

My name is Tracey Hunt and I am a Registered Nurse that was terminated from my position with Queensland Health, for not complying with the Covid 19 vaccine mandate. This was after having my medical exemption from my Doctor denied and enduring a lengthy 14 month disciplinary process, causing me much stress and anxiety.

I demand a proper Royal Commission for a full and in-depth investigation into every aspect of the handling of the pandemic, including, but not limited to :

- 1) Corrupt vaccine procurement, secret contracts and coercive behaviour by the drug companies
- 2) Vaccine mandates and informed consent
- 3) Mask mandates
- 4) Media censorship and associated fear mongering
- 5) Misinformation and lies in the media regarding the ability of vaccines to block transmission
- 6) Over-reach of Australia's law enforcement agencies
- 7) Banning of cheaper off-label effective and safe drug treatments, such as Ivermectin and Hydrochloroquin, just when Australia needed them
- 8) Regulators roles in eroding the doctor-patient relationship and professionals ability to practise according to the Hippocratic oath
- 9) Lack of concern for Australians by the Government/regulators when data signals started to emerge that the vaccines were not safe, nor effective
- 10) Vaccine injuries and the appalling treatment and gaslighting of the vaccine injured by the medical profession
- 11) Silencing of doctors, nurses and experts such as former drug company employees, who were aware that something was seriously wrong with the experimental products
- 12) The role of AHPRA and ATAGI in censorship and oppression of doctors, nurses and other health professionals, dealing with the sick and the injured

#### Early Research into COVID-19 Vaccine Raised Concerns

In research regarding COVID-19 vaccination I determined from the Swiss government health site that there was at least a short-term negative impact of the COVID-19 vaccine on one's immune system. For those with underlying immune related conditions (either past or present) this was concerning, especially when there are some well-known ways of supporting the immune system. These concerns were ignored and not addressed in the Australian response. Anecdotally these concerns are now being confirmed, with some suggestion as to the way the vaccine may be associated with the immune response.

*N<sup>1</sup> -methylpseudouridylation of mRNA causes +1 ribosomal frame-shifting*

<https://www.nature.com/articles/s41586-023-06800-3>

#### Ineffective Response (Masking)

An early mainstay of the health response involved utilisation of personal protective equipment in workplaces and utilisation of masking throughout society. Masking is ineffective for any aerosol transmissible disease. Aerosols stay suspended for days to weeks (vs minutes for droplets), readily pass through gaps around the masks, and can reach deep into the lungs.

*Particle sizes of infectious aerosols: implications for infection control*

<https://pubmed.ncbi.nlm.nih.gov/32717211/>

## Workforce Issues, treatment of employees and equity

We are still hearing reports of workforce shortages in medical areas. Yet despite the dropping of mandates, employees who did not receive the vaccine are still not being re-employed. Instead, up until the day prior to mandates being relinquished, these employees were subject to disciplinary action and dismissal from the workplace – all for refusing a vaccine that has been shown to be ineffective, unsafe and that currently negatively impacts the immune system and is associated with more adverse events than all other vaccines combined.

*‘Spikeopathy’: COVID-19 Spike Protein Is Pathogenic, from Both Virus and Vaccine mRNA*  
<https://pubmed.ncbi.nlm.nih.gov/37626783/>

## Informed Consent and Mandates

Informed consent requires explanation of the risks and benefits of a procedure, risks and benefits of alternative options, risks and benefits of not having the procedure, and must be voluntary, (i.e. free from manipulation by or undue influence from family, medical staff or other social coercive influences). With vaccine mandates this process was ignored; alternative treatments were not considered and anyone whose employment was threatened with subsequent inability to provide for their family was unable to give voluntary consent – they were effectively threatened by the mandates.

[https://www.health.qld.gov.au/\\_data/assets/pdf\\_file/0023/151088/informedconsent.pdf](https://www.health.qld.gov.au/_data/assets/pdf_file/0023/151088/informedconsent.pdf)

<https://www.health.gov.au/news/australian-health-protection-principal-committee-ahppc-statement-on-mandatory-vaccination-of-all-workers-in-health-care-settings>

Going forward, it is imperative that :

- a) all citizens and employees are free to refuse consent to a medical procedure without redress or penalty
- b) that health professionals who have concerns are free to express their concerns and raise alarms – if those who saw birth defects due to thalidomide were unable to raise the alarm how much longer would it have taken to identify and prevent this issue from continuing
- c) medicine is able to practice freely – we are all different individuals, and one treatment does not suit everyone; without the ability to try different ways of managing a condition the best treatment is not found
- d) the doctor patient relationship needs to be restored – medicine should be a dialogue between doctor and patient with the freedom to express all benefits AND disadvantages of a treatment otherwise trust in medicine will never return.

Please do not underestimate the importance of the Australian Government’s Covid pandemic response by treating it without the rigour of a proper Royal Commission, with the broadest set of parameters possible and the authority of the law to back up conclusions. This subject warrants Australia’s highest form of inquiry.