

A DOCTOR'S WAR

RIGHT TO DECLINE VACCINES

American Association of Physician and Surgeons Letter

by Luis B. Vega

vegapost@hotmail.com

www.PostScripts.org

The purpose of this repost is to draw one's attention to how there is presently, due to the COVID-19 War on Humanity, also a battle raging among Physicians and Surgeons. This would include Nurses and Scientists that are affected by the released COVID-19 outbreak and deal with the effects and outcomes on a daily basis. Such are on the Front Line of this Doctor's War. One such example of a 'Frontal Attack' has been made by way of a Statements from many Medical-Related Associations, to include the most prominent ones in the USA. They are in favor and support the decision by Hospitals and Governments to force inject People. Likewise, the American Association of Physician and Surgeons has made a Counter 'Attack' or Statement in support of upholding a person's Right to Decline any Experimental Injection.

One would ask, what is the difference in such Associations in having a for or against support of such a Medical Device? The bottom line is who 'owns' the Doctors, Nurses, and Physicians. And as well, who owns the Hospitals. It is 'Big Pharma' that owns most of the Hospitals and are operated for a profit margin. They control the Doctors, Nurses and Physicians, and Patients. They are in contract and why this type of Corporate Medicine has such a sway in censoring, silencing and firing any on Staff that goes contrary to the 'Official Scientific Narrative' concerning COVID-19 and the mandate to forcibly inject People now, even Children. Such Corporate Medicine is in 'bed' with Big Pharma and bought-off Politicians and Governments that push their Pills and 'Vaccines' as in this case, the various COVID-19 Injections. This is also the reason why, for the most part, the Physicians, Doctors, Surgeons, and Nurses have been kept at bay in speaking out for fear of losing one's job.

Also realize that as such are at the 'Front Lines' of the battle against diseases and pandemics, many do not see the 'Bigger Picture' of what has been an orchestrated and synchronized takeover of Socialized Medicine and as such do in fact support the need to inject the World with what they believe is a 'Vaccine' pertaining to the COVID-19 Shots. They are not Vaccines but a new unproven and not fully tested Medical Device that is presently still under Emergency Experimental Authorization Use only. And as a result, many Associations, sadly and unfortunately have been bought-out by Corporate Medical Money. By contrast, such bodies, that are few and are the minority, like the AAPS, American Association of Physicians and Surgeons have advocated for Bodily Sovereignty and Integrity. Such support one's Right to Decline such unproven Medical Devices. Why? They are Independent and free of the Power and Influence and the Bribe of the Big Pharma Corporate Sharks. They are at the Front Line of the Doctor's War fighting for one's Civil and Human Right to be safe and secure in one's Person.

Cancel Culture

Step-by-Step, such Forced Injection Mandates will be required nationwide. In the USA, an eventual Presidential Order to have everyone in the country be 'vaccinated' will surely come. This has already been made with the requirement of all Federal Workers. The largest University System in the World, the California State Universities, as well as the University of California have also now required all Faculty, Staff and Students accessing the campus to be injected with the COVID-19 Injection. And this for a virus that does no longer exist. It is like taking a Flu Shot for a Variant that occurred 2 years ago. This is why, once a person takes the new mRNA Injections, subsequent ones have to be given in perpetuity to combat the latest programmed 'Variants' that scientifically are less potent and will have compromised one's own Natural Immune System.

Nonetheless, in this 'Doctor's War', such discussions, concerns and alternative Medical Assessments made by qualified Doctors, Scientists, and Nurses are being systematically censored, de-platformed and marginalized. In some cases, many have been physically threatened and their families. Many have been threatened with having Licenses suspended. Many are losing their positions in Universities, Hospitals and in Research Institutions. This is a Scientific Witch-Hunt. This is not Science. And why? Consider who owns the Mass Media, the Social Media, who Manufacturers the Vaccine, who run the WHO, CDC, FDA and who owns the Hospitals? It is a coordinated 'Conspiracy'. Consider the following quote.

'People who complain of nettlesome criticism on the grounds that it undermines the Community Standards are usually smuggling in a treacherous assumption: that they know what the Community thinks, and that it is more or less the same as what they think. Such People are, necessarily, either Majoritarians who object to a Minority Opinion or Elitists who object to a Majority Opinion. Either way, it is unclear why they have any special standing to regulate discussion in the name of the whole Community.'

For, of course, Communities do not have opinions or speak their minds. People do. Liberal Science's great discovery was that within every Community is a wide variety of opinion, enough to fuel the arguments that propel knowledge forward In Liberal Science, the Community discovers what it thinks through Criticism – and its Members never do all think any one thing. If they did, Intellectual Progress would stop.' – *Kindly Inquisitors: The New Attack on Free Thought, Expanded Edition by Jonathan Rauch, George F. Will*

Doctors are being fired like Dr. Francis Christian from Canada. He is a Practicing Surgeon and Clinical Professor at the University of Saskatchewan. He has been suspended from all teaching and will be permanently removed from his duties as of September 2021. He was terminated due to his speaking out on Social Media over the lack of Informed Consent especially regarding Children. For example, it has been found that the Messenger RNA Injections have 40 trillion molecules in every dose. These are causing microscopic Blood Clots to form. They are scattered throughout the Capillary Network and can only be detected by a D-Dimer Test. Many young People are dying because of this alone and going undetected. The following is the article that AAPS released to counter the Statement made of the various Associations in favor of having Health Care Workers be required to take the Experimental COVID-19 Injections.

AAPS Supports the Right to Decline COVID-19 Vaccine

In response to the Joint Statement by the American Medical Association (AMA) and others supporting mandatory COVID-19 vaccination for all health care workers, the Association of American Physicians and Surgeons (AAPS) issued a Statement in Support of the Right of All, Including Medical Workers, to Decline Medical Intervention:

“The Association of American Physicians and Surgeons (AAPS) declares that all human beings have the right to liberty, which they do not forfeit when they serve the sick or the disabled. The ethical commitment to protect others does not require workers to surrender their bodily integrity and self-determination....

“Risks and benefits differ in individual patients and differing circumstances. Achieving a stamp of approval from the Food and Drug Administration (FDA)—premature because studies are not scheduled to be complete before the end of 2022—does not confer safety or effectiveness. FDA-approved products have frequently been withdrawn....

“The Joint Statement recognizes only a medical exemption, and omits mention of a religious exemption though many workers object to receiving these products based on their religious beliefs. Medical exemptions are virtually never recognized for the COVID vaccines because there is improper denial that they cause harm to anyone.

“Long-term effects of these novel, genetically engineered products cannot possibly be known at this point. These could include autoimmune disorders, antibody-enhanced disease, infertility, cancer, or birth defects....”AAPS favors insistence on fully informed, truly voluntary consent for all medical intervention.

This includes full disclosure of all risks, and a diligent effort to identify and track risks.... Our medical organizations should be advocating for free and open discussion and opposing censorship....

“Without freedom, there is no safety for either workers or our patients.”

AAPS president Paul Kempen, M.D., Ph.D., adds the following observations:

As of mid-July, 30 million people have recovered from COVID-19 in the U.S. and have natural immunity. Vaccination of these persons confers only risk with little to no benefit, yet these mandates do not exempt them.

Serious side effects have been identified, including paralysis and inflammation of the heart muscle, which may not resolve and may cause death.

As variants multiply, “booster” shots may be required, with increasing risk of allergic phenomena. The Association of American Physicians and Surgeons has represented physicians in all specialties since 1943. Its motto is omnia pro aegroto, everything for the patient.

Statement in Support of the Right of All, Including Medical Workers, to Decline Medical Intervention

Due to the Joint Statement by various organizations that all “health care and long-term care employers” should impose a requirement to receive “the COVID-19 vaccine” on all their workers, the Association of American Physicians and Surgeons (AAPS) declares that all human beings have the right to liberty, which they do not forfeit when they serve the sick or the disabled. The ethical commitment to protect others does not require workers to surrender their bodily integrity and self-determination and accept “the” intervention dictated by a governmental or quasi-governmental authority.

As around half the population has received injections permitted under an Emergency Use Authorization (EUA), which by federal law cannot be coerced, variant strains of SARS-CoV-2 have been proliferating, and hospitalizations and deaths are increasing, not diminishing as one would expect in an effective vaccination campaign. Both vaccinated and unvaccinated persons are succumbing. Reports of post-injection death or long-term disability to the Vaccine Adverse Event Reporting System (VAERS) are reaching unprecedented levels.

Medical interventions are rarely completely safe or effective, and risks and benefits differ in individual patients and differing circumstances. Achieving a premature stamp of approval from the Food and Drug Administration (FDA)—premature because studies are not scheduled to be complete until the end of 2022—does not confer safety or effectiveness. FDA-approved products have frequently been withdrawn in the past.

The Joint Statement recognizes only a medical exemption, and omits mention of a religious exemption though many workers object to receiving these products based on their religious beliefs. Medical exemptions are virtually never recognized for the COVID vaccines, because there is improper denial that they cause harm to anyone. Long-term effects of these novel, genetically engineered products cannot possibly be known at this point. These could include autoimmune disorders, antibody-enhanced disease, infertility, cancer, or birth defects.

Employers are obligated to protect their workers from foreseeable hazards, even from risks as low or lower than 1 in 10,000, and to compensate them if they suffer an injury. They are not permitted to impose risks that may well be that significant, especially without compensation. Benefit to the public does not justify sacrificing workers who do not willingly accept the risk. Moreover, the benefit to the public in this instance is purely hypothetical. Uninfected persons cannot transmit infection just because they are unvaccinated. Vaccinated persons can still infect others. Many medical workers already have natural immunity, and mandated shots impose risks with little or no benefit, yet there is no provision to exempt them.

AAPS favors insistence on fully informed, truly voluntary consent for all medical interventions. This includes full disclosure of all risks, and a diligent effort to identify and track risks. Otherwise, workers are being conscripted into a mass experiment, one which would not be approved by an Institutional Review Board on both ethical and scientific grounds: no consent; no disclosure of the experimenters’ conflicts of interest; no control group; no follow-up of subjects for COVID status, immune parameters, or adverse effects; no provision for medical care of the subjects; and no criteria for stopping the experiment if subjects are being harmed.

Instead of depending solely on experimental vaccines, medical institutions should be leading the way in innovative infection control such as ventilation and air purification; exemplary housekeeping to protect against all pathogens, including antibiotic-resistant bacteria;

prophylactic and proactive early treatment, which is generally not being provided today; and immune system support including adequate vitamin D. Our medical organizations should be advocating for free and open discussion, and opposing censorship by governmental agencies, media, Big Tech, and corporate health care.

Without freedom, there is no safety for either workers or our patients. Liberty has overcome every crisis in the past, and if given a chance it would overcome this one, too.

Main Sources

Association of American Physicians and Surgeons

<https://aapsonline.org/aaps-supports-the-right-to-decline-covid-19-vaccine/>

Joint Statement in Support of COVID-19 Vaccine Mandates for All Workers in Health and Long-Term Care

7/26/21

Due to the recent COVID-19 surge and the availability of safe and effective vaccines, our health care organizations and societies advocate that all health care and long-term care employers require their workers to receive the COVID-19 vaccine. This is the logical fulfillment of the ethical commitment of all health care workers to put patients as well as residents of long-term care facilities first and take all steps necessary to ensure their health and well-being.

Because of highly contagious variants, including the Delta variant, and significant numbers of unvaccinated people, COVID-19 cases, hospitalizations and deaths are once again rising throughout the United States. Vaccination is the primary way to put the pandemic behind us and avoid the return of stringent public health measures.

Unfortunately, many health care and long-term care personnel remain unvaccinated. As we move towards full FDA approval of the currently available vaccines, all health care workers should get vaccinated for their own health, and to protect their colleagues, families, residents of long-term care facilities and patients. This is especially necessary to protect those who are vulnerable, including unvaccinated children and the immunocompromised. Indeed, this is why many health care and long-term care organizations already require vaccinations for influenza, hepatitis B, and pertussis.

We call for all health care and long-term care employers to require their employees to be vaccinated against COVID-19.

We stand with the growing number of experts and institutions that support the requirement for universal vaccination of health workers. While we recognize some workers cannot be vaccinated because of identified medical reasons and should be exempted from a mandate, they constitute a small minority of all workers. Employers should consider any applicable state laws on a case-by-case basis.

Existing COVID-19 vaccine mandates have proven effective. Simultaneously, we recognize the historical mistrust of health care institutions, including among many in our own health care workforce. We must continue to address workers' concerns, engage with marginalized populations, and work with trusted messengers to improve vaccine acceptance.

As the health care community leads the way in requiring vaccines for our employees, we hope all other employers across the country will follow our lead and implement effective policies to encourage vaccination. The health and safety of U.S. workers, families, communities, and the nation depends on it.

SIGNATORIES

(Listed Alphabetically)

*Academy of Managed Care Pharmacy (AMCP)
American Academy of Ambulatory Care Nursing (AAACN)
American Academy of Child and Adolescent Psychiatry (AACAP)
American Academy of Family Physicians (AAFP)
American Academy of Nursing (AAN)
American Academy of Ophthalmology (AAO)
American Academy of PAs (AAPA)
American Academy of Pediatrics (AAP)
American Association of Allergy, Asthma & Immunology (AAAAI)
American Association of Clinical Endocrinology (AACE)
American Association of Colleges of Pharmacy (AACCP)
American Association of Neuroscience Nurses (AANN)
American College of Clinical Pharmacy (ACCP)
American College of Physicians (ACP)
American College of Preventive Medicine (ACPM)
American College of Surgeons (ACS)
American Epilepsy Society (AES)
American Medical Association (AMA)
American Nurses Association (ANA)
American Pharmacists Association (APhA)
American Psychiatric Association (APA)
American Public Health Association (APHA)
American Society for Clinical Pathology (ASCP)
American Society for Radiation Oncology (ASTRO)
American Society of Health-System Pharmacists (ASHP)
American Society of Hematology (ASH)
American Society of Nephrology (ASN)
American Thoracic Society (ATS)
Association for Clinical Oncology (ASCO)
Association for Professionals in Infection Control and Epidemiology (APIC)
Association of Academic Health Centers (AAHC)
Association of American Medical Colleges (AAMC)
Association of Rehabilitation Nurses (ARN)
Council of Medical Specialty Societies (CMSS)
HIV Medicine Association
Infectious Diseases Society of America (IDSA)
LeadingAge
National Association of Indian Nurses of America (NAINA)
National Association of Pediatric Nurse Practitioners (NAPNAP)
National Council of State Boards of Nursing (NCSBN)
National Hispanic Medical Association (NHMA)
National League for Nursing (NLN)
National Medical Association (NMA)*

National Pharmaceutical Association (NPhA)
Nurses Who Vaccinate (NWV)
Organization for Associate Degree Nursing (OADN)
Pediatric Infectious Diseases Society (PIDS)
Philippine Nurses Association of America, Inc (PNAA)
Society of Gynecologic Oncology (SGO)
Society for Healthcare Epidemiology of America (SHEA)
Society of Hospital Medicine (SHM)
Society of Infectious Diseases Pharmacists (SIDP)
Society of Interventional Radiology (SIR)
Texas Nurses Association (TNA)
The John A. Hartford Foundation
Transcultural Nursing Society (TCNS)
Virgin Islands State Nurses Association (VISNA)
Wound, Ostomy, and Continence Nurses Society (WOCN)

Main Source

<https://leadingage.org/sites/default/files/Joint%20Statement%20on%20Vaccine%20Mandates.pdf>

Links to listen to and view podcasts and columns written AAPS Colleagues:

Elizabeth Lee Vliet, MD:

<https://americaoutloud.com/author/dr-elizabeth-lee-vliet/>

Peter McCullough, MD, MPH:

<https://americaoutloud.com/author/dr-peter-mccullough/>

Steve LaTulippe, MD:

<https://americaoutloud.com/author/dr-steve-latulippe/>

Note: Dr. McCullough and Dr. Vliet have just released a free updated pdf Guide to COVID Early Treatment available for download at:

<https://www.truthforhealth.org/patientguide/patient-treatment-guide/>

Mailing Address

AAPS
1601 N Tucson Blvd
Suite 9
Tucson, AZ 85716

AAPS: aaps@aapsonline.org

7/28/2021

Video: Bill Gates Claims He Talked Trump Out of Investigating Vaccines

<https://rumble.com/vkbidn-bill-gates-claims-he-talked-trump-out-of-investigating-vaccines.html?mref=lzerp&mc=3ifeq>

Video: EXPOSED - The Persecution of Canadian Physicians by Organized Medicine During the Plandemic

<https://www.bitchute.com/video/WI6ecKhoN49J/?list=notifications&randomize=false>

Article: University Fires Surgeon Who Voiced Safety Concerns About COVID Vaccines for Kids

<https://childrenshealthdefense.org/defender/university-fires-dr-francis-christian-covid-vaccines-kids/>

Audio: Recording of Christian's Termination Meeting

https://www.dropbox.com/s/5rv1galfv8npa3g/2021-06-23_08-26-55.wav?dl=0