify** the suspected “virus” (separate the alleged “virus” from everything thing else in the patient sample) and instead:

- cultured an unpurified sample or other unpurified substance, and/or
- performed an amplification test (i.e. a PCR test) on the total RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or
- fabricated a genome based on PCR-detected sequences in the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or
- produced electron microscopy images of unpurified things in a cell culture.

Clarification of Request

For further clarity, please note I am already aware that according to virus theory a “virus” requires host cells in order to replicate, and I am **not** requesting records describing the **replication** of a “virus” without host cells.

Further, I am **not** requesting records that describe a suspected “virus” floating in a vacuum; I am simply requesting records that describe its **purification (separation)** from everything else in the patient sample, as per standard laboratory practices for the purification of other very small things).

Please note that my request includes any study/report matching the above description, for example (but not limited to) any published peer-reviewed study **authored by anyone, anywhere**.

Please also note that despite the fact that [purification is an essential](#) (but not sufficient) step in proving the existence of a disease-causing “virus”, as of today [68 institutions globally](#) (including the U.S. CDC, Public Health Agency of Canada, Australian Department of Health, New Zealand Ministry of Health, European Centre for Disease Prevention and Control, UK Department for Health and Social Care, Indian Council of Medical Research) have all failed to provide or cite any such records, therefore to my knowledge no such records exist and if they do exist I cannot access them until I am provided a citation or URL.

Therefore in the interest of transparency and in accordance with the purposes of the legislation (Open Government and FOIA - DC Health), if any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible.

Format:

Pdf documents sent to me via email; I do not wish for anything to be shipped to me.

Contact Information:

Last name: [REDACTED]

First name: [REDACTED]

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]



Office of the General Counsel

August 13, 2021

Via email. [REDACTED]

[REDACTED]

Re: Freedom of Information Act Request
Subject: Purification of COVID-19
2021-FOIA-07248

Dear [REDACTED]

Your Freedom of Information Act (FOIA) request seeks "studies and/or reports ... describing the **purification** of any "**COVID-19 virus**" (aka "SARS-COV-2", including alleged variants" [Bolding in original]

FOIA Response

The Government of the District of Columbia has posted COVID-19 documents, data, and information on <https://coronavirus.dc.gov/>.

When I conferred with the Director of the Department of Health regarding your FOIA request, I was advised that the Department of Health has not been involved in any research or day-to-day activities related to purification of SARS-CoV-2. No letters, reports, or documents (other than your FOIA request) regarding a purification process have been received by the Director of the Department of Health.

Referrals to Other Agencies

The separate Office of the Chief Medical Officer (OCME) and the Public Health Laboratory operated by the separate Department of Forensic Sciences (DFS) may have documents responsive to your FOIA request. If you have not done so already, you may wish to submit FOIA request to OCME and DFS. The contact information for OCME's FOIA Officer and DFS' FOIA Officer is:

Rodney Adams
FOIA Officer
Office of the Chief Medical Examiner

401 E Street, S.W.
Washington, DC 20024
Email: rodney.adams@dc.gov
Phone: (202) 698-9005
Fax: (202) 698-9101

Andrea Stempel
FOIA Officers
Department of Forensic Sciences
401 E Street, SW, Fourth Floor
Washington, DC 20024
Phone: (202) 442-6673
Email: DFS.FOIA@dc.gov

Final Response

This letter constitutes my final response on behalf of the Department of Health to your FOIA request.

FOIA Fees

FOIA fees for this response have been waived.

Appeal Rights

Please know that, under D.C. Official Code § 2-537 and 1 DCMR § 412, you have the right to appeal this letter to the Mayor or to the Superior Court of the District of Columbia. Your appeal must be in writing or submitted via FOIAXpress.

Please know that, under D.C. Official Code § 2-537 and 1 DCMR § 412, you have the right to appeal this response to the Mayor or to the Superior Court of the District of Columbia. If you elect to appeal to the Mayor, your appeal must be in writing and contain "Freedom of Information Act Appeal" or "FOIA Appeal" in the subject line of the letter as well on the outside of the envelope. The appeal must include (1) a copy of the original request; (2) a copy of any written denial; (3) a statement of the circumstances, reasons, and/or arguments advanced in support of disclosure; and (4) a daytime telephone number, an email address, and U.S. Mail address at which you can be reached. The appeal must be mailed to: The Mayor's Office of Legal Counsel, FOIA Appeal, 1350 Pennsylvania Avenue, N.W., Suite 407, Washington, D.C. 20004. Electronic versions of the same information can instead be emailed to foia.appeals@dc.gov. Further, a copy of all appeal materials must be forwarded to Phillip L. Husband, Freedom of Information Act Officer for the Department of Health, Office of the General Counsel, Department of Health, 899 North Capitol Street, N.E., 6th Floor, Washington, DC 20002 or via email to Phillip.Husband@dc.gov. Failure to follow these administrative steps will result in delay in the processing and commencement of a response to your appeal to the Mayor.

If you used FOIAXpress to submit your FOIA request, you may create an appeal by using FOIAXpress.

Failure to follow these administrative steps will result in delay in the processing and commencement of a response to your appeal to the Mayor.

If I may be of further assistance, please call me at (202) 442-5970 or e-mail me at Phillip.Husband@dc.gov.

Sincerely,

A handwritten signature in blue ink, appearing to read "Phillip L. Husband", written over a horizontal line.

Phillip L. Husband
General Counsel for the Department of Health
and Freedom of Information Act Officer

Fw: FOIA Request

James Smith <[REDACTED]> Mon, Aug 9, 2021 at 2:31 PM
To: [REDACTED] Christine Massey <cmssyo@gmail.com>

From: Reginald Rogers <Reginald.Rogers@arkansas.gov>
Sent: Monday, August 9, 2021 1:28 PM
To: James Smith <[REDACTED]>
Cc: Laura Shue (ADH) <Laura.Shue@arkansas.gov>; Charles Thompson (ADH) <Charles.Thompson@arkansas.gov>; Brian Nichols (ADH) <Brian.Nichols@arkansas.gov>; S.Craig Smith <Stephan.Smith@arkansas.gov>; Michael St. Clair <Michael.StClair@arkansas.gov>; Tressa Williams (ADH) <Tressa.Williams@arkansas.gov>
Subject: FW: FOIA Request

Attached are 2 emails from UAMS which refer to projects on looking for COVID 19 in wastewater. I have been informed by that the ADH Public Health Laboratory (PHL) does not purify the SARS-CoV-2 virus. I have not been provided with any reports or studies on "purification" of the Covid-19 virus. Thank you.

Reginald A. Rogers
Deputy General Counsel
Arkansas Department of Health
4815 W. Markham St., Slot 31
Little Rock, Arkansas 72205-3867

Phone : (501) 661 - 2609
Cell : (501) 944 - 2962
Fax : (501) 661 - 2357
Email: reginald.rogers@arkansas.gov




From: James Smith <[REDACTED]>
Sent: Sunday, August 8, 2021 10:14 PM
To: coronavirus@arkansas.gov; Reginald Rogers <reginald.rogers@arkansas.gov>
Cc: [REDACTED]

Subject: FOIA Request

Arkansas FOIA Request

James W. Smith, DC



08/08/2021

Reginald Rogers

Custodian of Records

Arkansas Department of Health

4815 W. Markham St.

Little Rock, AR 72205

Dear Reginald Rogers:

Under the Arkansas Freedom of Information Act § 25-19-101 et seq., Description of Requested Records: All studies and/or reports in the possession, custody or control of the Arkansas Department of Health describing the purification of any "COVID-19 virus" (including "B.1.1.7", "B.1.351", "P.1" and any other "variant") (via maceration, filtration and use of an ultracentrifuge; also referred to at times by some people as "isolation"), directly from a sample taken from a diseased human, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum). Please note that I am not requesting studies/reports where researchers failed to purify the suspected "virus" and instead: cultured an unpurified sample or other unpurified substance, and/or performed an amplification test (i.e. a PCR test) on all the RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or sequenced the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or produced electron microscopy images of unpurified things. For further clarity, please note I am already aware that according to virus theory a "virus" requires host cells in order to replicate, and I am not requesting records describing the replication of a "virus" without host cells. Further, I am not requesting records that describe a suspected "virus" floating in a vacuum; I am simply requesting records that describe its purification (separation from everything else in the patient sample, as per standard laboratory practices for the purification of other small things). Please also note that my request is not limited to records that were authored by the CDC or ATSDR or that pertain to work done at/by the CDC or ATSDR. Rather, my request includes any record matching the above description, for example (but not limited to) any published peer-reviewed study authored by anyone, anywhere, ever that has been downloaded or printed and relied on as evidence of a disease-causing "virus". If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible.

If there are any fees for searching or copying these records, please inform me if the cost will exceed \$100. However, I would also like to request a waiver of all fees in that the disclosure of the requested information is in the public interest and will contribute significantly to the public's understanding of the isolation of purified

SARS-COV-2. This information is not being sought for commercial purposes.

The Arkansas Freedom of Information Act requires a response within three business days. If access to the records I am requesting will take longer, please contact me with information about when I might expect copies or the ability to inspect the requested records.

If you deny any or all of this request, please cite each specific exemption you feel justifies the refusal to release the information and notify me of the appeal procedures available to me under the law.

Thank you for considering my request.

Sincerely,

Dr. James W. Smith



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

From: David Ussery <daveussery@gmail.com>
To: SUSAN HANRAHAN <hanrahan@astate.edu>, Jake Rice <jrice@jonesborocwl.org>
Cc: Atul Kothari <Atul.Kothari@arkansas.gov>, "Robeson, Michael" <MRobeson@uams.edu>
Bcc:
Date: Wed, 24 Feb 2021 22:22:20 +0000
Subject: Re: Water samples

Hi Susan, Jake,

Thanks for your email. I'll attach a PDF of my talk last week, along with a PDF of an NIH U01 grant that I wrote for looking at Covid-19 in Arkansas wastewater. Unfortunately, that grant didn't get funded, but I'm hoping that I can reuse some of the same ideas in other proposals. For example, the CDC is funding some projects along these lines, I think. We are thinking about applying for a small bit of internal funding to explore a project with ConwayCorp - they've already been looking for Covid-19 in their wastewater for several months now (in collaboration with a colleague in Tacoma, Washington). We're hoping to do some of the analysis locally, but are trying to figure out the logistics of this, in terms of biosafety approval for the labs. Perhaps we could set up a time to discuss this some more sometime? As a general rule, Fridays are free for me.

With best wishes,

Dave

> On Feb 24, 2021, at 11:08, SUSAN HANRAHAN <hanrahan@astate.edu> wrote:

>

> Dave, I am Susan Hanrahan, Dean of the College of Nursing and Health Profession at Arkansas State University. I listened to your ARA presentation last week and when you made a call for "water samples", I listened. I sit on the board of City Water and Light in Jonesboro (water, wastewater and electricity). I spent a little time with our CEO, Jake Rice, to explain your coronavirus quest through water treatment samples. I am hooking both of you up so you can better explain your project to Jake and he can see if CWL can be of any value to your research. Good luck and thanks for your good work! Susan

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

From: "Ussery, David W" <DWUssery@uams.edu>

To: Atul Kothari <Atul.Kothari@arkansas.gov>

Cc:

Bcc:

Date: Thu, 7 Jan 2021 17:33:21 +0000

Subject: quick question...

Hi Atul,

I've read that CDC is investing money in sequencing COVID-19, to keep track of the more virulent UK strain, for example.

Do you know anything about this?

I woke up this morning thinking about a grant for the ARA (Arkansas Research Alliance). It's due on the 11th of January (Monday), and I was thinking about asking for \$100,000, for sequencing COVID-19 from wastewater in Conway, Arkansas. What do you think of this? Would you be willing to help? There's a pretty good chance it'll get funded - last year they funded 12 grants out of 12 proposals (!).

p.s., still waiting to hear back from the NIH on my U01 grant (see attached). It was SUPPOSED to have started first of December, but with all the budget problems (we almost had a government shutdown a few weeks ago!) - the NIH program managers are just now going their budgets - HOPE to hear in the next week or two on that one - it'd be great if we got it, of course! I think it was a good proposal - and I see that Arkansas is now back in the 'top10', in terms of number of cases per 100,000 (see screenshot from this morning's paper)

With best wishes,

Dave


Professor David W. Ussery, PhD
Helen Adams & the Arkansas Research Alliance Chair in Biomedical Informatics
University of Arkansas for Medical Sciences

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

8 attachments



7113E4C0-B89A-4C56-B842-A7D9D4526DE8_1_101_o.jpeg
256K

 **ARA_Project_Scope_17Feb2021_f-compressed.pdf**
5817K

 **4492952_Egrant-compressed.pdf**
3457K

 **Re: Water samples.eml**
12706K

 **4492952_Egrant-compressed.pdf**
3336K

 **ATT00001.htm**
2K

 **ATT00002.htm**
2K

 **quick question....eml**
4938K



Christine Massey <cmssyc@gmail.com>

Fwd: HHS FOIA Request 2021-01625-FOIA-OS

Mon, Aug 23, 2021 at 6:05 PM

To: "christinem@fluoridefreepeel.ca" <christinem@fluoridefreepeel.ca>

You can add to your list. From US Department of Human and Health Services.

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

From: **Taylor, Natasha** <foiarequest@hhs.gov>
Date: Thu, Aug 19, 2021 at 4:50 PM
Subject: HHS FOIA Request 2021-01625-FOIA-OS
To: [REDACTED]

RE: 2021-01625-FOIA-OS

Mr. [REDACTED]

Dear Mr. [REDACTED]

This is in response to your Freedom of Information Act (FOIA) request, dated: **August 18, 2021**, concerning "Records that demonstrates the US Department of Health and Human Services has a physical sample of the isolated and purified SARS-CoV-2 virus including the following: 1) Any and all evidence of this External Standard or Certified Reference Material (CRM) for calibration of RT-PCR test kits and any or all documentation; 2) Evidence of whether the Whole Genome Sequencing (WGS) occurred from the isolate; 3) Evidence and information on the current modality/test being used to determine and identify the difference from the original SARS-CoV-2 virus and the "Delta Variant" and/or other variants with all evidence and documentation demonstrating the initial discovery of the other variants. (Date Range for Record Search: From 10/1/2019 To 8/18/2021)".

We received your request on **August 18, 2021**.

For administrative convenience and to fully respond to your request, program staff have provided the following information below with corresponding web links.

SARS-CoV-2 is the virus that causes coronavirus disease 2019 (COVID-19). Active infection with SARS-CoV-2 is detected by [diagnostic tests](#). Currently there are two types of diagnostic tests – molecular tests that detect the virus's genetic material and antigen tests that detect specific proteins on the surface of the virus. For current data showing the total number of SARS-CoV-2-positive cases and deaths, visit the [CDC COVID-19 Data Tracker](#), which shows cases and deaths in the United States broken down by state and county, daily trends in the number of cases by state, and other parameters.

Evidence of SARS-CoV-2 infection can be found in a study entitled, [Pathology and Pathogenesis of SARS-CoV-2 Associated with Fatal Coronavirus Disease](#), which includes electron microscopy images of SARS-CoV-2 in infected lung and upper airway tissues as well as staining of lung and upper airway tissues using an antibody against SARS-CoV-2.

The specimens analyzed in this study were from patients with common signs and symptoms associated with COVID-19, including fever, cough, and shortness of breath. All patients had abnormal findings on chest radiographs.

There are other similar studies publicly available online. To aid in locating other related studies, please see the articles suggested in the "Similar Articles" and "Cited by" section on the manuscript's [PubMed entry](#).

The SARS-CoV-2 virus may be isolated from human clinical specimens by culturing in cells. In January 2020, CDC isolated the SARS-CoV-2 virus from a clinical specimen from the first confirmed case of COVID-19 in the United States. There are other similar studies published describing the isolation and characterization of SARS-CoV-2 from human clinical specimens. To aid in locating other related studies, please see the articles suggested in the "Similar Articles" and "Cited by" section on the manuscript's [PubMed entry](#). There are also several [publications](#) documenting SARS-CoV-2 infection and transmission among pre-symptomatic and asymptomatic individuals.

For information about the SARS-CoV-2 genome sequence, see the NIH GenBank website (<https://www.ncbi.nlm.nih.gov/genbank/sars-cov-2-seqs/>), which includes over 44,000 sequences as of December 7, 2020.

If you need any further assistance or would like to discuss any aspect of the records provided please contact either our FOIA Requester Service Center at 770-488-6399 or our FOIA Public Liaison at 770-488-6277.

Sincerely,

Natasha Taylor
Government Information Specialist
Main Office Line: 202-690-7453

Fwd: California Public Records Request :: P013542-081421

Robin [REDACTED]
To: Christine Massey <cmssyc@gmail.com>

Tue, Aug 24, 2021 at 4:30 PM

Hi Christine!

I just received the response from the California Department of Public Health. It is not in a PDF format. I hope you will still be able to add it to your list. Of course they have "no records". If you need anything else, please let me know.

Sincerely,

Robin [REDACTED]

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

From: **CDPH Public Records Portal** <cdph@govqa.us>
Date: Tue, Aug 24, 2021, 1:24 PM
Subject: California Public Records Request :: P013542-081421
To: [REDACTED]



RE: Public Records Reference # P013542-081421

Dear Robin [REDACTED]

On August 14, 2021, the California Department of Public Health (CDPH) received your request for records under the Public Records Act (PRA) wherein you requested the following:

This is a request for general records, under the California Public Records Act § 6250 et seq.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of the California Department of Public Health describing the purification (i.e. via filtration and ultra-centrifugation) of any "COVID-19 virus" (aka "SARS-COV-2", including any alleged "variants" i.e. "B.1.1.7", "B.1.351", "P.1") directly from a sample taken from a diseased human, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to purify the suspected "virus" (separate the alleged "virus" from everything thing else in the patient sample) and instead:

- Cultured an unpurified sample or other unpurified substance, and/or performed an amplification test (i.e. a PCR test) on the total RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or

-Fabricated a genome based on PCR-detected sequences in the total RNA from a patient sample or from a cell

culture or from any unpurified substance, and/or

-Produced electron microscopy images of unpurified things in a cell culture.

Clarification of Request

For further clarity, please note I am already aware that according to virus theory a "virus" requires host cells in order to replicate, and I am not requesting records describing the replication of a "virus" without host cells.

Further, I am not requesting private patient information, or records that describe a suspected "virus" floating in a vacuum; I am simply requesting records that describe its purification (i.e. separation from everything else in the patient sample, as per standard laboratory practices for the purification of other very small things).

Please note that my request includes any study/report matching the above description, for example (but not limited to) any published peer-reviewed study authored by anyone, anywhere.

If any records match the above description of requested records and are currently available in the public domain, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible.

If there are any fees for searching or copying these records, please inform me if the cost will exceed \$5. However, I would also like to request a waiver of all fees in that the disclosure of the requested information is in the public interest and will contribute significantly to the public's understanding of "COVID-19". This information is not being sought for commercial purposes.

The California Public Records Act requires a response within ten business days. If access to the records I am requesting will take longer, please contact me with information about when I might expect copies.

If you deny any or all of this request, please cite each specific exemption you feel justifies the refusal to release the information and notify me of the appeal procedures available to me under the law.

Format

Electronic files conveyed to me via email, preferably in PDF format; I do not wish for anything to be shipped to me.

CDPH has completed a diligent search and has determined that it is not in possession of records that are responsive to your request. For this reason, this concludes CDPH's response to your request, which will now be closed.

Sincerely,

Taylor St. Mary
AGPA
CID/DCDC

To monitor the progress, update this request, or download responsive records, please log into the [Public Records Center](#).

Access to Info Request: PURIFICATION OF “SARS-COV-2”

This is a formal request for access to general records, made under *Freedom of Information Act*.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of the Michigan Department of Health and Human Services(MDHHS), describing the **purification** of any “**COVID-19 virus**” (aka “SARS-COV-2”, including any alleged “variants” i.e. “B.1.1.7”, “B.1.351”, “P.1”, “Delta”) directly from a sample taken from a diseased human, where the patient sample was not first combined with any other source of **genetic** material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to **purify** the suspected “virus” (separate the alleged “virus” from everything thing else in the patient sample) and instead:

- cultured an unpurified sample or other unpurified substance, and/or
- performed an amplification test (i.e. a PCR test) on the total RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or
- fabricated a genome based on PCR-detected sequences in the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or
- produced electron microscopy images of unpurified things in a cell culture.

Clarification of Request

For further clarity, please note I am already aware that according to virus theory a “virus” requires host cells in order to replicate, and I am **not** requesting records describing the **replication** of a “virus” without host cells.

Further, I am **not** requesting records that describe a suspected “virus” floating in a vacuum; I am simply requesting records that describe its **purification** (**separation** from everything else in the patient sample, as per standard laboratory practices for the purification of other very small things).

Please note that my request includes any study/report matching the above description, for example (but not limited to) any published peer-reviewed study **authored by anyone, anywhere**.

Please also note that despite the fact that [purification is an essential](#) (but not sufficient) step in proving the existence of a disease-causing “virus”, as of today [68 institutions globally](#) (including the U.S. CDC, Public Health Agency of Canada, Australian Department of Health, New Zealand Ministry of Health, European Centre for Disease Prevention and Control, UK Department for Health and Social Care, Indian Council of Medical Research)

have all failed to provide or cite any such records, therefore to my knowledge no such records exist and if they do exist I cannot access them until I am provided a citation or URL.

Therefore in the interest of transparency and in accordance with the purposes of the legislation, if any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible. (or Pdf documents sent to me via email; I do not wish for anything to be shipped to me.)

Thank you

Contact Information:

Last name: Nihem

First name: Andrew

Phone: 248-210-7237

Email: arnihem@hotmail.com



RE: Public Records Request, Reference # H012477-080421.

Dear Mr Nihem,

This notice is issued in response to your request, legally received by the Michigan Department of Health and Human Services (Department) on August 05, 2021, requesting information under the Freedom of Information Act (FOIA), MCL 15.231 *et seq.*

Your request is denied.

To the best of the Department’s knowledge, information, and belief, this Department does not possess or maintain records under the description you provided or by other names reasonably known to the Department.

As to the denial, the Department is obligated to inform you that under MCL 15.240 §10 the following remedies are available:

1. Appeal this decision in writing to the Legal Affairs Administration of the Department of Health and Human Services, PO Box 30195, Lansing, MI 48909. The writing must specifically state the word “appeal” and must identify the reason or reasons you believe the denial should be reversed. The Department must respond to your appeal within ten days of receipt. Under unusual circumstances, the time for response to your appeal may be extended by ten business days.
2. File an action in the appropriate court within 180 days after the date of the final determination to deny the request. If you prevail in such an action, the court is to award reasonable attorney fees, costs, disbursements, and possible damages.

The Department’s FOIA policies and procedures are available at [Policies and Procedures](#).

Sincerely,

Ruth O'Connor
Bureau of Legal Affairs

26 August 2021

By email: [REDACTED]

Dear [REDACTED]

Official Information Act Request: SARS-CoV-2 purification by any method

On 18 August 2021 you sent a request for information under the Official Information Act 1982 to ESR as follows:

"This is a formal request for access to general records, made under the Official Information Act.

Please note: this request is very similar to another request ESR responded to in March, 2021 where I had specified purification via maceration, filtration and use of an ultracentrifuge. The difference with this new request is that it does not specify maceration, filtration and use of an ultracentrifuge; it only mentions filtration, ultracentrifugation and chromatography by way of an example. My request also includes the language of 'variants' to ensure that records would match all related alleged SARS-COV-2 viruses.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of ESR describing the purification of any "COVID-19 virus" (aka "SARS-COV-2", including any alleged "variants" i.e. "B.1.1.7", "B.1.351", "P.1") (for example: via filtration, ultracentrifugation and chromatography), directly from a sample taken from a diseased human where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to purify the suspected "virus" and instead:

- cultured an unpurified sample or other unpurified substance, and/or*
- performed an amplification test (i.e. a PCR test) on all the RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or*
- fabricated a "genome" by editing/assembling/aligning sequences detected in the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or*
- produced electron microscopy images of unpurified things.*

For further clarity, please note I am already aware that according to virus theory a "virus" requires host cells in order to replicate, and I am not requesting records describing the replication of a "virus" without host cells.

Further, I am not requesting records that describe a suspected "virus" floating in a vacuum; I am simply requesting records that describe its purification (separation from everything else in the patient sample, as per standard laboratory practices for the purification of other very small things).

Please also note that my request is not limited to records that were authored by ESR or that pertain to work done at/by ESR. Rather, my request includes any record matching the above description, for example (but not limited to): any published peer-reviewed study authored by anyone, anywhere, ever that has been downloaded or printed by ESR and relied on as evidence of a disease-causing "virus".

If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible."

Our response to your request:

Using the definition of 'purification' that you refer to in your request, ESR does not hold any records describing 'purification' of SARS-CoV-2.

We cannot provide papers that staff in ESR have downloaded or printed which may apply to your request using your definition of 'purification' as the information cannot be made available without substantial collation or research pursuant to section 18(f) of the Act. We have considered section 18A of the Act and consider that even if we were to charge you for the time to check and collate any relevant materials and extend the timeframe of the request, this would still unduly affect our team who are supporting New Zealand's COVID-19 response work.

Your right to seek a review

You have the right to seek an investigation and review by the Ombudsman of this decision. Information about how to make a complaint is available at www.ombudsman.parliament.nz or freephone 0800 802 602.

Thank you for your request.

Yours sincerely



Jill Vintiner
**Joint General Manager health and Environment Group – Health
ESR**



Christine Massey <cmssyc@gmail.com>

MFIPPA request to Dr. Salvaterra re purification of "HIV", "Hep B", "Hep C"

Christine Massey <cmssyc@gmail.com>

Thu, Aug 19, 2021 at 5:44 PM

To: rmatheson@peterborough.ca, info@peterboroughpublichealth.ca

August 19, 2021

To:

**Freedom of Information and Privacy Coordinator
City of Peterborough / Peterborough Public Health**

10 Hospital Drive
Peterborough, ON K9J 8M1

and/or

Jackson Square,
185 King Street
Peterborough, ON K9J2R8

Submitted via email to: info@peterboroughpublichealth.ca; matheson@peterborough.ca

Dear Freedom of Information and Privacy Coordinator,

This is a formal request for access to general records, made under the *Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)*.

A failure to respond within 30 days as required under MFIPPA will be interpreted as "no records" and made public.

Application Fee

Tomorrow I will telephone 705-742-7777 ext. 1820 to pay the \$5 application fee.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of Dr. Rosana Salvaterra, or any Peterborough Public Health staff member responsible for "clinic inspections", or any member of Peel Public Health's "infectious/transmissible disease" leadership, describing the **purification** (i.e. via filtration, ultracentrifugation and chromatography) of any **"HIV" aka "human immunodeficiency virus" or of any "Hepatitis B virus" or of any "Hepatitis C virus"**, directly from a sample taken from a diseased human where the patient sample was not first combined with any other source of **genetic** material (i.e. a human or animal cell line; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to **purify** the suspected "virus" from a patient sample and instead:

- cultured an unpurified sample or other unpurified substance, and/or
- performed an amplification test (i.e. a PCR test) on the total RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or
- fabricated a genome based on alignment/assembly/trimming/editing of thousands/millions of sequences detected in the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or
- produced electron microscopy images of unpurified things.

Clarification of Request

For further clarity, please note I am already aware that according to virus theory a "virus" requires host cells in order to replicate, and I am **not** requesting records describing the **replication** of a "virus" without host cells.

Further, I am **not** requesting private patient records (or records that describe a suspected "virus" floating in a vacuum; I am simply requesting records that describe its **purification (separation)** from everything else in the patient sample,

as per standard laboratory practices for the purification of other very small things).

Please also note that my request includes any study/report matching the above description, for example (but not limited to) any published peer-reviewed study **authored by anyone, anywhere** since the discovery of each alleged "virus".

In the interest of transparency and in accordance with the purposes of *MFIPPA*, if any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. title, author(s), date, journal, where the public may access it). Please provide URLs where possible.

Format:

Pdf documents sent to me via email; I do not wish for anything to be shipped to me.

Contact Information:

Last name: Massey

First name: Christine

Address:

Phone:

Email: cmssyc@gmail.com

Thank you in advance and best wishes,
Christine Massey, M.Sc.



Christine Massey <cmssyc@gmail.com>

MFIPPA request to Dr. Salvaterra re purification of "HIV", "Hep B", "Hep C"

Christine Massey <cmssyc@gmail.com>

Sat, Aug 21, 2021 at 2:29 PM

To: rmatheson@peterborough.ca, info@peterboroughpublichealth.ca, Larry Stinson
<lstinson@peterboroughpublichealth.ca>

p.s. Please add "SARS-COV-2" (including any 'variants') to the list of viruses covered by this request.

[Quoted text hidden]



Christine Massey <cmssyc@gmail.com>

MFIPPA request to Dr. Salvaterra re purification of "HIV", "Hep B", "Hep C"

Wendy Freeburn <wfreeburn@peterboroughpublichealth.ca>

Thu, Aug 26, 2021 at 3:07 PM

To: "cmssyc@gmail.com" <cmssyc@gmail.com>

Cc: Larry Stinson <lstinson@peterboroughpublichealth.ca>

Good afternoon Ms. Massey; I am replying on behalf of Larry Stinson to your Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) request received on August 21, 2021. I have forwarded the original correspondence to you in the mail.

If you have any questions, please reply to lstinson@peterboroughpublichealth.ca.

Thank you.

Wendy Freeburn

Executive Assistant to

Larry Stinson, Director of Operations and

Donna Churipuy, Director of Public Health Programs and Chief Nursing and Privacy Officer and

Elizabeth Stewart, Human Resources Generalist



Jackson Square, 185 King St., Peterborough, ON K9J 2R8

P: 705-743-1000 or 1-877-743-0101, ext. 253 F: 705-743-1810

E: wfreeburn@peterboroughpublichealth.ca

www.peterboroughpublichealth.ca

From: Christine Massey [<mailto:cmssyc@gmail.com>]

Sent: Saturday, August 21, 2021 2:30 PM

To: rmatheson@peterborough.ca; Info Mail <info@peterboroughpublichealth.ca>; Larry Stinson <lstinson@peterboroughpublichealth.ca>

Subject: Re: MFIPPA request to Dr. Salvaterra re purification of "HIV", "Hep B", "Hep C"

WARNING: This email did not originate from an internal source. Do not open attachments or click on links unless

you know it is safe. ONLY if you suspect this is a phishing or fraudulent email, please forward it to IT's dedicated account for suspicious emails.

[Quoted text hidden]

Follow us on [Twitter](#) | [Facebook](#)

Peterborough Public Health serves the residents of Curve Lake and Hiawatha First Nations, and the County and City of Peterborough.

The information contained in this electronic transmission is intended for the person(s) or entity to whom it is addressed. Delivery of this message to any person other than the intended recipient(s) is not intended in any way to waive confidentiality. This material may contain confidential or personal information which may be subject to the provisions of Ontario's Personal Health Information Protection Act. Any review, retransmission, dissemination or other use of this information by entities other than the intended recipient is prohibited. If you receive this in error, please contact the sender and delete the material immediately.

L'information contenue dans ce message électronique est destinée uniquement au destinataire ou aux destinataires visés. La transmission de ce message à une personne autre que son destinataire ou ses destinataires visés ne supprime en rien l'obligation d'en respecter la confidentialité. Ce message peut contenir des renseignements de nature confidentielle ou personnelle qui pourraient être soumis aux dispositions de la Loi de 2004 sur la protection des renseignements personnels sur la santé. L'examen, la retransmission, la diffusion et toute autre utilisation de l'information contenue dans ce message par des personnes autres que le destinataire ou les destinataires visés sont interdits. Si vous recevez ce message par erreur, veuillez le supprimer immédiatement et en avvertir l'expéditeur.

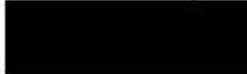


Christine Massey MFIPPA Request File No. 2021-11 dated Aug 21 2021, Aug 25 2021.pdf

192K

August 25, 2021

Ms. Christine Massey



RE: MFIPPA Request, dated August 21, 2021, File No: 2021-11

Dear Ms. Massey:

In response to your request under the *Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)* for:

"All studies and/or reports in the possession, custody or control of Dr. Rosana Salvaterra, or any Peterborough Public Health staff member responsible for "clinic inspections", or any member of Peel Public Health's "infectious/transmissible disease" leadership, describing the purification (i.e. via via filtration, ultracentrifugation and chromatography) of any "HIV" aka "human immunodeficiency virus" or of any "Hepatitis B virus" or of any "Hepatitis C virus", directly from a sample taken from a diseased human where the patient sample was not first combined with any other source of genetic material (i.e. a human or animal cell line; fetal bovine serum)." And, "Please add "SARS-COV-2" (including any 'variants') to the list of viruses covered by this request."

Peterborough Public Health has no records in relation to your request. Local public health agencies in Ontario are responsible for adherence to the Health Protection and Promotion and implementation of the Ontario Public Health Standards and related protocols as set by the Ministry of Health. Scientific advice is provided by Public Health Ontario. We do not work directly with patient samples related to the viruses noted above or analysis of these samples.

If you have any questions, I can be contacted at lstinson@peterboroughpublichealth.ca, or by calling (705) 743-1000, extension 253.

Yours truly,



Larry Stinson,
Hons. B.Sc., MPA(M)
Director of Operations

wf
encls.