March 22, 2021

RE: Written Testimony in Support of SB212

Dear Chairman Hilderbrand and Members of the Senate Public Health and Welfare Committee -

My name is Dr. Karladine Graves. For years I have conducted virtual meetings with physicians and researchers across our nation. These individuals are known throughout the world, many of whom have also testified before state and US congressional and senate hearings.

Medicine is a science, while also an art of practice. Unfortunately, it carries at times human error, which costs lives and resources that can never be replaced. There are multiple examples throughout history of treatments that were originally thought to be beneficial for humanity but later turned out not only ineffective, but harmful.

An example certainly is the Anthrax vaccine that was given to our military years ago to "protect" them from this deadly bioweapon. However, years later, it has now been linked directly with the Gulf War Syndrome. Those vaccinated now are faced with an increased risk of Amyotrophic Lateral Sclerosis, known as ALS.

Another vaccine which was hastily pushed out was for Dengue Fever, which kills thousands of individuals in tropical areas of the world. It was discovered that those who received the vaccine, when later were exposed to the natural virus, not only were much sicker than those who had not received the vaccine, but also suffered higher mortality.

Close to 500 children died because they experienced what many of us fear could happen with the COVID vaccines. It is called Antibody Dependent Enhancement. In the interest of time and space, I will not go into full detail here, but am certainly willing to at a later time. We already know there are around 1,500 deaths reported from the COVID vaccines in the USA, with now around 30,000 serious reported side effects, including hospitalizations.

Well-known scientists and researchers from around the world have studied the spike protein in these COVID vaccines. It a Syncytin protein. It also just so happens that Syncytin-1 is the one protein required to form a woman's placenta. We have no idea if the vaccine or one of its mutations, which are many by now, may attack women and young girls' Syncytin-1 protein and destroy their ability to bear children now or in the future.

We also see Israel, which is a good model of the US presently, whose death rates have increased, not decreased, after giving massive amounts of vaccines. Too, they are seeing more women with blood disorders and deaths from blood clotting. We certainly have begun seeing reports of this within the USA as well.

To mandate vaccines, which have had no reputable animal studies, and are essentially being injected into humans as an experiment, is not only dangerous but could end in an injustice to

humanity. No vaccine or medication should be mandated. Israeli citizens are now suing their government and using as their model the Nuremberg Trials which forced millions of individuals to undergo experiments and medications without their consent.

If these vaccines were a product on the market, with the deaths and side effects already reported, by now they would have been recalled and further investigation would ensue. I caution anyone wishing to mandate such a vaccine to consider whether they could face children, woman, and families who could lose their potential to child bear, experience harm, or lose their life from this vaccine.

It would be my clinical opinion that no vaccine or medication should be legislatively mandated. That includes requiring them as a condition to receive an education or childcare. SB212, which would limit the power of the Secretary of Health to single-handedly add additional vaccines to the required childhood vaccine schedules, is an appropriate and good starting point towards that end goal.

Respectfully,

Dr. Karladine Graves