



November 10, 2022

National Institutes of Health
Freedom of Information Act Office
Submitted VIA [NIH Online FOIA Portal](#)

Re: Freedom of Information Act request regarding NIH engagement with members of the public who experienced adverse health effects after receiving a COVID-19 injection

To Whom it May Concern:

This request concerns communications with and about members of the public who experienced adverse health events after receiving a COVID-19 injection.

Around January 2021, National Institutes of Health (NIH) researchers began to hear from individuals who were experiencing severe, lasting health problems after COVID-19 vaccination, including neurological, cardiovascular, muscular, and other disorders.¹ The NIH researchers sought to learn more, bringing some affected people to NIH headquarters for testing, and sometimes treatment.²

Pursuant to the Freedom of Information Act, [5 U.S.C. § 552](#) ("FOIA") and the implementing regulations of your agency, [45 C.F.R Part 5](#), Children's Health Defense (CHD) requests the records listed below.

For the purposes of this request, "NIH researcher" means the following individuals:

- Anthony Fauci
- Alkis Togias
- Avindra Nath
- Farinaz Safavi
- Lindsey Gustafson
- Brian Walitt
- Tanya Lehy
- Amanda Wiebold

¹ See *In Rare cases, coronavirus vaccines may cause Long Covid-like symptoms*, in *Science*, Vol 375, Issue 6579, online at <https://www.science.org/content/article/rare-cases-coronavirus-vaccines-may-cause-long-covid-symptoms> ("Rare cases").

² *Id.* See also, BMJ preprint, *Neuropathic symptoms with SARS-CoV-2 vaccination*, online at <https://www.medrxiv.org/content/10.1101/2022.05.16.22274439v1.article-info>,

- Angelique Gavin
- Yair Mina

For the purposes of this request, “affected individual” means any member of the public who experienced a health problem after COVID-19 vaccination, and who contacted NIH to report the problem, or to seek medical assistance or information in connection with the problem, or to inquire about or participate in research about COVID-19 vaccine reactions.

For the time period from November 1, 2020, to the present, please provide the following records:

- 1) For each NIH researcher, all emails sent to and received from an affected individual;
- 2) All NIH call logs documenting communications with affected individuals; and
- 3) All internal communications between NIH researchers regarding an affected individual, whether the communication is via email, Teams, or other internal communication system.

Guidance Regarding the Search and Processing of Requested Records

In connection with its request for records, CHD provides the following guidance regarding the scope of the records sought and the search and processing of records:

- Please search all locations, NIH departments and systems likely to have responsive records, regardless of format, medium, or physical characteristics.
- Please use all tools available to your agency to conduct a complete and efficient search for potentially responsive records. Agencies are subject to government-wide requirements to manage agency information electronically,³ and many agencies have adopted the National Archives and Records Administration (NARA) Capstone program, or similar policies. These systems provide options for searching emails and other electronic records in a manner that is reasonably likely to be more complete than just searching individual custodian files. For example, a custodian may have deleted a responsive email from his or her email program, but your agency’s archiving tools may capture that email under Capstone. At the same time, custodian searches are still necessary; agencies may not have direct access to files stored in PST files, outside of network drives, in paper format, or in personal email accounts.

³ Presidential Memorandum—Managing Government Records, 76 Fed. Reg. 75,423 (Nov. 28, 2011), <https://obamawhitehouse.archives.gov/the-press-office/2011/11/28/presidential-memorandum-managing-government-records>; Office of Mgmt. & Budget, Exec. Office of the President, Memorandum for the Heads of Executive Departments & Independent Agencies, “Managing Government Records Directive,” M-12-18 (Aug. 24, 2012), <https://www.archives.gov/files/records-mgmt/m-12-18.pdf>.

- In the event some portions of the requested records are properly exempt from disclosure, please disclose any reasonably searchable non-exempt portions of the requested records. Please also describe any redacted, deleted, or withheld material in detail and specify the statutory basis for the denial as well and the reasons that statutory basis applies.
- If a request is denied in whole, please state specifically why it is not reasonable to segregate portions of the record for release.
- Please take appropriate steps to ensure that records responsive to this request are not deleted by the agency before the completion of processing for this request. If records potentially responsive to this request are likely to be located on systems where they are subject to potential deletion, including on a scheduled basis, please take steps to prevent that deletion, including, as appropriate, by instituting a litigation hold on those records.
- Please also separately state your reasons for not invoking your discretionary powers to release the requested documents in the public interest. Such statements may help to avoid unnecessary appeals and litigation. CHD reserves all rights to appeal the withholding or deletion of any information.
- If it will accelerate the release of responsive records to CHD, please provide responsive material on a rolling basis.

Request for Fee Waiver

In accordance with 5 U.S.C. § 552(a)(4)(A)(iii) and your agency's regulations, CHD requests a waiver of fees associated with processing this request for records.

The subject of this request concerns the operations of the federal government—specifically, the taxpayer-funded NIH—and the disclosures are in the public interest, because they will likely contribute significantly to the general public's understanding of relevant government operations and activities. In particular, the public has a deep interest in understanding how federal public health agencies have responded to health problems that follow COVID-19 vaccination, and the records requested will significantly enhance that understanding.

In addition, this request is primarily and fundamentally for non-commercial purposes.⁴ Children's Health Defense (CHD) is a 501(c)(3) non-profit made up of public health professionals, medical professionals, lawyers, scientists, and journalists. CHD works to end childhood health epidemics by exposing causes, eliminating harmful exposures, holding those responsible accountable, seeking justice for those injured, and establishing safeguards to prevent future harm.

⁴ See 5 U.S.C. § 552(a)(4)(A)(iii).

CHD is committed to educating the general public in connection with these efforts, and to that end, presents the information gathered, along with analyses and other editorial content, through news reports, press releases, and other media; on its public website; and on its news website, The Defender.⁵

Accordingly, CHD qualifies for a fee waiver. If CHD's request for a fee waiver is not granted in full, please contact us immediately upon making such a determination.

Request for Expedited Processing

The FOIA provides for “expedited processing” of a request for records when there is a “compelling need.” 5 U.S.C. §552 (a)(6)(E)(v). Here, the “compelling need” standard is met. As noted above, CHD presents information, analyses, and other editorial content, through news reports, press releases, and other media; on its public website; and on its news website, The Defender.⁶ Thus, CHD is primarily engaged in disseminating information. Additionally, as discussed below, there is urgency to inform the public concerning actual Federal Government activity, namely, the NIH’s engagement with individuals who have suffered adverse events after receiving COVID-19 injections.

The federal government has engaged in ongoing efforts to ensure that nearly all members of the U.S. population receive COVID-19 vaccines and boosters. These efforts include purchasing billions of dollars of COVID-19 vaccines for distribution to the public⁷; funding broad-based vaccine distribution efforts throughout the United States;⁸ imposing nationwide COVID-19 vaccine mandates;⁹ paying billions of dollars to media sources to provide positive coverage of COVID-19 vaccines;¹⁰ and working with social media companies to ensure positive coverage of COVID-19 vaccines and censor

⁵ See Children’s Health Defense, <https://childrenshealthdefense.org/>; The Defender <https://childrenshealthdefense.org/defender/>; <https://twitter.com/ChildrensHD>.

⁶ See Children’s Health Defense, <https://childrenshealthdefense.org/>; The Defender <https://childrenshealthdefense.org/defender/>; <https://twitter.com/ChildrensHD>.

⁷ See, e.g., <https://www.hhs.gov/about/news/2022/06/29/biden-harris-administration-secures-105-million-doses-of-pfizers-latest-covid-19-vaccine-for-fall-vaccination-campaign.html> (last accessed November 9, 2022).

⁸ See <https://www.cdc.gov/media/releases/2021/p0407-covid-19-vaccine-programs.html#:~:text=The%20Centers%20for%20Disease%20Control,virus%20that%20causes%20COVID%2D19> (last accessed November 9, 2022).

⁹ See <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/09/09/executive-order-on-requiring-coronavirus-disease-2019-vaccination-for-federal-employees/>, <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/09/09/executive-order-on-ensuring-adequate-covid-safety-protocols-for-federal-contractors/>, <https://www.whitehouse.gov/briefing-room/statements-releases/2021/11/04/fact-sheet-biden-administration-announces-details-of-two-major-vaccination-policies/> (last accessed November 9, 2022).

¹⁰ See <https://www.congress.gov/bill/117th-congress/house-bill/1319/text>; see also, <https://www.hhs.gov/about/news/2021/04/01/hhs-launches-nationwide-network-trusted-voices-encourage-vaccination-next-phase-covid-19-public-education-campaign.html>; <https://wecandohis.hhs.gov/resource/campaign-approach-to-reaching-general-audiences#paid-media> (last accessed November 9, 2022).

alternative viewpoints.¹¹ With authorization of booster shots for children and adults,¹² along with COVID-19 vaccines for children as young as six months,¹³ the push towards universal vaccination has only intensified.¹⁴

Thousands of post-injection adverse events have been reported to the federal government.¹⁵ Despite these reports, however, the government continues to tout COVID-19 shots as “safe and effective,”¹⁶ and to push virtually universal uptake of the shot, including the new, “bi-valent” booster.¹⁷

¹¹ See https://aaronkheriaty.substack.com/p/our-lawsuit-uncovers-army-of-federal?utm_source=brownstone&utm_medium=web; <https://www.aflegal.org/news/afl-lawsuit-reveals-damning-cdc-documents-proving-government-collusion-with-big-tech-to-censor-free-speech-and-promote-biden-administration-propaganda>; https://ftp.aflegal.org/foia/HHS/COVID%20Disinformation%20-%20CDC%20-%202021-01575-FOIA/286%20pages_Second%20Interim%20Release_22-00003-LT.pdf (last accessed November 9, 2022).

¹² See <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-expands-eligibility-pfizer-biontech-covid-19-vaccine-booster-dose>; <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-second-booster-dose-two-covid-19-vaccines-older-and#:~:text=The%20agency%20amended%20the%20emergency,or%20approved%20COVID%2D19%20vaccine.>; <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-expands-eligibility-pfizer-biontech-covid-19-booster-dose-16-and-17> (last accessed July 14, 2022).

¹³ See <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-moderna-and-pfizer-biontech-covid-19-vaccines-children#:~:text=For%20the%20Pfizer%2DBioNTech%20COVID,years%20of%20age%20and%20older> (last accessed November 9, 2022).

¹⁴ See, e.g., <https://www.whitehouse.gov/briefing-room/press-briefings/2022/07/12/press-briefing-by-white-house-covid-19-response-team-and-public-health-officials-87/>; <https://www.newsweek.com/why-america-doesnt-trust-cdc-opinion-1713145>; <https://www.cdc.gov/about/leadership/director-debriefing.html>; <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>; <https://www.youtube.com/watch?v=h62OpDVdKoA>; https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/childrenteens.html?s_cid=11368:5%20year%20old%20covid%20vaccine.sem.ga.p:RG:GM:gen:PTN:FY21 (last accessed November 9, 2022). Indeed, the CDC recommends that eligible, non-immunocompromised individuals stay “up to date with COVID-19 vaccines” including boosters. https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Fbooster-shot.html (last accessed November 9, 2022).

¹⁵ As of October 28, 2022, the VAERS data showed 263,362 reports of serious injuries and 31,696 reports of deaths following COVID-19 vaccination. <https://childrenshealthdefense.org/defender/deaths-adverse-events-updated-covid-booster-shots-vaers/>. Of course, the VAERS data is only the tip of the iceberg in the U.S.; the VAERS underreporting factor appears to be significant, and federal agencies have additional sources of adverse-event reports that are not fully public. See <https://www.trialsitenews.com/a/why-wont-the-cdc-or-fda-reveal-the-vaers-urf>; <https://jessicar.substack.com/p/a-question-and-answer-document-on#footnote-1>; <https://www.cdc.gov/vaccinesafety/ensuringsafety/monitoring/index.html>; <https://www.fda.gov/vaccines-blood-biologics/safety-availability-biologics/covid-19-vaccine-safety-surveillance#:~:text=The%20system%20makes%20use%20of,specific%20safety%20questions%20for%20vaccines>; <https://www.ronjohnson.senate.gov/2022/2/sen-johnson-to-secretary-austin-has-dod-seen-an-increase-in-medical-diagnoses-among-military-personnel> (last accessed November 9, 2022).

¹⁶ See, e.g., <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/safety-of-vaccines.html>;

¹⁷ See, e.g., <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-moderna-and-pfizer-biontech-bivalent-covid-19-vaccines>;

Meanwhile, numerous scientists, physicians, public health experts, and other concerned individuals have questioned the safety of COVID-19 injections.¹⁸ There has been ongoing public weighing of the risks and benefits of the vaccines¹⁹ and public debate about the wisdom, legality, and morality of COVID-19 vaccine mandates.²⁰

The public includes private citizens who are faced with immediate decisions about whether to take COVID-19 injections and boosters, whether to vaccinate their children, and whether to politically support vaccine mandates. The public also includes scientists, medical professionals, and policymakers faced with immediate decisions about how to advise and treat patients and constituents.

Given the ongoing pressure to take more COVID-19 shots and ongoing medical and public policy debates connected with the shots, the public has an urgent need to understand how the federal government is addressing adverse events through the NIH's behind-the-scenes engagement with vaccine-injured individuals.²¹ A lack of transparency about this engagement deprives people of the information needed to make fully informed medical and political decisions, and erodes confidence in the conclusions reached and guidance promulgated by federal agencies.

Conclusion

CHD and the NIH share a common mission to promote public health and transparency in government. By working together at the outset, we can decrease the likelihood of costly and time-consuming litigation in the future. If you have any questions regarding how to construe this request for records or believe that further discussions regarding

<https://www.npr.org/2022/09/02/1120692856/new-covid-boosters-cdc-walensky> (last accessed November 9, 2022).

¹⁸ See, e.g., 750+ Studies About the Dangers of the COVID-19 Injections at <https://img1.wsimg.com/blobby/go/058ad340-73c5-4f3d-af4f-8df4795d5196/750-Studies-About-the-Dangers-of-the-COVID-19-.pdf>; <https://www.canadiancovidcarealliance.org/wp-content/uploads/2021/12/The-COVID-19-Inoculations-More-Harm-Than-Good-REV-Dec-16-2021.pdf>; <https://thehighwire.com/videos/live-in-d-c-expert-panel-on-medical-mandates-vaccine-injuries/> (last accessed November 9, 2022).

¹⁹ For example, an article published on August 31, 2022 in the journal *Vaccine*, using a simple harm-benefit comparison from clinical trial data, finds that the “excess risk of serious AESIs to exceed the reduction in COVID-19 hospitalizations in both Pfizer and Moderna trials,” and urges additional, deeper risk-benefit analysis. See “*Serious adverse events of special interest following mRNA COVID-19 vaccination in randomized trials in adults*,” Fraiman, et al., Discussion section. <https://www.sciencedirect.com/science/article/pii/S0264410X22010283?via%3Dihub>.

²⁰ See, e.g., <https://www.nashp.org/state-lawmakers-submit-bills-to-ban-employer-vaccine-mandates/>; <https://www.latimes.com/california/story/2022-04-10/hundreds-gather-for-defeat-the-mandates-rally-in-downtown-l-a>. Evidence of the magnitude of the debate is found, among other places, in the numerous lawsuits that have been brought to challenge COVID-19 vaccine mandates. See, *COVID-10: A Litigation Update*, at <https://www.natlawreview.com/article/class-action-trends-report-fall-2022>.

²¹ Apart from the Countermeasures Injury Compensation Program, <https://www.hrsa.gov/cicp>, the federal government does not appear to have any official program that offers engagement, support, or treatment for individuals injured by the COVID-19 injections it so relentlessly promotes. But behind the scenes, as discussed above, NIH has taken steps to engage with some of these injured individuals.

search and processing would facilitate a more efficient production of the records, please do not hesitate to contact CHD to discuss this request. We can be reached at foia@childrenshealthdefense.org.

Where possible, please provide responsive material in an electronic format by email. Alternatively, please provide responsive material in native format or in PDF format on a USB drive. Please send any responsive material being sent by mail to Children's Health Defense at 852 Franklin Ave., Suite 511, Franklin Lakes, New Jersey, 07417.

Children's Health Defense looks forward to working with your agency on this request. Thank you for your time and attention to this matter.

Sincerely yours,



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