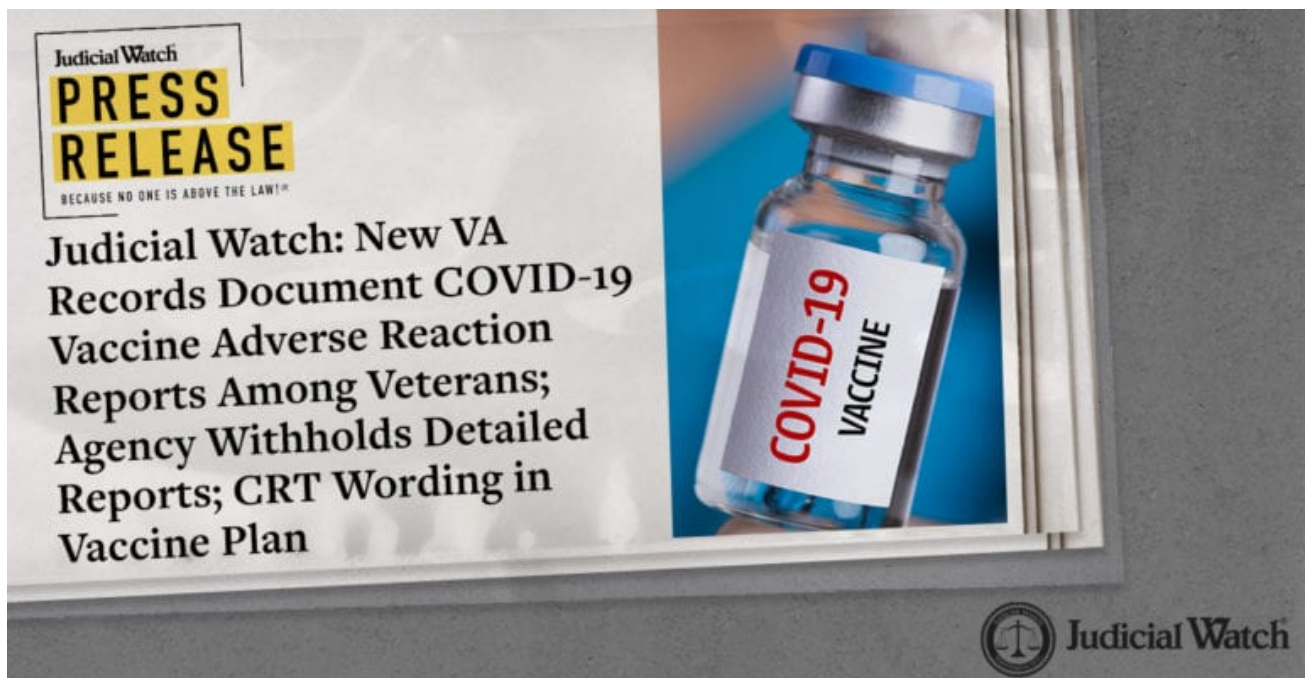


JULY 14, 2021 | JUDICIAL WATCH

Judicial Watch: New VA Records Document COVID-19 Vaccine Adverse Reaction Reports among Veterans; Agency Withholds Detailed Reports; CRT Wording in Vaccine Plan



(Washington, DC) Judicial Watch announced today that it received **75 pages** of records from the Department of Veterans Affairs detailing the adverse reactions veterans had to the COVID-19 vaccines. As of April 2021, Veteran's Health

Services reported 895 serious reactions which included: 20 cardiac arrests, 36 strokes, 15 cases of deep vein thrombosis, 10 heart attacks, and 19 pulmonary embolisms. They also reported over 26,000 less serious reactions. The agency **withheld** individual report details, citing alleged privacy and related issues.

Additionally, the documents included **a section** focused entirely on race titled “Addressing health inequities.”

The documents were obtained through a Freedom of Information Act (FOIA) request on April 14, 2021, for:

- All reports related to any adverse reaction to any COVID-19 vaccine administered at any Department of Veterans Affairs medical facility. This request includes, but is not limited to, any such reports transmitted to the Vaccine Adverse Events Reporting System (VAERS).
- All policies, regulations, or other guidance documents regarding the reporting and/or tracking of adverse reactions to COVID-19 vaccines.

A document titled “Vaccine Adverse Event Reporting” includes multiple charts documenting what the VA describes as serious and non-serious reactions to the COVID-19 vaccine. There have been 895 reports of serious events. These events include “Events where Death, hospitalization, and/or Life-Threatening Event is marked as an outcome.” There were 24,585 non-serious events. **Charts detail:**

- A total of 20 cardiac arrests, 36 strokes, 15 cases of deep vein thrombosis, 10 heart attacks, and 19 pulmonary embolisms were reported for employees and veterans who took one of the three vaccines.
- Johnson & Johnson vaccine adverse event reports include five cerebrovascular accidents, four cases of deep vein thrombosis and three pulmonary embolisms for veteran patients.
- Moderna vaccine adverse event reports include 15 cardiac arrests, 16 cerebrovascular accidents, five cases of deep vein thrombosis, five myocardial infarctions and seven pulmonary embolisms for veteran patients. Employees who took the vaccine reportedly suffered five cerebrovascular accidents, four

cases of deep vein thrombosis, two myocardial infarctions and two pulmonary embolisms.

- Pfizer vaccine adverse event reports include five cardiac arrests, 10 cerebrovascular accidents, one case of deep vein thrombosis, three myocardial infarctions and seven pulmonary embolisms for veteran patients. There was one case of deep vein thrombosis in an employee.

A **section** titled “Addressing health inequities” reports that the COVID vaccine allocation was prioritized to persons of color, in part, because of “social injustices:”

National U.S. data show that COVID-19 has disproportionately affected persons of color ... This is attributed to social injustices that create a higher disease burden and shorter lifespan in this population ... attributed this partly to the concept of “weathering,” that lifelong exposure to the stresses of racial disparity and injustice manifests in greater physical and psychological disease burden and less ready access to quality health care and health-related resources. In addition, persons of color are more likely to work and live in settings with higher exposure to SARS-CoV-2. That is, merely being Black or Hispanic or Native American does not cause one to more easily contract SARS-CoV-2. Rather, the lifetime social disadvantages experienced by persons of color make them more likely to have health problems that predispose them to contract SARS-CoV-2 and more often suffer serious or fatal outcomes. Thus, these individuals, along with others who are at risk for suffering serious or fatal illness due to the presence of comorbidities, will be prioritized for COVID-19 vaccine per the allocation plan as a consequence of risk factors.

The VA in a letter to Judicial Watch **notes** that “all COVID-19 vaccine reactions are reported to the Food and Drug Administration (FDA) and the Center for Disease Control (CDC) via their FDA/CDC VAERS database. PBM advised that VAERS Data is available publicly on the Health and Human Services website at: **VAERS – Data (hhs.gov)**.

“Despite the censorship and suppression by the Biden administration and Big Tech, the American people benefit from more, not less, information about the safety and efficacy of the COVID-19 vaccines,” said Judicial Watch President Tom Fitton. “These new documents show that politics and a pernicious Critical Race Theory

approach infects VA decision-making on the allocation of health resources to veterans.”

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