

Julie Threet Chico, CA 95928

To: California State Board of Pharmacy

February 6, 2025

RE: PUBLIC COMMENT

Dear Board,

I am appearing for you today to provide public comment for the EIGHTH time:

November 2023, December 2023, April 2024, July 2024, November 2024, December 2024, January 2025 and today.

At every meeting, I provided public comment about the dangers of the COVID19 Vaccine, and asked for an agenda item at a future meeting to discuss halting this dangerous pharmaceutical product in California pharmacies, and for ALERTING THE PUBLIC TO THE NUMBER OF VAERS REPORTS BEING FILED FROM A CALIFORNIA PHARMACY.

On February 3, 2025 I did receive a letter from Anne Sodergren, your Executive Officer and for that I want to thank her for taking the time to respond to my concerns. It was not clear if the Board members were copied on this correspondence so attached is a copy. Here are the headlines:

1) "The Board does not intend to schedule a public discussion at this time"

This means the Board will continue to promote these proven harmful "vaccines" as "safe and effective" thereby continuing to deceive the public. This is certainly disappointing, especially as Ms. Sodergren quoted your Business and Professions Code section 4001.1: "protection of the public shall be the Board's highest priority, and whenever protection of the public is inconsistent with other interests sought to be promoted, protection of the public shall be paramount".

Since I am not promoting anything, as I am not making money by pursuing protection of the public, while continuing to promote these dangerous products only protects the profits of the pharmaceutical manufacturers and legal protection for those responsible for injecting said product, the Board appears to be in violation of said Business and Professions Code section 4001.1.

2) "Some of your comments appear to voice concerns about the safety of vaccines, it may be appropriate for you to reach out directly to the FDA or ACIP"

First, I hope there is no confusion about my concerns! There should be no "appearance" about my concerns. YOU ALL SHOULD BE CRYSTAL CLEAR ABOUT MY POSITION – THE COVID VACCINE IS NOT SAFE, AND MUST BE HALTED IMMEDIATELY. And YES, I do submit comments to the FDA and ACIP. I sent comments directly to Rochelle Walensky Director of the CDC when my Mom died.

I have traveled to 13 Counties in California to speak out to their Boards of Supervisors and spoken before my own Board more than 40 times. I have gone on more than 15 podcasts to communicate my knowledge and personal injury story. I have traveled more than 4,200 miles by car and flown to Houston, Texas to attend a hospital homicide conference as a SPONSOR (put on by the Former Feds Freedom Foundation). I have traveled to Sacramento to meet with my State Assemblyman James Gallagher and sat down with the Chief of Staff for my Congressman Doug LaMalfa. I have gone to dozens of school board meetings at Chico Unified and dozens of Chico City Council meetings to alert the public about the dangers of this product. SO I DON'T WANT YOU MISUNDERSTANDING MY INTENT – I don't want my comments to "appear" to be concerned but I want there being ZERO DOUBT in your mind that I will NEVER STOP UNTIL THESE ARE PULLED OFF THE MARKET.

3) "While evaluating data from VAERS... no cause-and-effect relationship has been established... the report of an adverse event to VAERS is NOT documentation that a vaccine caused the event"

THIS IS LIKE TELLING A RAPE VICTIM THAT THEY WERE NOT RAPED IT WAS THEIR OWN ACTIONS THAT CAUSED THE ASSAULT. I filed a VAERS Report for my own injuries and my Mom's for her death. THERE WERE NO OTHER VALID REASONS FOR OUR MEDICAL PROBLEMS. And for the record, DOCTORS DO NOT WANT TO BLAME THE VACCINE BECAUSE THAT CAUSES WORK FOR THEM OR PUTS THEIR LICENSE IN DANGER. And there is NO DEATH CERTIFICATE CODE FOR VACCINE DEATH LIKE WAS CREATED FOR COVID19 VIRUS DEATH. The fact of the matter is no one is reviewing these reports. I put the coroner and Wyoming State Pathologist contact information in the report for the my Mom's death. NO ONE CALLED FROM THE CDC OR VAERS. THE FDA IS FUNDED BY PHARMA.

I do not think anyone on this Board has actually read a VAERS Report. Attached are 31 of the 26,647 Reports filed by a California Pharmacy. These are recent reports filed for CHILDREN. I ask you this. WHO IS REVIEWING THESE AND DO YOU FEEL THE CHILDREN INJURED OR THE PHARMACY RESPONSIBLE IS BEING ADEQUATELY REVIEWED BY THE CDC? Are you comfortable washing your hands of these reports because it's "not proof of causation when no one is checking for causation"? AGAIN, NO ONE CALLED ME ON MY INJURIES OR MY MOM'S TO VALIDATE OR INVALIDATE THE CLAIMS. And, it is a

FEDERAL PENALTY TO FILE A FALSE REPORT.

4) "Information reported into VAERS does not contain sufficient information for the Board to conduct an investigation if violations of Pharmacy law occurred"

THIS IS A LIE. The VAERS Report contains the name, location and contact information for the victim. It contains the name, address and location of the pharmacy and any other medical professional involved. YOU HAVE ACCESS TO THIS INFORMATION. THIS IS A COP-OUT AND IF, AFTER READING THE 31 REPORTS YOU ARE COMPELLED TO READ MORE, AGAIN, I AM AVAILABLE TO TRAIN YOUR STAFF IN MEDALERTS.ORG. Or, ask your staff to go take the expert class in the system and run reports pro-actively for you.

YOU COULD ALSO IMPLEMENT A POLICY WHEREBY ANY CALIFORNIA PHARMACY THAT FILES A VAERS REPORT IS REQUIRED TO SUBMIT A FULL COPY TO THE BOARD. This is NOT rocket science. Step up.

THANK YOU FOR YOUR ATTENTION TO THIS CRITICAL ISSUE. I am just a mom, grandmother and concerned American. We must all work together to get these dangerous vials locked up and stopped immediately.

Sincerely,

Julie Threet

Email: julie4butte5@gmail.com

Twitter/X: @julie4butte5

Rumble Channel: Prayinghawk144

Lead Investigator VAERSAware.com: https://www.vaersaware.com/findmyreportrequest

Expert Researcher medalerts.org: https://medalerts.org/index.php

Retired 25-yr HR Executive in Silicon Valley

Former Patient Ambassador and Volunteer Services Board Member at Enloe Health in Chico

Former Nurse Helper at Butte County Public Health Department COVID-19 Vaccine Clinics

Currently disabled from two shots of COVID-19 Moderna vaccine (microangiopathy, tinnitus, detached retinas); Mom killed by four shots of COVID-19 Moderna vaccine (sudden cardiac event)

Education includes BS Business Management, University of Wyoming; Medical Terminology & Billing courses, Butte Community College

MY PERSON PUBLISHED VAERS INJURY REPORT:

https://medalerts.org/vaersdb/findfield.php?IDNUMBER=2302355

MOM'S PUBLISHED VAERS VICTIM STATEMENT:

https://medalerts.org/vaersdb/findfield.php?IDNUMBER=2431153

VIDEO RECORDING OF MY ENTERING MOM'S VAERS FATALITY REPORT:

https://www.bitchute.com/video/aQts1KLE5VZJ/

PUBLISHED RESEARCH:

1) "Are COVID-19 Vaccines in Pregnancy as Safe and Effective as the U.S. Government, Medical Organizations, and Pharmaceutical Industry Claim? Part I and II":

Co-author on this research study proving this COVID vaccine is dangerous for pregnant women and causing fetal demise, miscarriages and infertility. The main author is Dr. James Thorp and the other co-authors are Dr. Peter McCullough, Dr. Kim Biss, and Albert Benavides, Maggie Thorp and Daniel McDyer.

https://www.preprints.org/manuscript/202406.2062/v1 https://www.preprints.org/manuscript/202407.0069/v1

PUBLIC APPEARANCES/INTERVIEWS:

1) AGENDA 21 RADIO WITH PAUL PRESTON OF NEW CALIFORNIA STATE (1/23/25):

https://rumble.com/v6coz3g-threet-and-owens-agenda-21-radio-with-paul-preston-12325.html

2) CHILDREN'S HEALTH DEFENSE LIVE "FOLLOW THE SCIENCE SHOW" (10/9/24):

https://live.childrenshealthdefense.org/chd-tv/shows/good-morning-chd/follow-the-science/?utm_source=simpletexting&utm_medium=sms&utm_campaign=chdtvtxt&utm_id=20241009

3) VINNDOG RADIO (10/3/24):

https://rumble.com/v5haty5-jab-injured-4-life-wvinndoggradio-and-julie-threet.html

4) THE BASSLINE WITH JEREMIAH HOSEA (9/13/24):

https://thebassline.podbean.com/e/the-baseline-episode-57/

5) FREEDOM FIRST TEXAS (8/31/24):

https://www.youtube.com/live/O6yHfOX95zk?feature=shared

6) INTENTIONAL WITH MIC MEOW (7/3/24):

https://rumble.com/v5580cv-intentional-episode-239-vaers-with-julie-threet.html

7) IN THE NEWS WITH MIKE DAKKAK (7/9/24):

https://itnshow.com/2024/07/09/julie-threet-on-her-family-being-upended-by-the-covid-vaccines/

8) ACTION NEWS NOW IN CHICO (2/14/24):

https://www.actionnewsnow.com/video/butte-county-district-5-supervisor-candidate-julie-threet/video 41eb87fc-6477-5e16-a116-501213c1e057.html

9) KRCR NEWS CHANNEL 7 (2/20/24):

https://youtu.be/aAFTzXuAJNQ?feature=shared

10) PATRIOT'S PRAYER (1/13/24):

https://rumble.com/v46sz5u-episode-120-interview-with-julie-threet.html

11) THE KARIS PROJECT (5/19/23):

https://rumble.com/v2ormqy-julie-threet-vaxx-injuries-concealed-by-the-state.html

12) WEAPONIZED NEWS (3/24/23):

https://weaponizednews.com/state-news/america-the-collapsing-empire-california-report-with-praying-hawk-jbs-jeff-mora/

13) WEAPONIZED NEWS (12/6/22):

https://weaponizednews.substack.com/p/vaccine-injured-speak-out?sd=pf

14) REINETTE SENUM FOGHORN EXPRESS (9/2/22):

https://reinettesenumsfoghornexpress.substack.com/p/health-care-worker-vows-justice-for#playnn

15) RESEARCHER PODCAST IN JAMAICA (5/15/22):

https://open.spotify.com/episode/7pt6m0qa6TdGj5fdE5WB8A

DOCTORS/RESEARCHERS/POLITICIANS - MY CONTACTS:

Dr. James Thorp, MD: Board-certified OB/GYN in Florida with 45 years of OB experience specializing in high-risk Maternal & Fetal Medicine; author of "Sacrifice: How the Deadliest Vaccine in History Targeted the Most Vulnerable", "The COVID-19 Vaccines & Beyond — What the Medical Industrial Complex is NOT Telling Us"; extensively published with 245 scientific papers including 50 on COVID; recently joined The Wellness Company as Chief of Maternal and Paternal Medicine.

Dr. Kimberly Biss, MD: Board-certified OB/GYN in Florida; served on Board of Trustees, Physician's Technology Council and Chairman of the OB/GYN Department at Bayfront Health Hospital; noticing immediate complications among her patients after COVID vaccine rollout she began speaking out against the shot for pregnant women; Dr Biss was invited to Washington DC in November 2023 to present her practice data to a congressional panel; her testimony was given alongside Dr Robert Malone and Attorney Tom Renz; her miscarriage data has been published and she recently joined FLCCC Alliance as a Senior Fellow.

Dr. Renata (Reni) Moon, MD, FCP: Board-certified in General Pediatrics and Pediatric Hospital Medicine with 25 years in Washington; Clinical Associate Professor of Medicine; recently joined FLCCC Alliance as Senior Fellow in Pediatrics; after testifying to Senator Ron Johnson's COVID-19 vaccine roundtable in December 2022 Washington State University terminated her employment.

Albert Benavidez: Creator of VAERSAware.com; Chico State Graduate; Medical biller located in Silicon Valley; author of Welcome the Eagle Substack reporting on variances and issues with CDC's VAERS System

Alix Mayer, MBA: Chairman & Co-Founder Free Now Foundation a medical freedom non-profit advocating for parental rights over healthcare decisions; Former President Children's Health Defense; former executive at Apple running worldwide research group; Hep B Vaccine Injury Survivor speaking out on medical freedom circuit

Brianna Dressen: Co-chairman & co-founder REACT19 a science-based non-profit offering financial, physical and emotional support for those suffering from long-term COVID-19 vaccine

adverse events globally; Bri was vaccine injured during Astra Zeneca COVID-19 vaccine trial and has several lawsuits pending.

Stanford Graham: Attorney fighting COVID crimes from mask mandates to criminal charges against Dr. Fauci and Dr Ralph Baric; Executive Director of Senacor International and Producer of Cardio Miracle.

Dr. Judy Mikovitz, PhD: Former biochemistry research scientist fighting medical freedom and truth in research. 40 yr quest to understand the causes, prevention and treatment of chronic diseases; co-author of numerous papers in immunology, natural products chemistry, epigenetics and HIV/AID's drug development; NY Times best-selling author of several books ("Plague", "Plague of Corruption", "Ending Plague", and "Truth about Masks"; creator of therealdriudy.com.

Dr. Henry Ealy, ND: Founder & Executive Community Director Energetic Health Institute a school teaching about the power of Natural Medicine; supports people recovering from vaccine injuries, chemical pollution and other genetic bioweapons; Executive Producer "Healing for the AGES"; leading COVID Grand Jury Initiative to pursue justice for all Americans harmed by the vaccine; lead and co-author of several manuscripts and peer-reviewed position papers.

Dr. Holly Groh: Ophthalmologist in Lousiana and public health activist; led a successful effort to pass state legislation that created medical oversight for students using digital devices; researching the adverse effects of the COVID19 vaccine on eyes.

Jennifer Kennedy: Attorney in Los Angeles leading several landmark cases regarding COVID19 vaccine mandates.

Dr. John Witcher: Emergency Room physician in Mississippi fired for treating COVID19 patients with Ivermectin (and removing them from deadly Remdesivir); former candidate for Governor of Mississippi.

Dr. Ben Marble: Emergency Room physician in Florida and founder of myfreedoctor.com a free telehealth service committed to providing ivermectin to all patients.

Laura Demaray, RN, BA, CWON: "Restoring Hope for the Injured" podcast; advocate for civil liberties and recent organizer of presentations before Idaho Southwest Health District that stopped funding COVID19 vaccines; organizer of agenda item presentation before Franklin County Commissioners in Washington who oppose the COVID19 vaccine (resolution pending).

Dr. Mitch Holland: Executive Director Vitality Health; 30 years in medical/legal industry assisting injury victims



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Department of Consumer Affairs Gavin Newsom, Governor

Business, Consumer Services and Housing Agency

February 3, 2025

Julie Threet

Email: julie4butte5@gmail.com

Dear Julie Threet,

This is in response to your recent letter to the California State Board of Pharmacy (Board) and public comments provided during a number of public Board meetings suggesting the dangers of the COVID19 Vaccine and your request for a future agenda item to "discuss halting this dangerous pharmaceutical product in California pharmacies." The Board does not intend to schedule a public discussion at this time; however, the Board would like to provide information that may be helpful.

The Board is a consumer protection agency. As set forth in Business and Professions Code section 4001.1, protection of the public shall be the Board's highest priority, and whenever protection of the public is inconsistent with other interests sought to be promoted, protection of the public shall be paramount.

While Pharmacy Law and its regulations generally establish the authority for pharmacists to administer vaccines¹, the vaccine approval process is not within the Board's jurisdiction. The federal Food and Drug Administration (FDA) is responsible for approving vaccines for public use as established in federal law. Further, the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) is the federal advisory committee that develops recommendations on the use of vaccines in the United States. As some of your comments appear to voice concerns about the safety of vaccines, it may be appropriate for you to reach out directly to the FDA or ACIP.

Further, in your letter you highlight problems with vaccine administration, including administration of a vaccine to a patient inappropriately – i.e., the wrong vaccine was administered, the wrong patient received a vaccine, incorrect dosing, etc. Investigation into such allegations does generally fall within the Board's jurisdiction if the activities occur within a Board-licensed facility or are performed by a Board licensee. Data indicates that since March 8, 2022 the Board substantiated violations of Business and Professions Code Section 4052.8 that resulted in the issuance of 70 citations and 18 letters of admonishment.

The Board is aware of the VAERS reporting system and notes information stated on the VAERS website:

"When evaluating data from VAERS, it is important to note that for any reported event, no cause-and-effect relationship has been established. Reports of all possible

¹ See Business and Professions Code section 4052.8; see also California Code of Regulations, title 16, section 1746.4.

associations between vaccines and adverse events (possible side effects) are filed in VAERS. Therefore, VAERS collects data on any adverse event following vaccination, be it coincidental or truly caused by a vaccine. The report of an adverse event to VAERS is not documentation that a vaccine caused the event."

It is also important to note that information reported into VAERS does not contain sufficient information for the Board to conduct an investigation to determine if violations of Pharmacy Law occurred.

Information on filing a complaint with the Board is on the Board's website, available here. A person can file a complaint with the Board for a variety of reasons, including prescription errors (which would include an error with vaccine administration). In order to investigate a complaint, the Board requires specific information, including the name of the licensee (business or individual), address, and a brief description. If the complaint is within the Board's jurisdiction, an investigator will be assigned and will contact the complainant to request additional information, including any supporting documents or other evidence. Additional information on the complaint process is available here.

Sincerely,

Anne Sodergren Executive Officer California State Board of Pharmacy Search Results

From the 12/27/2024 release of VAERS data:

Found 1 cases where Age is under-18 and Location is California and Patient Died and Administered-by is **Pharmacy**

Government Disclaimer on use of this data

Table

| V | Λ Ψ | | |
|------------|-------|---------|--|
| Age | Count | Percent | |
| < 6 Months | 1 | 100% | |
| TOTAL | 1 | 100% | |

Case Details (Reverse Sorted by Vaccination Date)

VAERS ID: <u>823271</u> (history)

Vaccinated

2019-07-01

Form:

Version 2.0

Onset:

2019-07-02

Age:

0.08

Days after vaccination: 1

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2019-07-12

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|-------------|--------------|
| HEP: HEP B (ENGERIX-B) / GLAXOSMITHKLINE BIOLOGICALS | 4RB3J / UNK | -/- |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Death, Decreased appetite

SMQs:

Life Threatening? No

Birth Defect? No Died? Yes

Date died: 2019-07-02 Days after onset: 0 Permanent Disability? No

ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? No
Previous Vaccinations:
Other Medications:
Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type: USGLAXOSMITHKLINEUS201912

Write-up: Death / Death NOS; Had not eaten; This case was reported by a physician via call center representative and described the occurrence of unknown cause of death in a 6-week-old female patient who received HBV (Engerix B) (batch number 4RB3J, expiry date unknown) for prophylaxis. On 1st July 2019, the patient received Engerix B. On 2nd July 2019, 1 days after receiving Engerix B, the patient experienced unknown cause of death (serious criteria death and GSK medically significant) and appetite absent. On 2nd July 2019, th outcome of the unknown cause of death was fatal and the outcome of the appetite absent was recovered/resolved. The patient died on 2nd July 2019. The reported cause of death was unknown cause of death. The reporter considered the unknown cause of death to be related to Engerix B. It was unknown if the reporter considered the appetite absent to be related to Engerix B. Additional details were provided as follows: The patient was not known to have any pre-existing health conditions. The patient had not eaten since the morning of 2nd July 2019 (for 12 hours) and died on the way to the hospital. The patient"s parents believed that the patient"s death was due to the vaccine. But the physician stated that, the patient could had passed away du to other reasons, of which she did not provide. The reporter also stated that, two other patients received vaccines of the same lot and nothing had been reported. The physician would like to be followed up with as soon as possible so she would know what the next steps would be for investigation. No other details were provided.; Reported Cause(s) of Death: Unknown cause of death

New Search

Link To This Search Result:

https://medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=AGE&EVENTS=ON&ESORT=VAX-DATE&REVERSESORT=ON&V_ADMINBY=PHM&DIED=Yes&STATE=CA&WhichAge=range&LOWAGE=0&HIGHAGE=18

Copyright © 2025 National Vaccine Information Center. All rights reserved. 21525 Ridgetop Circle, Suite 100, Sterling, VA 20166 Search Results

From the 12/27/2024 release of VAERS data:

Found 21 cases where Age is under-18 and Location is California and SOC Symptom is Product issues and Administered-by is 'Pharmacy'

Government Disclaimer on use of this data

Table

| V | \uparrow \downarrow | | |
|------------|-------------------------|---------|--|
| Age | Count | Percent | |
| 3-5 Years | 2 | 9.52% | |
| 6-17 Years | 19 | 90.48% | |
| TOTAL | 21 | 100% | |

Case Details (Reverse Sorted by Vaccination Date)

This is page 1 out of 3

Result pages: 1 2 3 next

VAERS ID: 2773342 (history)

Vaccinated:

2023-10-11

Version 2.0 Form:

Onset:

2023-10-11

7.0 Age:

Days after vaccination: 0

Sex: Male Submitted:

0000-00-00

Location: California

Entered:

2024-06-17

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|---|-------------|--------------|
| FLU4: INFLUENZA (SEASONAL) (AFLURIA QUADRIVALENT) / SEQIRUS, INC. | AU1070C / 1 | LA/IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Contusion, Injection site bruising, Injection site erythema, Injection site pain, Injection site swelling, Mondle iceria Pain in extremity

events (injections, infusions and impiants) (proad), Haemodynamic dedema, effusions and fluid overload narrow), Tendinopathies and ligament disorders (broad), Medication errors (broad)

.ife Threatening? No 3irth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? Yes

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Write-up: Site: Bruising at Injection Site-Severe, Site: Pain at Injection Site-Severe, Site: Redness at Injection Site Severe, Site: Swelling at Injection Site-Severe, Additional Details: Immunizer attempted to give flu shot to patien vas unsuccessful giving flu shot first time due to pressure needle did not allow to push vaccine in so immunize changed needles tried second time same result unsuccessful and could not administer. Mom states tried twice and after that did not want to do a third time and left. Mom states 7 year old son bruised and in pain. Please ollow up.

VAERS ID: 2514609 (history)

Vaccinated:

2022-11-22

Form:

Version 2.0

Onset:

2022-11-22 Days after vaccination: 0

Age: Sex:

13.0 Male

Submitted:

0000-00-00

Location: California

Entered:

2022-11-22

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|---|------------|--------------|
| COVID19-2: COVID19 (COVID19 (PFIZER-BIONTECH BIVALENT)) / PFIZER/BIONTECH | GL2042 / 4 | LA / IM |

Administered by: Pharmacy

Purchased by: ? Symptoms: Device connection issue, Product leakage, Underdose

SMQs:, Medication errors (broad)

.ife Threatening? No 3irth Defect? No

)ied? No

Permanent Disability? No

Recovered? Yes Office Visit? No

ER Visit? No

R or Doctor Visit? No

lospitalized? No

Previous Vaccinations:)ther Medications: N/A Surrent Illness: NO

Preexisting Conditions: NO

Allergies: NO

Diagnostic Lab Data: NONE

SOO O. P. T.

NEEDLE SEPARATED AND SOME CONTENTS OF THE VACCINE SPRAYED. THE NEEDLE STAYED ON THE PATIENT"S ARM WHILE NURSE HELD THE SYRINGE. NEEDLE WAS EXTRACTED OUT AND SAFETY WAS PLACED, PT"S FATHER WERE INFORMED THAT WE RECOMMEND A SECOND DOSE, FATHER STATED UNDERSTANDING AND STATES THEY WILL HAVE TO RETURN ANOTHER TIME.

VAERS ID: 2499884 (history)

Vaccinated:

2022-11-01

Form:

Version 2.0

Onset:

2022-11-01

Age:

11.0

Days after vaccination: 0

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2022-11-05

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|---|------------|--------------|
| COVID19-2: COVID19 (COVID19 (PFIZER-BIONTECH BIVALENT)) / PFIZER/BIONTECH | GK1657 / 3 | RA / SYR |
| | | |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Foreign body, Needle issue

SMQs:, Medication errors (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Write-up: Error: Foreign Body (Needle Tip) left in patient-

VAERS ID: 2511918 (history)

Vaccinated:

2022-09-24

Form:

Version 2.0

Onset:

2022-09-24

Age:

7.0

Male

Days after vaccination: 0 Submitted:

0000-00-00

Sex:

Location: California

Entered:

2022-11-18

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FL8095 / 1 | LA / IM |

Administered by: Pharmacy

Purchased by: ? Symptoms: Product barcode issue SMQs:, Medication errors (narrow)

Life Threatening? No Birth Defect? No

Died? No

Permanent Disability? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations: Other Medications: none Current Illness: none

Preexisting Conditions: none

Allergies: none

Diagnostic Lab Data: none

CDC Split Type:

Write-up: we gave the right vaccines and exp. date was correct but we scan the wrong QR code

VAERS ID: 2385012 (history)

Vaccinated:

2022-07-19

Form:

Version 2.0

Onset:

2022-07-19

Age:

6.0

Days after vaccination: 0

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2022-07-23

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FL8094 / 1 | LA/IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Syringe issue

SMQs:, Medication errors (broad)

Life Threatening? No Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No Office Visit? No.

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Write-up: Error: Leaking from Syringe-

VAERS ID: 2371910 (history)

Vaccinated:

2022-07-11

Form:

Version 2.0

Onset:

2022-07-11

Age: Sex:

7.0

Days after vaccination: 0 Submitted:

0000-00-00

Female Location: California

Entered:

2022-07-16

| Vaccination / Manufacturer | | Site / Route |
|--|----------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FL8095/2 | LA/IM |

Symptoms: Syringe issue

SMQs:, Medication errors (broad)

Life Threatening? No Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Write-up: Error: Leaking from Syringe-

VAERS ID: 2301877 (history)

Vaccinated:

2022-05-26

Form:

Version 2.0

Onset:

2022-05-26

Age:

5.0

Days after vaccination: 0

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2022-05-30

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FL8094 / 3 | LA / IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Needle issue

SMQs:, Medication errors (broad)

Life Threatening? No Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Write-up: Error: Patient Accidentally Stuck by Needle-

Form:

Version 2.0

Onset:

2022-02-26

Age:

16.0

Days after vaccination: 0

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2022-03-16

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FL3209 / 1 | LA/IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Poor quality product administered

3MQs:, Medication errors (broad)

.ife Threatening? No 3irth Defect? No

Died? No

Permanent Disability? No

lecovered? No)ffice Visit? No :R Visit? No

R or Doctor Visit? No

lospitalized? No

'revious Vaccinations:)ther Medications: None **:urrent Illness:** None

reexisting Conditions: None

Ilergies: None iagnostic Lab Data: DC Split Type:

/rite-up: Incident occurred from possible inviable dose administered to the patient. We tried to reach the

atient 3 times but no answer

'AERS ID: 2010883 (history)

Vaccinated:

2022-01-06

orm:

Version 2.0

Onset:

2022-01-06

ige:

5.0

Female

Days after vaccination: 0

ex:

0000-00-00

ocation: California

Entered:

Submitted:

2022-01-06

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|---|------------|--------------|
| OVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FK5127 / 1 | LA / IM |

dministered by: Pharmacy

Purchased by: ?

mptoms: Product administration error, Syringe issue, Underdosa

MQs:, Medication errors (narrow)

fe Threatening? No rth Defect? No

ed? No

ermanent Disability? No

ecovered? Yes fice Visit? No ₹ Visit? No

l or Doctor Visit? No

spitalized? No aulana Massiassisses Current Illness: None

Preexisting Conditions: None -

Allergies: None
Diagnostic Lab Data:

CDC Split Type:

Write-up: Vaccine administration error. Patient did not receive the full dose of Pediatric Pfizer Dose #1 because the syringe leaked. Reached out to Pfizer advice line and consulted CDC COVID-19 Vaccine Administration Errors Revaccination Guide (last updated 12/01/2021). Per advice line and revaccination guide, patient indicated to repeat full dose. Dose administered on the left arm.

VAERS ID: 1951819 (history)

Vaccinated:

2021-12-14

Form:

Version 2.0

Onset:

2021-12-14

Age:

16.0

Days after vaccination: 0

Sex:

Male

Submitted:

0000-00-00

Location: California

Entered:

2021-12-15

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|-------------|--------------|
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 058H21A / 3 | LA/- |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Product substitution issue

SMQs:

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:
Other Medications: NONE
Current Illness: NONE

Preexisting Conditions: NONE

Allergies: NONE

Diagnostic Lab Data: NONE

CDC Split Type:

Write-up: NURSE INSTRUCTED TO ADMINSTER PFIZER COVID 19 VACCINE. PARENT OF PATIENT LATER

REQUESTED TO ADMINSTER MODERNA

Result pages: 1 2 3 next

New Search

Link To This Search Result:

https://medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=AGE&EVENTS=ON&ESORT=VAX-DATE&REVERSESORT=ON&SYMLEVEL=SOC&SYMPTOMSSOC=Product+issues+%2810077536%29&V_ADMINBY=PHM&STATE=CA&WhichAge=range&LOWAGE=0&HIGHAGE=18

Search Results

From the 12/27/2024 release of VAERS data:

Found 54 cases where Age is under-18 and Location is California and Serious and Administered-by is Pharmacy'

Government Disclaimer on use of this data

Table

| 4 | 1 | | |
|-----------------------|-------|----------|--|
| Event Outcome | Count | Percent | |
| Death | 1 | 1.85% | |
| Life Threatening | 14 | 25.93% | |
| Permanent Disability | 12 | 22.22% | |
| Hospitalized | 42 | 77.78% | |
| Emergency Doctor/Room | 30 | 55.56% | |
| Office Visit | 22 | 40.74% | |
| Recovered | 16 | 29.63% | |
| TOTAL | † 137 | † 253.7% | |

[†] Because VAERS cases can have multiple vaccinations, symptoms, and event outcomes, a single case can account for multiple entries in this table. This is why the Total Count is greater than 54 (the number of cases found), and the Total Percent is greater than 100.

Case Details (Reverse Sorted by Vaccination Date)

This is page 1 out of 6

esult pages: 1 2 3 4 5 6 next

Form. Version 2.0

Onset:

2023-04-08

Age:

4.0

Days after vaccination: 1

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2023-04-13

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FX5095 / 1 | LA / SYR |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Anxiety, Chest X-ray normal, Decreased appetite, Dyspnoea, Insomnia, Irritability, Pain, Pyrexia, Vomiting

SMQs:, Anaphylactic reaction (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow). Hostility/aggression (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)

Life Threatening? Yes

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: Zarbees Elderberry Immune Support, syrup

Current Illness: none

Preexisting Conditions: Congenital heart disease, leak in mitral valve.

Allergies: pollens

Diagnostic Lab Data: Only chest x-ray was done in Emergency Room on April 8 which turned-out normal. No other tests were conducted, was advised to go to Hospital next time if child encountered difficulty breathing. **CDC Split Type:**

Write-up: Patient received the COVID-19 vaccine 1st dose on April 7, 2023. Following 19 hours, she manifested contraindications with the vaccine. She encountered difficulty breathing lasted 5 minutes which was the first time it was encountered by my child even prior and post open heart surgery. It is beyond normal. She threw-up 3 times, had fever and her sleep overnight only lasted like 4 hours. We went to Hospital ER to monitor her and report the shortness of breath. During ER stay, she also experienced severe pain reactions reactions described comparable with post surgery when pain reliever wore-off. She was given Tylenol for pain medications. Following day, it was also observed she was catching her breath again for few minutes. Other side effects for few days observed were fever, uneasiness, irritability, difficulty sleeping and loss of appetite.

VAERS ID: 2497249 (history)

Vaccinated:

2022-08-09

Version 2.0 Form:

Onset:

2022-08-10

Age:

1.5

Days after vaccination: 1

Sex: Male Location: California Submitted: Entered:

0000-00-00 2022-11-03

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FT9142 / 1 | LL / IM |

Symptoms: Generaliseu tonic-cionic seizure

SMQs:, Systemic lupus erythematosus (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)

Life Threatening? Yes

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? No

Previous Vaccinations: Other Medications: None Current Illness: None

Preexisting Conditions: None

Allergies: None

Diagnostic Lab Data:

CDC Split Type:

Write-up: About 26 hours after vaccination, patient had a generalized tonic clonic seizure which spontaneously esolved. He was subsequently taken to the emergency room, treated with normal saline and acetaminophen.

VAERS ID: 2582746 (history)

Vaccinated:

2022-06-25

Form:

Version 2.0

Onset:

2022-08-01

Age:

4.0

Days after vaccination: 37

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2023-02-16

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | -/UNK | -/- |

Administered by: Pharmacy Purchased by: ?

Symptoms: Anti-GAD antibody, Anti-iA2 antibody, Blood alkaline phosphatase increased, Blood glucose ncreased, Blood ketone body, Blood thyroid stimulating hormone normal, Diabetic ketoacidosis, Glucose urine present, Glycosylated haemoglobin increased, Insulin C-peptide, Thirst, Type 1 diabetes mellitus, Urine analysis. Jrine ketone body present, Urine output increased

SMQs:, Liver related investigations, signs and symptoms (broad), Hyperglycaemia/new onset diabetes mellitus narrow), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Biliary system related nvestigations, signs and symptoms (broad), Drug reaction with eosinophilia and systemic symptoms syndrome broad), Dehydration (broad), Hypokalaemia (broad), Immune-mediated/autoimmune disorders (narrow)

.ife Threatening? Yes

3irth Defect? No

)ied? No

'ermanent Disability? Yes

tecovered? No

Office Visit? Yes

R Visit? No

R or Doctor Visit? Yes

lospitalized? Yes, ? days

xtended hospital stay? No

revious Vaccinations:

Mala an B # a alta anta a h l a a a

Preexisting Conditions: None

Allergies: None

Diagnostic Lab Data: 9/24/22: POCT glucose 351, beta-hydroxybutyrate 32.2, TSH 6.7, C-Peptide 0.8, A1C 10.7,

UA ketones 3+ UA glucose 4+, alk. phosphatase 430, IA-2 antibody \$g120, GAD antibody 15.1.

CDC Split Type:

Write-up: Patient received pediatric Moderna vaccine on 6/25/22, second dose on 7/26/22. About a week after the second dose, patient began experiencing diabetes symptoms: increased thirst and urination. Expressed concern at doctor"s visit 8/15/22. UA was ordered, but diagnosis was unfortunately missed due to laboratory error (urine sample was lost and never processed). Symtoms continued to worsen, until a home urine test on 9/24/2 revealed 4+ glucose and 3+ ketones. Immediately went to ER, and received formal diagnosis of incurable type 1 diabetes on 9/24/22 with BG 351 and DKA, A1C 10.7. Spent four days in hospital. No family history of T1D or known genetic risk factors. Extremely healthy child prior to vaccination.

VAERS ID: 2124632 (history)

Vaccinated:

2022-02-18

Form:

Version 2.0

Onset:

2022-02-18

Age:

12.0

Days after vaccination: 0

Sex:

Female

Submitted:

0000-00-00

Location: California

Entered:

2022-02-18

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FK9894/2 | LA/IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Syncope

SMOs: Torsade de pointes/QT prolongation (broad), Arrhythmia related investigations, signs and symptoms (broad), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: Unknown

Current Illness: none

Preexisting Conditions: unknown

Allergies: none

Diagnostic Lab Data:

CDC Split Type:

Write-up: Syncope reaction after vaccination

VAERS ID: 2127944 (history)

Vaccinated:

2022-02-02

Form:

Version 2.0

Onset:

2022-02-03

Age:

Sex:

15.0

Days after vaccination: 1 Submitted:

0000-00-00

Location: California

Female

Entered:

2022-02-19

COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH F55603 / 3 LA / -

Administered by: Pharmacy Purchased by: ?

Symptoms: Eyelid ptosis

SMQs:, Periorbital and eyelid disorders (narrow), Ocular motility disorders (narrow)

_ife Threatening? No 3irth Defect? No

Died? No

Permanent Disability? Yes

Recovered? No Office Visit? No

ER Visit? No

:R or Doctor Visit? No

lospitalized? No

Previous Vaccinations:

Ither Medications: PREDNISONE

Current Illness:

'reexisting Conditions: Medical History/Concurrent Conditions: Lupus syndrome

\llergies:

)iagnostic Lab Data:

DC Split Type: USPFIZER INC202200213493

Vrite-up: Right eye droop noticeable next day; This is a spontaneous report received from a contactable eporter(s) (Consumer or other non HCP). The reporter is the patient. A 15 year-old female patient (not regnant) received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), administered in arm left, administration late 02Feb2022 18:15 (Lot number: F55603) at the age of 15 years as dose 3 (booster), single for covid-19 nmunisation. Relevant medical history included: "Lupus" (unspecified if ongoing). No Known allergies. No lovid prior vaccination, no Covid tested post vaccination. No other vaccine in four weeks. Concomitant nedication(s) included: PREDNISONE. Vaccination history included: Bnt162b2 (Dose 2, Batch/Lot Number: W0173, Location of injection: Arm Left, Vaccine Administration Time: 01:00 PM), administration date: 3Aug2021, when the patient was 15 years old, for COVID-19 immunization; Bnt162b2 (Dose 1, Batch/Lot lumber: EW0173, Location of injection: Arm Left, Vaccine Administration Time: 01:00 PM), administration date 3Jul2021, when the patient was 15 years old, for COVID-19 immunization. The following information was aported: EYELID PTOSIS (disability) with onset 03Feb2022 23:45, outcome "not recovered", described as "Right ye droop noticeable next day". Therapeutic measures were not taken as a result of eyelid ptosis. No follow-up ttempts are possible. No further information is expected.

/AERS ID: 2051227 (history) Vaccinated: 2022-01-17

form: Version 2.0 Onset: 2022-01-17

ige: 17.0 Days after vaccination: 0

Sex: Male Submitted: 0000-00-00 ocation: California Entered: 2022-01-20

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|--------------|--------------|
| 20VID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FL3198 / UNK | -/IM |

dministered by: Pharmacy Purchased by: ?

ymptoms: <u>Catheterisation cardiac</u>, <u>Chest pain</u>, <u>Ejection fraction normal</u>, <u>Electrocardiogram ST segment evation</u>, <u>Troponin increased</u>

MQs:, Myocardial infarction (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures road), Cardiomyopathy (broad), Noninfectious myocarditis/pericarditis (broad)

fe Threatening? No irth Defect? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? Yes, 2 days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: escitalopram 5 mg daily

Current Illness:

Preexisting Conditions: Depression

Allergies: NKA

Diagnostic Lab Data: Patient found to have normal ejection fraction and no coronary artery disease

CDC Split Type:

Write-up: Patient experienced chest pain for 2 days. Presented to our ER with ST segment elevation and a

troponin of 4.49. Patient with to cardiac cath lab and was diagnosed with possible pericarditis.

VAERS ID: 2408789 (history)

Vaccinated:

2022-01-09

Form:

Version 2.0

Onset:

2022-01-19

Age:

14.0

Days after vaccination: 10

Sex:

Male

Submitted:

0000-00-00

Location: California

Entered:

2022-08-11

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FL3198 / 3 | LA / SYR |

Purchased by: ? Administered by: Pharmacy

Symptoms: Acoustic stimulation tests abnormal, Deafness neurosensory, Deafness unilateral, Sudden hearing

loss, Tinnitus, Vertigo

SMQs:, Hearing impairment (narrow), Vestibular disorders (narrow)

Life Threatening? No

Birth Defect? No.

Died? No

Permanent Disability? Yes

Recovered? No

Office Visit? Yes

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? No

Previous Vaccinations:

Other Medications: Strattera, Levothyroxine, Melatonin, Vitamin D

Current Illness:

Preexisting Conditions: Hypothyroidism, Depression, ADHD

Allergies:

Diagnostic Lab Data: He has had two basic hearing exams 2/2/22 and 6/1/22, an audiology full hearing screen 7/8/22. He is awaiting scheduling for a CT of the temporal bones as well as a monaural hearing aid evaluation.

CDC Split Type:

Write-up: 10 days after the Covid Booster, he suddenly had vertigo, tinnitus, and loss of hearing in his left ear. The vertigo subsided after 3 days, however the hearing loss and tinnitus did no subside. He was seen by an urgent care immediately, followed by his pediatrician in early February 2022. At that pediatrician he failed his hearing test for the first time. On June 1, 2022 he failed for a second time. On July 8, 2022, he was tested by an audiologist and found to have sudden onset sensorineural hearing loss of the left ear with tinnitus.

VAERS ID: 2751380 meets

Vaccinated: Version 2.0

2022-01-07 2022-03-01 Onset:

Age:

Form:

12.0

Days after vaccination: 53

Sex: Female

Submitted:

0000-00-00

Location: California

Entered:

2024-03-01

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|-------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | FD7218 / 1 | AR / IM |
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | 331308A / 2 | AR/IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Erythema, Skin discolouration, Vitiligo

SMQs:, Anaphylactic reaction (broad), Hypotonic-hyporesponsive episode (broad), Hypersensitivity (broad), Dru eaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune

disorders (narrow) _ife Threatening? No

3irth Defect? No

Died? No

Permanent Disability? Yes

Recovered? No Office Visit? Yes

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations: **Ither Medications:** None **Current Illness: None**

Preexisting Conditions: None

Allergies: Azithromycin

Diagnostic Lab Data: Dermatologist used Wood's lamp during visits to his office.

:DC Split Type:

Vrite-up: She finished her second dose of COVID vaccine on 01/07/2022. In March" 22, we noticed her facial kin showing redness and white patches. She was diagnosed with Vitiligo in April" 22. she has been on reatment ever since. She used hydrocortisone ointment, tacrolimus ointment and opzelura. She still is battling vith vitiligo which was triggered by COVID vaccine as there is no family history of vitiligo in family.

/AERS ID: 2019658 (history)

Vaccinated:

2022-01-06

Form:

Version 2.0

Onset:

2022-01-08

\ge: Sex:

16.0 Male

Days after vaccination: 2 Submitted:

0000-00-00

.ocation: California

Entered:

2022-01-09

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|-------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | 330258D / 3 | LA/- |

dministered by: Pharmacy

Purchased by: ?

ymptoms: Chest pain, Troponin increased

MQs:, Myocardial infarction (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures

proad), Cardiomyopathy (broad), Noninfectious myocarditis/pericarditis (broad)

ife Threatening? No irth Defect? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: Multivitamin

Current Iliness: No

Preexisting Conditions: NO

Allergies: NKA

Diagnostic Lab Data: **CDC Split Type:**

Write-up: Elevated troponin levels, chest pain, admitted to hospital.

VAERS ID: 1962108 (history)

Vaccinated:

2021-12-16

Form:

Version 2.0

Onset:

2021-12-17

Age:

16.0

Days after vaccination: 1

Submitted:

0000-00-00

Location: California

Sex:

Male

Entered:

2021-12-19

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | -/2 | UN / IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Chest pain, Troponin increased

SMQs:, Myocardial infarction (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures

(broad), Cardiomyopathy (broad), Noninfectious myocarditis/pericarditis (broad)

Life Threatening? No

Birth Defect? No

Died? No.

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: None

Current Illness: None

Preexisting Conditions: None

Allergies: None

Diagnostic Lab Data: 12/18/21: troponin of 13750.3 pg/ml. (Reference range: 3.0-77.9)

CDC Split Type:

Write-up: Pt began to have chest pain On day 1 after his injection. He presented to the emergency department on day 2 and was found to have a troponin of 13750.3 pg/ml. (Reference range: 3.0-77.9). this is concerning for

myocarditis

Result pages: 1 2 3 4 5 6 next

Search Results

From the 12/27/2024 release of VAERS data:

Found 2,490 cases where Age is under-18 and Location s California and Administered-by is 'Pharmacy'

Government Disclaimer on use of this data

Table

| 4 | ↑ ↓ | |
|-------------|------------|---------|
| Age | Count | Percent |
| < 6 Months | 5 | 0.2% |
| 6-11 Months | 6 | 0.24% |
| 1-2 Years | 12 | 0.48% |
| 3-5 Years | 160 | 6.43% |
| 6-17 Years | 2,307 | 92.65% |
| TOTAL | 2,490 | 100% |

Case Details (Reverse Sorted by Vaccination Date)

This is page 1 out of 249

esult pages: 1 2 3 4 5 6 7 8 9 10 next

/AERS ID: 2818097 history

Vaccinated:

2024-12-26

·orm:

Version 2.0

Onset:

2024-12-26

lge:

14.0

Days after vaccination: 0

iex: Male

Submitted:

0000-00-00

ocation: California

Entered:

2024-12-26

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|--------------|--------------|
| >OVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | LM2212 / UNK | RA / IM |
| :LU3: INFLUENZA (SEASONAL) (FLUCELVAX) / SEQIRUS, INC. | 946626 / 1 | RA / IM |

Symptoms: Cold sweat, Fall, Hypotonia, Loss of consciousness

SMOs: Torsade de pointes/QT prolongation (broad), Peripheral neuropathy (broad), Hyperglycaemia/new onse diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Accidents and injuries (narrow), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? No

Previous Vaccinations: Other Medications: N/A Current Illness: N/A

Preexisting Conditions: N/A

Allergies: N/A

Diagnostic Lab Data: N/A

CDC Split Type:

Write-up: Patient became cold and clamy before losing consciousness. His arm did stiffen and then go flaccid before falling back and fainting to floor. He did collapse from chair and fall onto carpeted ground in vaccination room. He was out of consciousness for approximately 10 seconds before waking up . He did ask what happened and we told him. He asked for a bag to vomit in and we provided him with one. He was not given any foods or liquids post syncope. He asked for a ice pack to place under his neck and we provided him with one. EMS was called and we stayed on the phone with them until help arrived. He was alert and talking to us the entire time. EMS did transfer patient to the hospital.

2024-12-07 Vaccinated: VAERS ID: 2815016 (history) 2024-12-07

Form: Version 2.0 Onset:

9.0 Age:

Days after vaccination: 0

Male Sex:

Submitted: 0000-00-00 2024-12-10

Location: California

Entered:

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|-----------------------|--------------|
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | MODERNA COVID-1 / UNK | AR/IM |

Purchased by: ? Administered by: Pharmacy

Symptoms: Urticaria

SMQs:, Anaphylactic reaction (broad), Angioedema (narrow), Hypersensitivity (narrow), Drug reaction with

eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? Yes

ER Visit? No

ER or Doctor Visit? No

Mannitalizada Na

Other Medications: Fish oil Current Illness: head cold Preexisting Conditions: none

Allergies: none

Diagnostic Lab Data: none

CDC Split Type:

Write-up: hives, torso, started overnight. Spread throughout torso two days later

VAERS ID: 2813582 (history)

Vaccinated:

2024-12-03

Form:

Version 2.0

Onset:

2024-12-03

Age: Sex:

12.0

Days after vaccination: 0 Submitted:

0000-00-00

Location: California

Female

Entered:

2024-12-03

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|-------------|--------------|
| FLU3: INFLUENZA (SEASONAL) (FLUARIX) / GLAXOSMITHKLINE BIOLOGICALS | 745P4 / N/A | LA / IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Fall, Head injury, Syncope

SMQs:, Torsade de pointes/QT prolongation (broad), Arrhythmia related investigations, signs and symptoms broad), Accidents and injuries (narrow), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad),

Hypoglycaemia (broad) _ife Threatening? No

3irth Defect? No.

Died? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

lospitalized? No

Previous Vaccinations: Other Medications: none **Current Illness:** none

Preexisting Conditions: none

Allergies: none

Diagnostic Lab Data: none

CDC Split Type:

Write-up: Syncope episode: Patient was taken into the consultation room with father and sister. The patient was given the vaccine first without a reaction, then the father. As the immunizer was prepping to inject her sister, the said patient fainted. Patient fainted towards her fathers direction, who tried to carry her. He could not carry her veight and she fell to the floor and slightly hit her head against the wall. After about 10 seconds, the patient jained full consciousness. The immunizer told the patient to stay in a lay-flight position for a few minutes until the felt better. After several minutes the patient was better, stood up without problem, and left the store.

VAERS ID: 2814842 (history)

Vaccinated:

Submitted:

2024-11-30

Form:

Version 2.0

Onset:

2024-11-30

Age:

15.0

Days after vaccination: 0

Female Sex: Location: California

Entered:

0000-00-00 2024-12-09 COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH LM2216 / UNK LA / IM

Purchased by: ? Administered by: Pharmacy

Symptoms: Dizziness, Flushing, Hyperhidrosis, Nausea, Syncope, Unresponsive to stimuli

SMQs:, Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow). Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Hypersensitivity (broad), Hypoglycaemia (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Write-up: Systemic: Fainting / Unresponsive-Mild, Systemic: lightheaded and nauseous then briefing fainted-Mild, Systemic: Flushed / Sweating-Mild, Additional Details: Asked parent and patient if she had done ok with previous vaccines before giving vaccines. They both said yes. Gave vaccines while Mother was present in room When they went out to wait 15 min in chairs in front of pharmacy, mom came up and said her daughter did need water. She was lighted and a little nauseous, but alert. Propped feet up. she fainted briefly in chair . called 911 but Mom said to cancel call. She said she was fine. She then said this had happened last time and she was fine Other Vaccines: VaccineTypeBrand: covid 19, mRNA, 24-25; Manufacturer: Pfizer; LotNumber: Im2216; Route: IM; BodySite: left arm; Dose: ; VaxDate: UNKNOWN, VaccineTypeBrand: fluceIvax 24-25; Manufacturer: segirus; LotNumber: 388534; Route: im; BodySite: right arm; Dose: ; VaxDate: UNKNOWN

VAERS ID: 2811925 (history)

Vaccinated:

2024-11-25

Form: Version 2.0 Onset:

2024-11-26

Age:

Sex:

9.0

Days after vaccination: 1

Male

Submitted:

0000-00-00

Location: California

Entered:

2024-11-26

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| FLU3: INFLUENZA (SEASONAL) (FLUARIX) / GLAXOSMITHKLINE BIOLOGICALS | T74KG / 1 | LA / IM |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Injection site bruising, Injection site inflammation, Injection site swelling

SMQs:, Haemorrhage terms (excl laboratory terms) (narrow), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow)

Life Threatening? No

Birth Defect? No

'ermanent Disability' No

Recovered? No.

Office Visit? No

R Visit? No

:R or Doctor Visit? No

lospitalized? No

Previous Vaccinations: **)ther Medications:** None **Jurrent Illness:** None

reexisting Conditions: None

Allergies: None

Diagnostic Lab Data: NONE

:DC Split Type:

Vrite-up: THERE WAS A CIRCULAR BRUISING AROUND THE SITE OF THE INJECTION AND THE LEFT DELTOID

VAS INFLAMED AND SWOLLEN. MOTHER SAID THAT IT HAS GOTTEN WORSE INSTEAD OF SUBSIDING.

VAERS ID: 2816318 (history)

Vaccinated:

2024-11-18

Form:

Version 2.0

Onset:

2024-11-28

Age:

5.0

Days after vaccination: 10

Sex:

Male

Submitted:

0000-00-00

-ocation: California

Entered:

2024-12-16

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | -/5 | LA / IM |

dministered by: Pharmacy

Purchased by: ?

symptoms: Arthralgia, Culture negative, Gait inability, Joint swelling, Nasopharyngitis, Pyrexia, Rash, Rash ruritic, Streptococcus test negative, Urticaria

iMQs:, Anaphylactic reaction (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), inticholinergic syndrome (broad), Dystonia (broad), Guillain-Barre syndrome (broad), Haemodynamic oedema. ffusions and fluid overload (narrow), Hypersensitivity (narrow), Arthritis (broad), Tendinopathies and ligament isorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

ife Threatening? No

irth Defect? No

ied? No

'ermanent Disability? No

ecovered? No

Office Visit? Yes

R Visit? No

R or Doctor Visit? No

lospitalized? No

revious Vaccinations: ther Medications: None

urrent lilness: None recalled by family

reexisting Conditions: None

llergies: None known

iagnostic Lab Data: Rapid strep test negative, Throat culture negative

DC Split Type:

/rite-up: 11/23 - mild cold symptoms without fever x 2-3 days, resolved. 11/28 - started having non-traumatic nee pain about 6pm, worsening and then swelling throughout the evening to the point where patient couldn't ralk, also started having itchy urticarial rash starting on the torso. 11/29 - knee pain improved in the morning ut rash had spread to face, arms, legs, brought in to office for evaluation

VAERS ID: 2808734 (history)

Vaccinated:

2024-11-16 2024-11-16

Form: Age:

9.0

Days after vaccination: 0

Sex:

Male

Submitted:

0000-00-00

Location: California

Version 2.0

Entered:

Onset:

2024-11-16

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|---------------|--------------|
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 3044091 / N/A | LA / IM |
| FLU3: INFLUENZA (SEASONAL) (FLUARIX) / GLAXOSMITHKLINE BIOLOGICALS | 72RF2 / N/A | LA / IM |

Administered by: Pharmacy Purchased by: ?

Symptoms: Blindness, Blood pressure decreased, Depressed level of consciousness, Fall, Feeling hot, Heart rat decreased, Pain, Posture abnormal

SMQs:, Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dystonia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Accidents and injuries (narrow), Glaucoma (broad), Optic nerve disorders (broad), Cardiomyopathy (broad), Retinal disorders (broad), Hypotonichyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad). Hypoglycaemia (broad), Dehydration (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions: Allergies: EGGS AND NUTS

Diagnostic Lab Data:

CDC Split Type:

Write-up: Patient received a Moderna Covid shot and a Flu shot in the left arm. Shortly after the shots, he slumped his head down and appeared to faint. His father shook him to see if he was ok. Patient never fell out of the chair and appeared to be at least semi-conscious, but it was not clear. After a minute or two, the patient appeared more conscious. His blood pressure and pulse reading were on the lower side. His body felt warm. When asked what he felt after the shots, he said it hurt after the second shot (flu shot). When asked if his vision blacked out, he said yes. He waited in the waiting room for an additional 10 minutes and appeared to be ok. His father wanted to take him home and declined a second blood pressure reading.

VAERS ID: 2807240 (history)

Female

2024-11-11 Vaccinated:

Version 2.0 Form:

2024-11-11

15.0 Age:

Location: California

Sex:

Days after vaccination: 0

Onset:

Submitted:

Entered:

0000-00-00 2024-11-11

Vaccination / Manufacturer

Lot / Dose | Site / Route

Administered by: Pharmacy

Purchased by: ?

Symptoms: Dizziness, Nausea, Pallor, Vomiting

3MQs:, Acute pancreatitis (broad), Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad)

_ife Threatening? No

3irth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Vrite-up: After after her vaccine administration, patient felt light headed. I told her to sit back down on the chai Vhen I observer her face she started to turn pale and she felt nauseous. After about a minute, she started to omit. When she completed couple cycle of vomiting, she felt better. But, couple minutes later she started to omit again. Few minutes later, paramedics arrive to assess her. She did not experience any problem with reathing or soreness in her arm.

/AERS ID: 2807238 (history)

Vaccinated:

2024-11-09

Form:

Version 2.0

Onset:

2024-11-09

Age: Sex:

14.0

Female

Days after vaccination: 0 Submitted:

0000-00-00

-ocation: California

Entered:

2024-11-11

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | - / UNK | -/IM |
| FLU3: INFLUENZA (SEASONAL) (FLUARIX) / GLAXOSMITHKLINE BIOLOGICALS | -/UNK | -/- |

dministered by: Pharmacy

Purchased by: ?

ymptoms: Dizziness, Nervousness, Pallor

MQs:, Anticholinergic syndrome (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode oroad), Hypoglycaemia (broad)

ife Threatening? No

irth Defect? No

ied? No

ermanent Disability? No

ecovered? Yes

ffice Visit? No

R Visit? No

R or Doctor Visit? No

ospitalized? No

revious Vaccinations:

ther Medications: none

Preexisting Conditions: none

Allergies: none
Diagnostic Lab Data:
CDC Split Type:

Write-up: Patient nearly passed out due to nervousness from receiving the shot. She questioned to her mom why she had to get the shot or not get it. She turned pale so the pharmacist asked her to get the heart rate monitored and it showed 50. She stayed seated and put the head down on the lap to stay calm and put the cold water bottle on the forehead. After resting for 15 minutes, her heart rate turned back to normal range from 60 to 78.

VAERS ID: 2807329 (history)

Vaccinated:

2024-11-09

Form:

Version 2.0

Onset:

2024-11-10

Age:

7.0

Days after vaccination: 1

Sex:

Male

Submitted:

0000-00-00

Location: California

Entered:

2024-11-12

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
|--|------------|--------------|
| FLUN3: INFLUENZA (SEASONAL) (FLUMIST) / MEDIMMUNE VACCINES, INC. | -/UNK | NS/IN |

Administered by: Pharmacy

Purchased by: ?

Symptoms: Decreased appetite, Headache, Lethargy, Nasal congestion, Pyrexia

SMQs:, Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? Yes

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:
Other Medications: none
Current Illness: none

Preexisting Conditions: none

Allergies: tree nuts

Diagnostic Lab Data: none

CDC Split Type:

Write-up: fever: 103.0 F (oral), headache, lethargy, loss of appetite, nasal congestion

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