Exhibit 2

Provincial Health Services Authority
Province-wide solutions. Better health.

May 17, 2021

Via email to fevancouver@outlook.com

Mak Parhar

Dear Mak Parhar:

Re: Response Letter
Freedom of Information and Protection of Privacy Act
Our File No: PHSA F21-0998

I write in response to your April 26, 2021 request for records made under the *Freedom of Information and Protection of Privacy Act,* RSBC 1996, (the "Act").

Request

You requested the following records (the "Request"):

> *All records describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; liver cancer cells).*
>
> *Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to:*
>
> *· the culturing of something, or*
> *· the performance of an amplification test (i.e. a PCR test), or*
> *· the sequencing of something.*
>
> *To clarify, I am requesting all such records that are in the possession, custody or control of British Columbia Centre for Disease Control (for example: downloaded to a computer, printed in hard copy, etc.).*
> *If the BCCDC has a access to any other agencies record, please forward them as well.*

Response

The BC Centre for Disease Control confirms that there are no records that describe the isolation of the SARS-CoV-2 virus directly taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material, because in order to cultivate a virus it has to replicate in a cell, as a DNA or RNA virus can never be cultivated on its own.

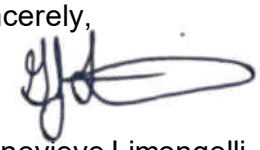
A copy of the Act is available online at:
http://www.bclaws.ca/Recon/document/ID/freeside/96165_00

Office of the Information and Privacy Commissioner for British Columbia

The Office of the Information and Privacy Commissioner for British Columbia (the "OIPC") is the regulator of access and privacy laws in the province. If you have a concern with any decision in the processing of the Request you have the right to request a review of PHSA's decision from the OIPC. For ease of reference, information about the OIPC is included in Appendix A of this letter.

Additionally, should you have any questions about this letter, please contact the author at glimongelli@phsa.ca or 604-829-2514.

Sincerely,



Genevieve Limongelli
Freedom of Information Advisor
Information Access & Privacy Services
Provincial Health Services Authority

Appendix A: How to Request a Review

Under section 52 of the Act, you may request a review by the Office of the Information and Privacy Commissioner (OIPC) of any decision, action or failure to act by PHSA in responding to your request.

If you wish to request a review, you must contact the OIPC in writing within 30 business days of your receipt of this letter and provide the OIPC with:

1. Your name, address and telephone number;
2. A copy of the original request that you sent;
3. A copy of this letter; and
4. The reasons or grounds upon which you are requesting the review.

All inquiries should be directed to:

By Mail:
Office of the Information and Privacy Commissioner for British Columbia
PO Box 9038, Stn. Prov. Govt.
Victoria, BC
V8W 9A4

By Email: info@oipc.bc.ca

By Tel: (250) 387-5629
By Fax: (250) 387-1696

Callers outside Victoria can contact the office toll-free by calling Enquiry BC at 1-800-663-7867 and requesting a transfer to (250) 387-5629.

[redacted] <[redacted]@gmail.com> Dec 31, 2020, 6:22 PM

to BC

December 31, 2020

To: BC Ministry of Health
Freedom of Information Office

Email: FOI.Requests@gov.bc.ca

Dear Access to Information Clerk,

This is a formal request made under

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

[RSBC 1996] CHAPTER 165

Description of Requested Records:

All records in the possession, custody or control of the BC Ministry of Health that:

- describe the isolation of the [alleged] *genetic variant of the* [alleged] *virus that* [allegedly] *causes* [the alleged disease referred to as] *COVID-19* [allegedly] *identified in the United Kingdom,* directly from a sample taken from a diseased patient, where the patient sample was **not** first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; fetal bovine serum).

  Please note that I am using "isolation" in the every-day sense of the word: *the act of separating a thing(s) from everything else*. I am **not** requesting records where "isolation" refers instead to:

  - the culturing of something, or
  - the performance of an amplification test (i.e. a PCR test), or

- the sequencing of something.

- describe the **discovery** (**not manufacture / fabrication / creation / assembly / alignment / trimming / mapping**) of the alleged genome for this alleged particular *new variant of coronavirus*;

- describe how this alleged *new variant of coronavirus* relates to the alleged "SARS-COV-2";

- include **any** additional analysis/investigation into this alleged "*new variant*".

Please note that my request **is not** limited to records that were authored by agents of BC Ministry of Health, or to records that pertain to work done by agents of the BC Ministry of Health; it includes **any** sort of record, authored by anyone, anywhere, ever.

If any records match the above descriptions of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each record with certainty (i.e. author; title; date; publisher); please provide URLs where possible.

Format:

URLs and/or pdf documents sent to me via email; I do not wish for anything to be shipped to me.

Contact Information:

Last Name: [redacted]
First Name: [redacted]
Address: [redacted]

Email: [redacted]

Thank you in advance and best wishes.

Happy New Year

BRITISH COLUMBIA

File: 292-30/HTH-2020-07437

May 21, 2021

Sent via email: [redacted]

[redacted]

Dear [redacted]

Re: Request for Access to Records
***Freedom of Information and Protection of Privacy Act* (FOIPPA)**

I am writing further to your request received by the Ministry of Health. Your request is for:

All records in the possession, custody or control of the BC Ministry of Health that: Describe the isolation of the [alleged] genetic variant of the [alleged] virus that [allegedly] causes [the alleged disease referred to as] COVID-19 [allegedly] identified in the United Kingdom, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; fetal bovine serum); Describe the discovery (not manufacture / fabrication / creation / assembly / alignment / trimming / mapping) of the alleged genome for this alleged particular new variant of coronavirus; Describe how this alleged new variant of coronavirus relates to the alleged 'SARS-COV-2'; Include any additional analysis/investigation into this alleged 'new variant'.

Although a thorough search was conducted, no records were located in response to your request. The Ministry advises that detection of variants, as well as testing and approval of vaccines and test kits, is not something that the Ministry has any role in.

Your file is now closed.

If you have any questions regarding your request, please contact Kelly Morita, the analyst assigned to your request, at 250 356-2030. This number can be reached toll-free by calling from Vancouver, 604 660-2421, or from elsewhere in BC, 1 800 663-7867 and asking to be transferred to 250 356-2030.

../2

Ministry of Citizens' Services Information Access Operations
Mailing Address:
PO Box 9569 Stn Prov Govt
Victoria BC V8W 9K1
Website:
www.gov.bc.ca/freedomofinformation
Telephone: 250 387-1321
Fax: 250 387-9843

You have the right to ask the Information and Privacy Commissioner to review this decision. I have enclosed information on the review and complaint process.

Sincerely,

Kelly Morita, FOI Specialist
On behalf of Justine Nisbet, Manager
Justice / Health Team, Information Access Operations

Enclosure

How to Request a Review with the Office of the Information and Privacy Commissioner

If you have any questions regarding your request please contact the analyst assigned to your file. The analyst's name and telephone number are listed in the attached letter.

Pursuant to section 52 of the *Freedom of Information and Protection of Privacy Act* (FOIPPA), you may ask the Office of the Information and Privacy Commissioner to review any decision, act, or failure to act with regard to your request under FOIPPA.

A complete copy of FOIPPA is available online at:

http://www.bclaws.ca/civix/document/id/complete/statreg/96165_00

Please note that you have 30 business days to file your review with the Office of the Information and Privacy Commissioner. In order to request a review please write to:

Information and Privacy Commissioner
PO Box 9038 Stn Prov Govt
4th Floor, 947 Fort Street
Victoria BC V8W 9A4
Telephone 250 387-5629 Fax 250 387 1696

If you request a review, please provide the Commissioner's Office with:

1. A copy of your original request;
2. A copy of our response; and
3. The reasons or grounds upon which you are requesting the review.

Provincial Health Services Authority
Province-wide solutions. Better health.

February 4, 2021

Via email to [redacted]

Dear [redacted]

Re: Response & Time Extension Letter
Freedom of Information and Protection of Privacy Act
Our File No: PHSA F20-0844; F21-0903

I write in response to your December 21, 2020 request for records made under the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, (the "Act").

Request

You requested the following records (the "Request"):

1) All records in the possession, custody or control of "Provincial Health Services Authority" describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was NOT first combined with any other source of genetic material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum). Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am NOT requesting records where "isolation of SARS-COV-2" refers instead to:

- *the culturing of something, and/or*
- *the performance of an amplification test (i.e. a PCR test), and/or*
- *the sequencing of something*

Please note also that my request is not limited to records that were authored by anyone at "Provincial Health Services Authority" or that pertain to work done by "Provincial Health Services Authority." My request includes any sort of record, for example (but not limited to) any published peer-reviewed study authored by anyone, anywhere, ever that the "Provincial Health Services Authority" has downloaded or printed. If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each record with certainty (i.e. title, author(s), date, journal, where the public may access it.

2) All records in the possession, custody or control of "Provincial Health Services Authority" describing the cycle thresholds used in PCR testing protocols (for determining negative vs. indeterminate vs. positive) throughout British Columbia for "COVID-19."

3) All records in the possession, custody or control of "Provincial Health Services Authority" that describe or list or explain the gold standard(s) used in assessments of "COVID-19" PCR tests used in British Columbia.

*4) All records in the possession, custody or control of "Provincial Health Services Authority" that describe or list or explain the **gold standard(s)** used in assessments of "COVID-19" **antibody tests** used in British Columbia.*

*5) All records in the possession and custody of "Provincial Health Services Authority" detailing the PCR testing and subsequent **cycle threshold used to conduct PCR** testing throughout British Columbia.*

Phase One Response

Concerning part 1 of the Request:

After consulting with individuals at BC Centre for Disease Control no records were found in response to this part of your request.

Phase Two & Notice of Time Extension

The remainder of the Request, parts 2 through 5, will follow under separate cover under this file #: **F21-0903.**

Phase Two requires searching through a large number of records and doing so within the current time limits of your Request would unreasonably interfere with the operations of PHSA. Section 10(1)(b) of the Act allows for a public body to extend the time limit for its response by an additional 30 business days in a circumstance like this.

The revised response date for your request is **March 19, 2021.**

Section 10(1)(b) of the Act states:

Extending the time limit for responding
10 (1) The head of a public body may extend the time for responding to a request for up to 30 days if one or more of the following apply:

[…]

(b) a large number of records are requested or must be searched and meeting the time limit would unreasonably interfere with the operations of the public body;

A copy of the Act is available online at:
http://www.bclaws.ca/Recon/document/ID/freeside/96165_00

Office of the Information and Privacy Commissioner for British Columbia

The Office of the Information and Privacy Commissioner for British Columbia (the "OIPC") is the regulator of access and privacy laws in the province. If you have a concern with any decision in the processing of the Request you have the right to request a review of PHSA's decision from the OIPC. For ease of reference, information about the OIPC is included in Appendix A of this letter.

Additionally, should you have any questions about this letter, please contact the author at Megan.Williams@phsa.ca or (604) 317-0955.

Sincerely,

Megan Williams
Freedom of Information Advisor
Information Access & Privacy Services
Provincial Health Services Authority

Appendix A: How to Request a Review

Under section 52 of the Act, you may request a review by the Office of the Information and Privacy Commissioner (OIPC) of any decision, action or failure to act by PHSA in responding to your request.

If you wish to request a review, you must contact the OIPC in writing within 30 business days of your receipt of this letter and provide the OIPC with:

1. Your name, address and telephone number;
2. A copy of the original request that you sent;
3. A copy of this letter; and
4. The reasons or grounds upon which you are requesting the review.

All inquiries should be directed to:

By Mail:
Office of the Information and Privacy Commissioner for British Columbia
PO Box 9038, Stn. Prov. Govt.
Victoria, BC
V8W 9A4

By Email: info@oipc.bc.ca

By Tel: (250) 387-5629
By Fax: (250) 387-1696

Callers outside Victoria can contact the office toll-free by calling Enquiry BC at 1-800-663-7867 and requesting a transfer to (250) 387-5629.

Freedom of Information Request SARS-COV-2 New Virus Variant

[redacted] Thu, Dec 31, 2020 at 6:33 PM
To: privacyandfoi@phsa.ca

December 31, 2020

To: Provincial Health Services Authority - **Email:** **privacyandfoi@phsa.ca**
Provincial Health Services,
200 - 1333 West Broadway,
Vancouver, BC
V6H 4C1

Attn: Senior Director, Information Access & Privacy Services

This is a formal request made under

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

[RSBC 1996] CHAPTER 165

Description of Requested Records:

All records in the possession, custody or control of Provincial Health Services Authority that:

- describe the isolation of the [alleged] *genetic variant of the* [alleged] *virus that* [allegedly] *causes* [the alleged disease referred to as] *COVID-19* [allegedly] *identified in the United Kingdom,* directly from a sample taken from a diseased patient, where the patient sample was **not** first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; fetal bovine serum).

  Please note that I am using "isolation" in the every-day sense of the word: *the act of separating a thing(s) from everything else*. I am **not** requesting records where "isolation" refers instead to:

  - the culturing of something, or
  - the performance of an amplification test (i.e. a PCR test), or
  - the sequencing of something.

- describe the **discovery** (**not manufacture / fabrication / creation / assembly / alignment / trimming / mapping**) of the alleged genome for this alleged particular *new variant of coronavirus*;

- describe how this alleged *new variant of coronavirus* relates to the alleged "SARS-COV-2";

- include **any** additional analysis/investigation into this alleged "*new variant*".

Please note that my request **is not** limited to records that were authored by agents of Provincial Health Services Authority, or to records that pertain to work done by agents of the Provincial Health Services Authority; it includes **any** sort of record, authored by anyone, anywhere, ever.

If any records match the above descriptions of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each record with certainty (i.e. author; title; date; publisher); please provide URLs where possible.

Format:

URLs and/or pdf documents sent to me via email; I do not wish for anything to be shipped to me.

Contact Information:

Last Name: [redacted]
First Name: [redacted]
Address: [redacted]

Email: [redacted]

Thank you in advance and best wishes.

Happy New Year

Provincial Health Services Authority
Province-wide solutions. Better health.

February 11, 2021

Via email to [redacted]

[redacted]

Dear [redacted]

Re: Response Letter
Freedom of Information and Protection of Privacy Act
Our File No: PHSA F20-0855

I write in response to your December 31, 2020 request for records made under the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, (the "Act").

Request

You requested the following records (the "Request"):

All records in the possession, custody or control of Provincial Health Services Authority that:

• describe the isolation of the [alleged] genetic variant of the [alleged] virus that [allegedly] causes [the alleged disease referred to as] COVID-19 [allegedly] identified in the United Kingdom, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; fetal bovine serum).

Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation" refers instead to:

• the culturing of something, or
• the performance of an amplification test (i.e. a PCR test), or
• the sequencing of something

• describe the discovery (not manufacture / fabrication / creation / assembly / alignment / trimming / mapping) of the alleged genome for this alleged particular new variant of coronavirus;

• describe how this alleged new variant of coronavirus relates to the alleged "SARS-COV-2";

• include any additional analysis/investigation into this alleged "new variant".

Phase One Response

BC Centre of Disease Control confirms that there are no records that describe the isolation of the SARS-CoV-2 variant identified in the United Kingdom, directly taken from a symptomatic patient, where the patient sample was not first combined with any other

source of genetic material, because in order to cultivate a virus it has to replicate in a cell, as a DNA or RNA virus can never be cultivated on its own.

A copy of the Act is available online at:
http://www.bclaws.ca/Recon/document/ID/freeside/96165_00

Phase Two

The remainder of the Request will follow in the next phase of this request under our file # F21-0912.

Office of the Information and Privacy Commissioner for British Columbia

The Office of the Information and Privacy Commissioner for British Columbia (the "OIPC") is the regulator of access and privacy laws in the province. If you have a concern with any decision in the processing of the Request you have the right to request a review of PHSA's decision from the OIPC. For ease of reference, information about the OIPC is included in Appendix A of this letter.

Additionally, should you have any questions about this letter, please contact the author at glimongelli@phsa.ca or 604-829-2514.

Sincerely,

Genevieve Limongelli
Freedom of Information Advisor
Information Access & Privacy Services
Provincial Health Services Authority

Canadian Institutes of Health Research
160 Elgin Street, 9th Floor
Address Locator 4809A
Ottawa, Ontario K1A 0W9

Instituts de recherche en santé du Canada
160, rue Elgin, 9e étage
Indice de l'adresse 4809A
Ottawa (Ontario) K1A 0W9

December 15, 2020 Ref: A-2020-0029

[redacted]

By Email

[redacted]

On December 8, 2020, the Canadian Institutes of Health Research received your request for information made under the *Access to Information Act* for the following:

"All records describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; liver cancer cells). Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to: · the culturing of something, or · the performance of an amplification test (i.e. a PCR test), or · the sequencing of something. To clarify, I am requesting all such records that are in the possession, custody or control of your institution Canada (for example: downloaded to a computer, printed in hard copy, etc.). The known or estimated error rate (both false positives and false negatives), of PCR testing to test for SARS-COV-2. This can include reference to any studies The known or estimated error rate (both false positives and false negatives), of antibody testing to check for immunity to SARS-COV-2. This can include references to any studies Whether vaccine manufacturers have been indemnified (rendered legally immune from lawsuit), for any vaccines they provide related to SARS-COV-2 Whether any vaccine injury compensation plan will be established (or has been established), for people who are injured or killed by vaccines to treat SARS-COV-2"

I regret to inform you that The Canadian Institutes of Health Research does not have any records under our control relating to your request. COVID-19 academic publications resulting from CIHR-funded research can be found on our website at https://cihr-irsc.gc.ca/e/51948.html and Information on the publication of research findings can be found in the Tri-Agency Open Access Policy on Publications here.

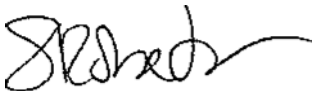
Please be advised that you are entitled to complain to the Information Commissioner concerning the processing of your request within 60 days after the day that you become aware that grounds for a complaint exist. In the event you decide to avail yourself of this right, your notice of complaint should be addressed to:

The Information Commissioner of Canada
30 Victoria Street, 7th Floor
Gatineau, Quebec K1A 1H3

You may obtain additional information on the complaint process by visiting the website of the Office of the Information Commissioner at www.oic-ci.gc.ca/en/submitting-complaint.

This completes our processing of your request. If you have any questions concerning your request, please contact me, by email at ATIPCoordinator@cihr-irsc.gc.ca.

Sincerely,



Sharon Robertson
ATIP Coordinator

Final Response Health Canada Access to Information request A-2021-000768

Inbox ×

Smith, Christinen (HC/SC) <christinen.smith@hc-sc.gc.ca>
to me

Fri, Aug 20, 8:55 AM

Good Morning [redacted]

Please find attached the final response letter to your Access to Information request for the following: **All records describing the isolation of a SARS-COV-2 virus directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells a.k.a. vero cells, liver cancer cells). Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to: the culturing of something (i.e. the culturing of supernatant in vero cells), or; the performance of an amplification test (i.e. a PCR test on a patient sample adulterated with an enzyme to release genetic material from cells), or; the sequencing of something.**

Thank you and have a nice day.

Christine Smith
(she | elle)

Team Leader, Access to Information and Privacy
Health Canada and the Public Health Agency of Canada / Government of Canada
christinen.smith@hc-sc.gc.ca / Tel: 613-862-6063

Chef d'équipe, Accès à l'information et protection des renseignements personnels
Santé Canada et Agence de la santé publique du Canada / Gouvernement du Canada
christinen.smith@hc-sc.gc.ca / Tél: 613-862-6063

...

[Message clipped] View entire message

Final Response-A-...

Health Canada / Santé Canada
Access to Information and Privacy Division
7th Floor, Suite 700, Holland Cross - Tower B
1600 Scott Street, (Mail Stop: 3107A)
Ottawa, Ontario K1A 0K9

Our file: A-2021-000768 / CS

[redacted]

Dear [redacted]

This is in response to your request made under the *Access to Information Act* (the Act) for the following information:

> **Dear Sir or Madam, Department of Health and Social Services Under section 9 of the Act respecting access to documents held by public bodies and the protection of personal information, I hereby request a copy of the following document(s): All records describing the isolation of a SARS-COV-2 virus directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells a.k.a. vero cells, liver cancer cells). Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to: · the culturing of something (i.e. the culturing of supernatant in vero cells), or; · the performance of an amplification test (i.e. a PCR test on a patient sample adulterated with an enzyme to release genetic material from cells), or; · the sequencing of something. Format: Pdf documents sent to me via email; I do not want anything shipped to me.**

Your request has resulted in a "No Records Exist", firstly as this would be a Public Health Agency of Canada request and also because of the way that you have formulated the request. The isolation of the virus is not completed without the use of another medium, therefore we have no records that would show this process taking place. It is important to understand the following: The gold standard assay used to determine the presence of intact virus in patient samples is viral isolation in cell culture. With this assay, if virus is present in the patient sample, it will multiply and produce visible cytopathic effects, which means that infected cells demonstrate visible changes. Additionally, the detection of an increase in the genetic viral material by PCR further confirms that intact virus is present in the patient sample, since increasing viral genetic material necessitates replication of the viral within the cell culture. This technique was successfully used to confirm that intact SARS-COV-2 was present in Canadian patient samples. In the case of SARS-COV-2 isolation, Vero cells combined with minimal

essential medium (MEM) were used because they are essential to support viral replication and cell growth. This combination supports the growth of other coronavirus types and was successful in the case of SARS-CoV-2 as well.

Should you have any questions or concerns about the processing of your request, please do not hesitate to contact Christine N. Smith, the analyst responsible for this file, either by phone at 613-862-6063, by email at christinen.smith@hc-sc.gc.ca, with reference to our file number cited above.

Please be advised that you are entitled to complain to the Office of the Information Commissioner of Canada concerning the processing of your request within 60 days of the receipt of this notice. In the event you decide to avail yourself of this right, your notice of complaint can be made online at: https://www.oic-ci.gc.ca/en/submitting-complaint or by mail to:

Office of the Information Commissioner of Canada
30 Victoria Street
Gatineau, Quebec K1A 1H3

Yours sincerely,

Smith, Christine N

Digitally signed by Smith, Christine N
DN: C=CA, O=GC, OU=HC-SC, CN="Smith, Christine N"
Reason: I am the author of this document
Location: your signing location here
Date: 2021.08.20 08:51:42-04'00'
Foxit PhantomPDF Version: 10.1.0

Christine Smith
Team Leader, Access to Information and Privacy

November 23, 2020

SANTÉ ET SERVICES SOCIAUX

Daniel Desharnais
Sous-ministre adjoint de la coordination et des relations institutionnelles
1075, ch. Sainte-Foy, 3e étage
Québec (QC) G1S 2M1
Tél. : 418 266-8850, Téléc. : 418 266-8855

responsable.acces@msss.gouv.qc.ca

AND/OR

INSTITUT NATIONAL DE SANTÉ PUBLIQUE DU QUÉBEC
Madame Julie Dostaler
Secrétaire générale
945, av. Wolfe, 3e étage
Québec (QC) G1V 5B3
Tél. : 418 650-5115 #5302, Téléc. : 418 646-9328

julie.dostaler@inspq.qc.ca

SUBJECT : Request for document access

Dear Sir, Dear Madam,

I write to request access to information from :

le ministre de la Santé et des Services sociaux du Québec, and/or

Institut national de santé publique du Québec (INSPQ), and/or

Laboratoire de santé publique du Québec

As found on the Québec government website https://www.inspq.qc.ca/institut/nous-joindre;

> *Le rôle de l'Institut national de santé publique du Québec est de soutenir le ministère de la Santé et des Services sociaux (MSSS), les directions régionales de santé publique, ainsi que les établissements de santé dans l'exercice de leurs responsabilités, en émettant des avis et des recommandations basés sur les connaissances scientifiques disponibles.*

Therefore, under section 9 of the Act respecting access to documents held by public bodies and the protection of personal information, I hereby request a copy of the following document(s):

All records describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; liver cancer cells).

Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to:

- · the culturing of something, or
- · the performance of an amplification test (i.e. a PCR test), or
- · the sequencing of something.

To clarify, I am requesting all such records that are in the possession, custody or control of SANTÉ ET SERVICES SOCIAUX and or INSTITUT NATIONAL DE SANTÉ PUBLIQUE DU QUÉBEC (for example: downloaded to a computer, printed in hard copy, etc.).

Thank you for your assistance in this matter and kindly confirm receipt of this request via return email.

Sincerely,

Institut national de santé publique Québec

Secrétariat général

PAR COURRIEL

Québec, le 26 novembre 2020

[redacted]

OBJET : Réponse – Demande d'accès aux documents
N/Réf. (dossier) : 6410/2020-58

[redacted]

En réponse à votre demande d'accès aux documents datée du 23 novembre 2020 relative à "All records describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; liver cancer cells)", nous vous informons que l'Institut national de santé publique du Québec ne détient aucun document.

Par ailleurs, vous trouverez ci-annexée une note explicative concernant l'exercice du droit de recours en révision devant la Commission d'accès à l'information.

Veuillez agréer, [redacted], l'expression de nos sentiments les meilleurs.

La responsable de l'accès aux documents,

Julie Dostaler
Secrétaire générale

p. j. Avis de recours

N/Réf. (correspondance) : 2020-7626

945, avenue Wolfe, 3e étage
Québec (Québec) G1V 5B3

Téléphone : (418) 650-5115 poste 5304
Télécopieur : (418) 646-9328
Courriel : julie.dostaler@inspq.qc.ca
Internet : http://www.inspq.qc.ca

AVIS DE RECOURS EN RÉVISION

RÉVISION

a) Pouvoir

L'article 135 de la Loi prévoit qu'une personne peut, lorsque sa demande écrite a été refusée en tout ou en partie par le responsable de l'accès aux documents ou de la protection des renseignements personnels ou dans le cas où le délai prévu pour répondre est expiré, demander à la Commission d'accès à l'information de réviser cette décision.

La demande de révision doit être faite par écrit; elle peut exposer brièvement les raisons pour lesquelles la décision devrait être révisée (art. 137).

L'adresse de la Commission d'accès à l'information est la suivante :

QUÉBEC

Bureau 2.36
525, boul. René-Lévesque Est
Québec (Québec) G1R 5S9

Tél : (418) 528-7741
Téléc : (418) 529-3102

MONTRÉAL

Bureau 18.200
500, boul. René-Lévesque Ouest
Montréal (Québec) H2Z 1W7

Tél : (514) 873-4196
Téléc : (514) 844-6170

b) Motifs

Les motifs relatifs à la révision peuvent porter sur la décision, sur le délai de traitement de la demande, sur le mode d'accès à un document ou à un renseignement, sur les frais exigibles ou sur l'application de l'article 9 (notes personnelles inscrites sur un document, esquisses, ébauches, brouillons, notes préparatoires ou autres documents de même nature qui ne sont pas considérés comme des documents d'un organisme public).

c) Délais

Les demandes de révision doivent être adressées à la Commission d'accès à l'information dans les 30 jours suivant la date de la décision ou de l'expiration du délai accordé au responsable pour répondre à une demande (art. 135).

La loi prévoit spécifiquement que la Commission d'accès à l'information peut, pour motif raisonnable, relever le requérant du défaut de respecter le délai de 30 jours (art. 135).

APPEL DEVANT LA COUR DU QUÉBEC

a) Pouvoir

L'article 147 de la loi stipule qu'une personne directement intéressée peut porter la décision finale de la Commission d'accès à l'information en appel devant un juge de la Cour du Québec sur toute question de droit ou de compétence.

L'appel d'une décision interlocutoire ne peut être interjeté qu'avec la permission d'un juge de la Cour du Québec s'il s'agit d'une décision interlocutoire à laquelle la décision finale ne pourra remédier.

b) Délais

L'article 149 prévoit que l'avis d'appel d'une décision finale doit être déposé au greffe de la Cour du Québec, dans les 30 jours qui suivent la date de réception de la décision de la Commission par les parties.

c) Procédure

Selon l'article 151 de la loi, l'avis d'appel doit être signifié aux parties et à la Commission dans les dix jours de son dépôt au greffe de la Cour du Québec.

14 juin 2006
Mise à jour le 16 septembre 2016

Institut national de santé publique Québec

Secrétariat général

PAR COURRIEL

Québec, le 21 septembre 2021

[redacted]

OBJET : **Réponse – Demande d'accès aux documents**
N/Réf. (dossier) : 6410/2021-80

[redacted]

La présente est en réponse à votre demande d'accès aux documents datée du 7 septembre 2021 relative à :

« All records describing the isolation of a SARS-COV-2 virus directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells a.k.a. vero cells, liver cancer cells).

Please note that I am using « isolation » in the every-day sense of the word : the act of separating a thing(s) from everything else. I am not requesting records where « isolation of SARS-COV-2 » refers instead to :

- the culturing of something (i.e. the culturing of supernatant in vero cells), or;
- the performance of an amplification test (i.e. a PCR test on a patient sample adulterated with an enzyme to release genetic material from cells), or;
- the sequencing of something. »

L'Institut national de santé publique du Québec ne détient aucun document selon la définition spécifique que vous nous avez partagée du terme « isolation ».

Néanmoins, vous trouverez en pièce jointe le document de suivi de l'inoculation du virus SARS-CoV-2 réalisée par Laboratoire de santé publique du Québec (LSPQ) pour la toute première fois en mars 2020. Le passage surligné en jaune dans le document démontre que le virus a été isolé avec succès.

…2

945, avenue Wolfe, 3e étage
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Téléphone : (418) 650-5115 poste 5304
Télécopieur : (418) 646-9328
Courriel : julie.dostaler@inspq.qc.ca
Internet : http://www.inspq.qc.ca

Bien que la procédure que nous utilisons ne corresponde pas à la conception que vous avez de l'isolement du virus, elle demeure cependant fondée sur des standards scientifiques reconnus. Les souches proviennent d'échantillons prélevés sur différents patients dont l'analyse de laboratoire a détecté la présence du virus SARS-CoV-2. Afin de pouvoir étudier le virus, un procédé d'amplification a été utilisé pour le produire en plus grande quantité. Ce procédé exige nécessairement de recourir à un milieu de culture qui contient d'autre matériel génétique, lequel est différentiable du virus provenant de la souche utilisée. Enfin, la mise en culture des souches est réalisée dans le respect de la procédure PR-VR-002 du LSPQ, également en pièce jointe.

Vous trouverez ci-annexée une note explicative concernant l'exercice du droit de recours en révision devant la Commission d'accès à l'information.

Veuillez agréer, [redacted] l'expression de nos sentiments les meilleurs.

La responsable de l'accès aux documents,

Julie Dostaler
Secrétaire générale

p. j. - Documents
- Avis de recours

N/Réf. (correspondance) : 2021-8010

PROTOCOLE d'infection du virus Covid-19 dans les cellules VERO E6

Date :
Dégel des cellules VERO E6 par Tonya Roy et mis dans flacons F25 avec MEM 2%

Date : 2020-03-11
Passage des cellules VERO E6 dans du milieu de croissance DMEM 2%
1 flacon de $1x10^6$
1 flacon $2x10^6$
2 flacons $0,5x10^6$

Date : 2020-03-13
Inoculation du spécimen L00214517 dans le flacon $1x10^6$
Flacon confluent à 90%
Retrait du milieu de croissance DMEM
Lavage des cellules avec PBS influenza
100ul de spécimen + 900ul de milieu de maintien DMEM directement sur les cellules dans le flacon. Contact 60 minutes, légères agitation aux 20 minutes.
Ajout de 9 ml de milieu de maintien DMEM.

Date : 2020-03-16
Lecture du flacon infecté
50% des cellules flottent, rondes et boursouflées
50% du feuillet est attaché au flacon
Voir photos dans le fichier secure /partage/virologie/corona virus 2020
20ul du surnageant mis dans 2 ml de solution de lyse pour analyser au PCR

Date : 2020-03-17
Lecture du flacon infecté
70% des cellules sont détachées
30% du feuillet est attaché au flacon, feuillet affiche l'effet cytopathique du virus
Voir photos dans le fichier secure /partage/virologie/corona virus 2020

2 flacons F25 à $0,5X10^6$ cellules VERO E6
Retrait du milieu de croissance DMEM
Lavage des cellules avec PBS influenza
1 flacon ajout de 10 ml de milieu de maintien DMEM 2% pour contrôle négatif
1 flacon ajout de 500ul de surnageant de l'infection + 500ul de milieu de maintien.
Contact 60 minutes, légères agitation aux 20 minutes.
Ajout de 9 ml de milieu de maintien DMEM.

Récolte du reste du surnageant du flacon infecté, 7 cryovials d'environ 1,5ml
Congélateur -80C au local 1.253 portoir 2 position 1.

Sylvie Nancy Beaulac

INOCULATION DE SPÉCIMEN POUR LA CULTURE DE VIRUS SARS-CoV-2

	Noms
Auteur(s) :	Carole Dagenais
Réviseur(s) :	Sylvie Nancy Beaulac
Approbateur :	Hugues Charest
Coordonnateur du document :	Sylvie Nancy Beaulac

I. PRÉAMBULE

Ceci est un nouveau document créé comme guide pour l'inoculation en culture de SARS-CoV-2 détectés par PCR dans des échantillons cliniques, ou à partir de lignées cellulaires infectées afin d'amplifier le nombre de particules virales.

II. OBJET

Ce document vise à décrire la technique employée pour inoculer une lignée cellulaire à partir de spécimens respiratoires prélevés ou à partir de lignées cellulaires infectées afin d'amplifier le nombre de particules virales.

III. OBJECTIFS

Cette technique permet de mettre en évidence le caractère contagieux de particules de SARS CoV-2 par l'observation d'un effet cytopathique.

IV. CHAMP D'APPLICATION

Ce document est destiné au personnel du secteur Sérodiagnostic et virologie ayant reçu une formation en NC3 adéquate et documentée, ainsi qu'une formation en culture cellulaire.
Cette procédure s'applique aux spécimens reçus pour le diagnostic d'une infection par le virus respiratoire SARS-CoV-2.

V. DÉFINITIONS DES TERMES

ECP : Effet cytopathique

VI. PRINCIPE

L'inoculation de spécimen permet lorsqu'il y a présence de virus de fixer ces derniers sur la paroi cellulaire. Les virus une fois adsorbés pénètrent dans la cellule pour se multiplier. Cette multiplication virale permet généralement d'observer un ECP dans la lignée de cellule VeroE6 lorsque plusieurs cycles de réplications détruisent les cellules infectées.

VII. SPÉCIMEN

Les spécimens sont de nature respiratoire ou peuvent provenir de cultures cellulaires.

VIII. MATÉRIEL REQUIS

Matériel :

- Tube à centrifugation de 15 ml ou de 50 ml
- Pipettes sérologiques de 1, 5 et 10 ml
- Vial pour culture cellulaire (#5900239 ou équivalent)
- Flacon (F25)
- Pipettes de transfert stériles
- Incubateur (36 – 38°C) avec 5% de CO_2
- Micropipette de 10 à 100 µL et embouts stériles
- Micro tubes stériles 2,0ml Sarstedt #cat 72.693.005 ou équivalent
- Vortex

Réactifs :

- Solution de PBS - influenza pH 7,5
- Milieu de maintien utilisé pour l'inoculation des spécimens (milieu DMEM, glutamine, HEPES, GVF 100X – gentamycine, vancomycine, fungizone – et sérum fœtal bovin. le Voir le registre RE-VR-003 et le modifier avec l'ajout de GVF 100X au lieu de gentamicine
- Cellules VeroE6 en culture

IX. ÉQUIPEMENT (entretien et vérification)

Les appareils utilisés sont vérifiés et entretenus en fonction de leur procédure respective.

X. CONTRÔLE DE LA QUALITÉ

Chaque analyse doit inclure un contrôle interne négatif – vial de cellules non infecté.
Un contrôle positif doit être inclus à l'utilisation d'un nouveau lot de cellules – portion aliquote adéquate de contrôle positif interne.

XI. PRÉCAUTIONS SPÉCIALES

Toute manipulation avec des cultures cellulaire infectées avec des échantillons de patients potentiellement positifs pour le virus SARS CoV-2 doit être effectuée sous une ESB en ***NC3***.

XII. EXPOSÉ DE LA PROCÉDURE

1) Inoculation en vial :

Préparation des vials en NC2

- Laver les cultures de cellules avec du PBS pH 7,5 stérile préchauffé à 36 - 38°C (2,0 mL pour un vial).
- Ajouter 2,0 ml de milieu de maintien préchauffé à 36 - 38°C.
- À cette étape, ajouter 100µL de milieu dans le témoin négatif.
- Vortexer les échatillons et les placer dans une mallette pour le transfert en NC3.

*Transférer les portoirs de vials et échantillons en **NC3** pour faire l'inoculation*

- Ajouter 100µL de l'échantillon à analyser (au besoin incliner les tubes).
- Prendre soin de dévisser légèrement les tubes.
- Incuber le portoir de vials à 36 – 38°C avec 4,0-6,0% de CO_2.

Si possible, effectuer une lecture journalière des cultures pendant 10 jours et inscrire les résultats de l'observation du feuillet cellulaire dans le registre qui sera numérisé et envoyé à votre poste de travail.

Au besoin, si le milieu devient acide (jaunâtre) ou si le feuillet du témoin négatif dégénère, au jour 5 jours ± 2 retirer environ 1,0 mL de milieu pour le remplacer par du milieu frais.

Note : Reprendre l'inoculation du spécimen s'il y a présence de contamination.

2) Inoculation avec culture cellulaire en flacon (F25)

- Diluer l'échantillon au besoin avec du milieu de maintien DMEM. (ex.100 µL culture + 900µL DMEM)
- Laver les cultures de cellules avec 5,0 mL de PBS pH 7,5 stérile.
- Ajouter environ 1,0 mL d'échantillon (possiblement dilué) à analyser.
- Incuber à 36 - 38°C pour 60 minutes à 4,0 - 6,0% de CO_2 en agitant à toutes les 20 minutes.
- Ajouter le milieu de maintien (ex: 9,0 mL pour les flacons de culture de 25 cm²).
- Incuber un flacon de cellules non infectées qui servira comme contrôle négatif.
- Incuber à 36 - 38°C à 4,0 à 6,0% de CO_2 en dévissant légèrement les flacons de culture.

Si possible, effectuer une lecture à tous les jours pendant 10 jours et inscrire ces résultats dans le registre.

Au besoin, au jour 5 ± 2, faire un changement de milieu de maintien si le milieu devient acide ou le feuillet du témoin négatif dégénère. Retirer 7,0 ml de milieu et en ajouter l'équivalent.

Note : Reprendre l'inoculation du spécimen s'il y a présence de contamination.
Au besoin, effectuer le test PCR avec les spécimens analysés

XIII. RÉSULTATS ET INTERPRÉTATIONS

Un résultat positif est exprimé par un ECP. Généralement l'échelle utilisée est de 1+ à 4+ (1+ étant un ECP très faible). Quand l'ECP est de 3 à 4+, il reste moins de 25% de cellules encore adhérées au vial ou flacon et l'échantillon est considéré positif. Récolter le surnageant et le distribuer dans des tubes Sarstedt ou cryotubes à raison de 1,0 ml/tube qui seront entreposés dans le congélateur au NC3 à -70°C.

Bien identifier les tubes en inscrivant le numéro d'identification du spécimen, et autres informations possiblement pertinents - la date de récolte, la journée post-infection.

S'assurer de mettre à jour le registre d'inventaire de placement des échantillons dans le congélateur tombeau à -70°C disponible dans le cartable au local 1.253 et aussi dans S : partage/virologie/congélateur NC3 (-70) #3124.

Noter qu'un spécimen est négatif après 10 jours si aucun ECP n'est observé en culture. Le spécimen est alors jeté ou conserver si il devient pertinent d'effectuer d'autres analyses sur le surnageant.

XIV. LIMITES DE LA MÉTHODE

Un résultat négatif n'exclut pas la présence de virus dans le spécimen clinique.
Un effet cytopathique (ECP) n'est pas nécessairement relié à une propagation du virus CoV-2, il peut être causé par la présence d'un autre virus ou être dû à un effet cytotoxique.

XV. ENREGISTREMENT DES DONNÉES

Inscrire et numériser les résultats au registre "Inoculation d'échantillons pour virus Respiratoire".

XVI. RÉFÉRENCES

Modification de la procédure utilisée au LSPQ pour l'inoculation de virus respiratoire (Influenza).

Abstract publié 2020-03-11 : CDC Volume 26, Number 6 – June 2020 (ISSN :1080-6059)

AUTO TRANSLATION

Covid-19 virus infection protocol in VERO E6 cells

Date:

Thaw VERO E6 cells by Tonya Roy and put in F25 flasks with 2% MEM

Date: 2020-03-11

Passage of VERO E6 cells in 2% DMEM growth medium

1 bottle of $1x10^6$

1 bottle $2x10^6$

2 bottles $0.5x10^6$

Date: 2020-03-13

Inoculation of specimen L00214517 in vial $1x10^6$

Flask 90% confluent

Removal of DMEM growth medium

Washing cells with influenza PBS

100ul of specimen + 900ul of DMEM maintenance medium directly on the cells in the bottle.

Contact 60 minutes, slight shaking every 20 minutes.

Addition of 9 ml of DMEM maintenance medium.

Date: 2020-03-16

Reading the infected vial

50% of cells are floating, round and bloated

50% of the leaflet is attached to the vial

See photos in the secure / sharing / virology / corona virus 2020 file

20ul of the supernatant put in 2 ml of lysis solution for PCR analysis

Date: 2020-03-17

Reading the infected vial

70% of cells are detached

30% of the leaflet is attached to the vial, leaflet displays the cytopathic effect of the virus

See photos in the secure / sharing / virology / corona virus 2020 file

2 vials F25 at $0.5X10^6$ VERO E6 cells

Removal of DMEM growth medium

Washing cells with influenza PBS

1 vial addition of 10 ml of 2% DMEM maintenance medium for negative control

1 vial add 500ul of infection supernatant + 500ul of maintenance medium.

Contact 60 minutes, slight shaking every 20 minutes.

Addition of 9 ml of DMEM maintenance medium.

Harvest the remainder of the supernatant from the infected vial, 7 cryovials of approximately 1.5ml

Freezer -80C in room 1.253 rack 2 position 1.

Sylvie Nancy Beaulac

INOCULATION DE SPÉCIMEN POUR LA CULTURE DE VIRUS SARS-CoV-2

Noms Auteur(s) : Carole Dagenais

Réviseur(s) : Sylvie Nancy Beaulac

Approbateur : Hugues Charest

Coordonnateur du document : Sylvie Nancy Beaulac

I. PREAMBLE

This is a new document created as a guide for inoculation in culture of SARS-CoV 2 detected by PCR in clinical samples, or from infected cell lines

in order to increase the number of viral particles.

II. OBJECT

This document aims to describe the technique used to inoculate a cell line from respiratory specimens taken or from infected cell lines in order to amplify

the number of viral particles.

III. GOALS

This technique makes it possible to demonstrate the contagious nature of SARS particles CoV-2 by the observation of a cytopathic effect.

IV. SCOPE

This document is intended for personnel in the Serodiagnosis and Virology sector who have received adequate and documented CL3 training, as well as training in cell culture.

This procedure applies to specimens received for the diagnosis of virus infection respiratory SARS-CoV-2.

V. DEFINITIONS OF TERMS

CPE: Cytopathic effect

VI. PRINCIPLE

Specimen inoculation allows when viruses are present to bind them to the cell membrane. Viruses once adsorbed enter the cell to multiply. This viral multiplication usually results in CPE in the VeroE6 cell line when several rounds of replication destroy infected cells.

VII. SPECIMEN

Specimens are respiratory in nature or may be obtained from cell cultures.

VIII. MATERIAL REQUIRED

Material:

• 15 ml or 50 ml centrifuge tube

• Serological pipettes of 1, 5 and 10 ml

• Vial for cell culture (# 5900239 or equivalent)

• Bottle (F25)

• Sterile transfer pipettes

• Incubator (36 - 38 ° C) with 5% CO2

• Micropipette from 10 to 100 µL and sterile tips

• Micro sterile tubes 2,0ml Sarstedt #cat 72.693.005 or equivalent

• Vortex

Reagents:

• PBS solution - influenza pH 7.5

• Maintenance medium used for inoculation of specimens (DMEM medium, glutamine, HEPES, GVF 100X - gentamycin, vancomycin, fungizone - and fetal bovine serum. the

See register RE-VR-003 and modify it with the addition of GVF 100X instead of

gentamicin

• VeroE6 cells in culture

IX. EQUIPMENT (maintenance and checking)

The devices used are checked and maintained according to their respective procedures.

X. QUALITY CONTROL

Each analysis should include a negative internal control - vial of uninfected cells.

A positive control should be included when using a new batch of cells - aliquot

adequate internal positive control.

XI. SPECIAL PRECAUTIONS

Any manipulation with cell cultures infected with patient samples potentially positive for SARS CoV-2 virus should be performed under a BSE in CL3.

XII. STATEMENT OF THE PROCEDURE

1) Vial inoculation:

Preparation of vials in NC2

• Wash cell cultures with sterile PBS pH 7.5 preheated to 36 - 38 ° C (2.0

mL for one vial).

• Add 2.0 ml of holding medium preheated to 36 - 38 ° C.

• At this step, add 100μL of medium to the negative control.

• Vortex the samples and place them in a case for transfer to CL3.

Transfer the vial and sample racks to CL3 to inoculate

• Add 100µL of the sample to be analyzed (if necessary tilt the tubes).

• Take care to slightly unscrew the tubes.

• Incubate the vial rack at 36 - 38 ° C with 4.0-6.0% CO2.

If possible, take a daily culture reading for 10 days and record the results of the observation of the cell sheet in the register which will be digitized and
sent to your workstation.

If necessary, if the medium becomes acidic (yellowish) or if the negative control sheet degenerates, on day 5 ± 2 days remove approximately 1.0 mL of medium to replace it with cool medium.

Note: Resume inoculation of the specimen if contamination is present.

2) Inoculation with cell culture in a flask (F25)

• Dilute the sample as needed with DMEM maintenance medium. (e.g. 100 µL culture + 900µL DMEM)

• Wash cell cultures with 5.0 mL sterile PBS pH 7.5.

• Add approximately 1.0 mL of the sample (possibly diluted) to be analyzed.

• Incubate at 36 - 38 ° C for 60 minutes at 4.0 - 6.0% CO2, shaking every 20 minutes.

• Add the maintenance medium (eg 9.0 mL for the 25 cm^2 culture flasks).

• Incubate a vial of uninfected cells to serve as a negative control.

• Incubate at 36 - 38 ° C at 4.0 to 6.0% CO2 by slightly unscrewing the vials of culture.

If possible, take a reading every day for 10 days and record these results in the registry.

If necessary, on day 5 ± 2, change the maintenance medium if the medium becomes acid or the negative control sheet degenerates. Remove 7.0 ml of medium and add more the equivalent.

Note: Resume inoculation of the specimen if contamination is present.

If necessary, perform the PCR test with the analyzed specimens

XIII. RESULTS AND INTERPRETATIONS

A positive result is expressed by an CPE. Generally the scale used is 1+ to 4+ (1+ being a very low ECP). When the CPE is 3 to 4+, there are still less than 25% of cells adhered to the vial or vial and the sample is considered positive. Collect the supernatant and distribute in Sarstedt tubes or cryotubes at a rate of 1.0 ml / tube which will be stored in the freezer at NC3 at -70 ° C.

Identify the tubes by entering the identification number of the specimen, and others possibly relevant information - harvest date, post-infection day.

Make sure to update the sample placement inventory register in the tomb freezer at -70 ° C available in the binder in room 1.253 and also in S:
sharing / virology / freezer NC3 (-70) # 3124.

Note that a specimen is negative after 10 days if no ECP is observed in culture. The specimen is then discarded or kept if it becomes relevant to carry out further analyzes on the supernatant.

XIV. LIMITATIONS OF THE METHOD

A negative result does not exclude the presence of virus in the clinical specimen.

A cytopathic effect (CPE) is not necessarily linked to the spread of the CoV-2 virus, it may be caused by the presence of another virus or be due to a cytotoxic effect.

XV. DATA RECORDING

Enter and scan the results in the "Inoculation of virus samples Respiratory".

XVI. REFERENCES

Modification of the procedure used at the LSPQ for inoculation of respiratory virus (Influenza).

Abstract published 2020-03-11: CDC Volume 26, Number 6 - June 2020 (ISSN: 1080-6059)

McGill

Secretariat
845 Sherbrooke Street West, Room 313
Montreal, Quebec H3A 0G4
Tel.: (514) 398-3948 / Fax.: (514) 398-4758

October 23, 2020

[redacted]

Sent by email

Subject: Access to documents request – Response

Dear [redacted]

This letter is in response to your request submitted October 5, 2020 under the *Act respecting Access to Documents Held by Public Bodies and the Protection of Personal Information* (the Act), for the following:

> **All records in the possession, custody or control of the McGill Secretariat or any other department of McGill University (for example, downloaded to a computer, printed in hard copy etc. describing the isolation of SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was NOT first combined with any other source of genetic material (ie monkey kidney cells, aka vero cells, liver cancer cells etc.)**
>
> **Please note that I am using the term "isolation" in the everyday sense of the word; the act of separating a thing from everything else. I am NOT requesting records where "isolation of SARS-COV-2" refers instead only to:**
>
> - **the culturing of something and/or**
> - **the performance of an amplification test (RT-PCR test) and/or**
> - **the sequencing of something**
>
> **If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that the public may identify and access each record with certainty (ie: title, author, date, journal, where the public may access it).**

Please be advised that McGill University does not hold any documents responsive to your request.

Please be advised that pursuant to article 135 of the Act (appended below) you may ask the Commission d'accès à l'information to review this decision within a period of 30 days from the date of this letter.

Sincerely,

Edyta Rogowska
Secretary-General

An Act respecting Access to Documents Held by Public Bodies and the Protection of Personal Information, CQLR c A-2.1

135. Every person whose request has been denied, in whole or in part, by the person in charge of access to documents or of protection of personal information may apply to the Commission for a review of the decision.

Every person who has made a request under this Act may apply to the Commission for a review of any decision of the person in charge concerning the time prescribed for processing the request, the mode of access to a document or information, the application of section 9 or the fee payable.

The application must be made within thirty days of the date of the decision or of the time granted by this Act to the person in charge for processing a request. However, the Commission may, for any serious cause, release the applicant from a failure to observe the time limit.

1982, c. 30, s. 135.

New Nouveau Brunswick
CANADA

April 27, 2021

[redacted]

Dear [redacted]

Subject: ***Right to Information and Protection of Privacy Act***

I am writing in response to your request of January 4, 2021 under the *Right to Information and Protection of Privacy Act*:

> *A complete list of records, including peer reviewed papers, held by the NB Health Department which describe the isolation of the SARS-COV-2 virus (Coronavirus COVID-19) taken directly from a symptomatic person with COVID-19, without the sample being contaminated or mixed with other genetic or source material.*
>
> *I am not requesting documents pertaining to where "isolation" means the preparation of a culture of something else, or an amplification test (ex. A PCR test detecting only mRNA or DNA) or other sequencing, other than the indicated viral isolate.*

The Department of Health does not have records related to your request.

If you are not satisfied with the response that has been provided, you may file a complaint with the Office of the Ombud as per subparagraph 67(1)(a)(*i*) **within 40 business days** of receiving this response or refer the matter to a judge of the Court of Queen's Bench as per paragraph 65(1)(a) **within 40 business days** of receiving this response.

If you have any questions concerning this response, please contact Chelsea Jennings, Policy Advisor, at (506) 444-3510 or Chelsea.Jennings@gnb.ca.

Sincerely,

K. Dorothy Shephard
Minister

Minister/Ministre
Health/Santé
P.O. Box / C.P. 5100 Fredericton New Brunswick/Nouveau-Brunswick E3B 5G8 Canada

www.gnb.ca

ATIPP Request

Confirmation Code: **4LY7EX**
Submitted Date: **February 3rd 2021**

Applicant Information

First Name:	[redacted]
Last Name:	aoe
Email:	[redacted]
Daytime Phone:	[redacted]
Fax:	[Value Not Supplied]
Mailing Address:	[redacted]

Information Being Requested

Type of Request:	General Information
Government Department:	Health and Community Services
Information / Records Description:	All records and communications in the possession, custody or control of the Public Health NL, Health department, Health and Community Services, describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material(i.e monkey kidney cells, aka VERO cells, liver cancer cells). Please note that Iam using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. Iam NOT requesting records where "isolation" of SARS-COV-2 refers instead to: -the culturing of something -the performance of an amplification test(i.e a PCR test), or - the sequencing of something My request includes any sort of records , for example(but not limited to) any published peer reviewed study that Public health NL considered , downloaded or printed about the isolation of Sars-Cov2.
Requested Filetype:	pdf b y email

Newfoundland Labrador

Government of Newfoundland and Labrador
Department of Health and Community Services

February 12, 2021 COR/2021/140051

Dear Applicant:

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act, 2015 [Our File #: HCS/015/2021**]**

On February 3, 2021, the Department of Health and Community Services (the Department) received your request for access to the following records:

> "*All records and communications in the possession, custody or control of the Public Health NL, Health department, Health and Community Services, describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material(i.e monkey kidney cells, aka VERO cells, liver cancer cells). Please note that Iam using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. Iam NOT requesting records where "isolation" of SARS-COV-2 refers instead to: -the culturing of something -the performance of an amplification test(i.e a PCR test), or - the sequencing of something My request includes any sort of records , for example(but not limited to) any published peer reviewed study that Public health NL considered , downloaded or printed about the isolation of Sars-Cov2.*"

Please be advised that the Department does not have records responsive to your request.

The *Access to Information and Protection of Privacy Act*, *2015* (the "Act") requires us to provide an advisory response within 10 days of receiving the request. As this request has been completed prior to day 10, this letter also serves as our Advisory Response.

Please be advised that you may ask the Information and Privacy Commissioner to review the processing of your access request, as set out in section 42 of the *Act*. A request to the Commissioner must be made in writing within 15 business days of the date of this letter or within a longer period that may be allowed by the Commissioner.

The address and contact information of the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner
2 Canada Drive
P. O. Box 13004, Stn. A
St. John's, NL. A1B 3V8
Telephone: (709) 729-6309
Toll-Free: 1-877-729-6309
Facsimile: (709) 729-6500

You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive the decision of the public body, pursuant to section 52 of the *Act*.

Please be advised that responsive records will be published following a 72 hour period after the response is sent electronically to you or five business days in the case where records are mailed to you. It is the goal to have the responsive records posted to the Completed Access to Information

Requests website within one business day following the applicable period of time. Please note that requests for personal information will not be posted online. If you have any further questions, please contact the undersigned.

Sincerely,

Departmental Liaison
/Enclosures

Natural Sciences and Engineering
Research Council of Canada

350 Albert Street
Ottawa, Canada
K1A 1H5

Conseil de recherches en sciences
naturelles et en génie du Canada

350, rue Albert
Ottawa, Canada
K1A 1H5

Access to Information and Privacy
Accès à l'information et protection de renseignements personnels
Tel: 613-995-6214

PROTECTED
Your File Votre référence

Our File Notre référence
A-2020-00029

December 10, 2020

[redacted]

Dear [redacted]

This is in response to your access to information request received by our office on December 8, 2020, made pursuant to the *Access to Information Act* (the *Act*) which reads as follows:

> ***"All records describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; liver cancer cells). Please note that I am using "isolation" in the every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to: · the culturing of something, or · the performance of an amplification test (i.e. a PCR test), or · the sequencing of something. To clarify, I am requesting all such records that are in the possession, custody or control of your institution Canada (for example: downloaded to a computer, printed in hard copy, etc.). The known or estimated error rate (both false positives and false negatives), of PCR testing to test for SARS-COV-2. This can include reference to any studies The known or estimated error rate (both false positives and false negatives), of antibody testing to check for immunity to SARS-COV-2. This can include references to any studies Whether vaccine manufacturers have been indemnified (rendered legally immune from lawsuit), for any vaccines they provide related to SARS-COV-2 Whether any vaccine injury compensation plan will be established (or has been established), for people who are injured or killed by vaccines to treat SARS-COV-2"***

Please be advised that the Natural Sciences and Engineering Research Council of Canada (NSERC) does not have any records that respond to your request.

Please note that you are entitled to file a complaint with the Information Commissioner of Canada within sixty days of receipt of this response. Notice of complaint should be addressed to:

Information Commissioner of Canada
30 Victoria Street, Gatineau, QC K1A 1H3
Telephone: (613) 995-2410 (National Capital Region) 1-800-267-0441 (Toll-free)

Should you require additional information concerning your request, do not hesitate to contact me at 343-571-9689 or by email at Julie.Bourbonnais@nserc-crsng.gc.ca.

Sincerely,

Julie Bourbonnais

Digitally signed by Julie Bourbonnais
DN: cn=Julie Bourbonnais, o=NSERC, ou=Scholarships & Fellowships, email=julie.bourbonnais@nserc-crsng.gc.ca, c=CA
Date: 2020.12.10 11:32:08 -05'00'

Julie Bourbonnais
Manager, ATIP & Governance | Gestionnaire, AIPRP et gouvernance
Secretariat | Secrétariat
Natural Sciences and Engineering Research Council of Canada | Conseil de recherches en sciences naturelles et en génie du Canada

Fw: Public Health Agency of Canada Access to Information Request A-2021-000381

[redacted] Fri, Oct 8, 2021 at 4:18 PM
To: "info@fluoridefreepeel.ca" <info@fluoridefreepeel.ca>

Hello, I used Christine Massey verbiage to ask if each of the strains had been isolated.
Per below they are saying the question is wrong, that is why records do not exist.
[redacted]
As far as my request goes we will get it on letterhead again that 'no records exist'.
Thanks for the work you do.

My FOI responses I am posting here as they come due - 3 more pending Facebook
Facebook

From: [redacted]
Sent: October 6, 2021 2:55 PM
To: Smith, Christinen (HC/SC) <christinen.smith@hc-sc.gc.ca>
Subject: Re: Public Health Agency of Canada Access to Information Request A-2021-000381

Hello Christinen,
I have never submitted a FOI request to the Public Health Agency of Canada before.

Item 1. text is taken from a prior FOI that has been shared online and publicly, not mine.
Items 1-5 if no records exist per the FOI request then please provide a formal response on letterhead.
Items 6-10 if no records exist per the FOI request then please provide a formal response on letterhead.
Item 11. amend to '**Records showing the science that risk decreases while dining maskless in flight with no distancing**'

Thank you for your assistance.

From: Smith, Christinen (HC/SC) <christinen.smith@hc-sc.gc.ca>
Sent: October 6, 2021 2:09 PM
To: [redacted]
Subject: Public Health Agency of Canada Access to Information Request A-2021-000381

Good Afternoon [redacted]

We have received your Public Health Agency of Canada request for the following: **1. All records describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (ie. monkey kidney cells aka vero cells; liver cancer cells). Please note that I am using "isolation" in every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to: · the culturing of something, or · the performance of an amplification test (ie. a PCR test), or · the sequencing of something. To clarify, I am requesting all such records that are in the possession, custody, control of Health Canada// 2. Confirmation the 'Delta variant' has been isolated per item 1// 3. Confirmation the 'Lambda variant' has been isolated per item 1// 4. Confirmation the 'Mu variant' has been isolated per item 1// 5. Confirmation of any other variant that has been isolated per item 1// 6. Confirm the accuracy rate of a PCR test vs detecting false positives//**

7. Confirm a PCR test can detect the 'Delta variant' and accuracy rate// 8. Confirm a PCR test can detect the 'Lambda variant' and accuracy rate// 9. Confirm a PCR test can detect the 'Mu variant' and accuracy rate// 10. Confirm any other variants the PCR test detects and accuracy rate// 11. The science for maskless dining on airplanes with no distancing, that risk decreases while dining maskless in flight//.

We have already processed part one of your request in the past. The request resulted in a "No Records Exist", because of the way the request was formulated. The isolation of the virus is not completed without the use of another medium, therefore we have no records that would show this process taking place. It is important to understand the following: The gold standard assay used to determine the presence of intact virus in patient samples is viral isolation in cell culture. With this assay, if virus is present in the patient sample, it will multiply and produce visible cytopathic effects, which means that infected cells demonstrate visible changes. Additionally, the detection of an increase in the genetic viral material by PCR further confirms that intact virus is present in the patient sample, since increasing viral genetic material necessitates replication of the viral within the cell culture. This technique was successfully used to confirm that intact SARS-COV-2 was present in Canadian patient samples as evidenced in the material provided. In the case of SARS-COV-2 isolation, Vero cells combined with minimal essential medium (MEM) were used because they are essential to support viral replication and cell growth. This combination supports the growth of other coronavirus types and was successful in the case of SARS-CoV-2 as well.

This means parts 1-5 of your request will not have records. Additionally for questions 6-10, I have spoken to the subject matter expert and they have advised that although they may not have records, they can give you a fulsome explanation if you submit your questions at the following link: https://health.canada.ca/en/public-health/corporate/contact-us.html . You have to select a category of question before the text box will actually appear.

Due to the above information, I would like to suggest we change your request to: **Records showing the science that risk decreases while dining maskless in flight with no distancing.** I do require your approval before proceeding. Please provide your concurrence via email and if you have any questions or concerns about any of the above, feel free to contact me.

Thank you and have a nice day.

Christine Smith
(she | elle)

Team Leader, Access to Information and Privacy
Health Canada and the Public Health Agency of Canada / Government of Canada
christinen.smith@hc-sc.gc.ca / Tel: 613-862-6063

Chef d'équipe, Accès à l'information et protection des renseignements personnels
Santé Canada et Agence de la santé publique du Canada / Gouvernement du Canada
christinen.smith@hc-sc.gc.ca / Tél: 613-862-6063

Fw: Public Health Agency of Canada Access to Information Request A-2021-000381

Christine Massey <cmssyc@gmail.com> Wed, Oct 20, 2021 at 5:11 PM
To: [redacted]

Thank you [redacted]his is great,

She told you "*The isolation of the virus is not completed without the use of another medium, therefore we have no records*" but your request only ruled out the addition of **genetic** material, not **any** medium. So as usual, they make no sense.

Did they get back to you with a formal letter yet? If not, shall I go ahead and release this?

Thanks again,
Cheers
Christine
[Quoted text hidden]

Fw: Public Health Agency of Canada Access to Information Request A-2021-000381

[redacted] Wed, Oct 20, 2021 at 5:44 PM

To: Christine Massey <cmssyc@gmail.com>

HI Christine,
I am waiting for their formal response on letterhead and can forward.
If you are sharing I would like my name and email address removed and not made public.
I will forward response once I receive.
I have other FOI in the link I provided where City of Toronto can not backup any of their claims (98.7% patients unvax).
Thanks

Fw: Public Health Agency of Canada Access to Information Request A-2021-000381

[redacted] Thu, Oct 21, 2021 at 4:43 PM
To: Christine Massey <cmssyc@gmail.com>

Response came back.
Lots of mumbo jumbo that your initial question wording is wrong.
However I have the email trail no records were yielded to isolation of any strain, nor can PCR detect any strain.
I blanked personal details if you want to use and it is posted in my FB album now
Thanks.

From: Christine Massey <cmssyc@gmail.com>
Sent: October 20, 2021 6:40 PM
[Quoted text hidden]

[Quoted text hidden]

FOI HC Isolation and PCR.jpg
641K

Public Health Agency of Canada / Agence de la santé publique du Canada
Access to Information and Privacy Division
7th Floor, Suite 700, Holland Cross - Tower B
1600 Scott Street, (Mail Stop: 3107A)
Ottawa, Ontario K1A 0K9

Our file: PHAC-A-2021-000381 / CS

3
Toronto, Ontario
M

Dear

This is in response to your request made under the *Access to Information Act* (the Act) for the following information:

1. All records describing the isolation of a SARS-COV-2 virus, directly from a sample taken from a diseased patient, where the patient sample was not first combined with any other source of genetic material (ie. monkey kidney cells aka vero cells; liver cancer cells). Please note that I am using "isolation" in every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COV-2" refers instead to: · the culturing of something, or · the performance of an amplification test (ie. a PCR test), or · the sequencing of something. To clarify, I am requesting all such records that are in the possession, custody, control of Health Canada// 2. Confirmation the 'Delta variant' has been isolated per item 1// 3. Confirmation the 'Lambda variant' has been isolated per item 1// 4. Confirmation the 'Mu variant' has been isolated per item 1// 5. Confirmation of any other variant that has been isolated per item 1// 6. Confirm the accuracy rate of a PCR test vs detecting false positives// 7. Confirm a PCR test can detect the 'Delta variant' and accuracy rate// 8. Confirm a PCR test can detect the 'Lambda variant' and accuracy rate// 9. Confirm a PCR test can detect the 'Mu variant' and accuracy rate// 10. Confirm any other variants the PCR test detects and accuracy rate// 11. Records showing the science that risk decreases while dining maskless in flight with no distancing'

Having completed a thorough search, we regret to inform you that we were unable to locate any records responsive to your request. Additional information for parts one to five is as follows: The isolation of the virus is not completed without the use of another medium, therefore we have no records that would show this process taking place. It is important to understand the following: The gold standard assay used to determine the presence of intact virus in patient samples is viral isolation in cell culture. With this assay, if virus is present in the patient sample, it will multiply and produce visible cytopathic effects, which means that infected cells demonstrate visible changes. Additionally, the detection of an increase in the genetic viral material by PCR further

Canada

.../2

Access to Information Request PHAC-A-2021-000381

Smith, Christinen (HC/SC) <christinen.smith@hc-sc.gc.ca>
Thu 2021-10-21 1:25 PM
To: You

Good Afternoon:

We are not obligated to provide a separate response for each item on your list. You submitted your list as a single ATIA request, and we have searched for each item in that list. If your intention was to treat them all as separate requests, you would have been required to submit a separate request for each item, and pay a $5 application fee for each request. As part of our duty to assist, and in order to save you from submitting and paying for all separate requests, we allowed for the submission of your list to be treated as a single request. Our response to your request is clear in that it captures every item you have listed, with our response as to whether or not any records were located on anything within the full scope of your request. I can confirm that a fulsome search would have been completed for every item in the list, regardless if they differ in subject.

Christine Smith
(she | elle)

Team Leader, Access to Information and Privacy
Health Canada and the Public Health Agency of Canada / Government of Canada
christinen.smith@hc-sc.gc.ca / Tel: 613-862-6063

Access to Information Request PHAC-A-2021-000381

Smith, Christinen (HC/SC) <christinen.smith@hc-sc.gc.ca>
Thu 2021-10-21 10:30 AM
To: You

Good Morning:

The letter does cite that it is a nil response to all points in your request. I added additional detail as to why 1-5 were nil so you would have the scientific reason as to why. Numbers 6-11 also did not yield any documentation so it is also a nil.

The letter is correct as is.

Christine

Fw: Public Health Agency of Canada Access to Information Request A-2021-000381

This means parts 1-5 of your request will not have records. Additionally for questions 6-10, I have spoken to the subject matter expert and they have advised that although they may not have records, they can give you a fulsome explanation if you submit your questions at the following link: https://health.canada.ca/en/public-health/corporate/contact-us.html . You have to select a category of question before the text box will actually appear.

Due to the above information, I would like to suggest we change your request to: **Records showing the science that risk decreases while dining maskless in flight with no distancing.** I do require your approval before proceeding. Please provide your concurrence via email and if you have any questions or concerns about any of the above, feel free to contact me.

Thank you and have a nice day.

Christine Smith
(she | elle)

Team Leader, Access to Information and Privacy
Health Canada and the Public Health Agency of Canada / Government of Canada
christinen.smith@hc-sc.gc.ca / Tel: 613-862-6063

Chef d'équipe, Accès à l'information et protection des renseignements personnels
Santé Canada et Agence de la santé publique du Canada / Gouvernement du Canada
christinen.smith@hc-sc.gc.ca / Tél: 613-862-6063

December 31, 2020

To: Vancouver Coastal Health Authority - **Email: foi@vch.ca**
VCH Freedom of Information Office
11th Floor, 601 West Broadway,
Vancouver, BC
V5Z 4C2

Dear Access to Information Clerk,

This is a formal request made under

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

[RSBC 1996] CHAPTER 165

Description of Requested Records:

All records in the possession, custody or control of Vancouver Coastal Health Authority that:

1. describe the isolation of the [alleged] *genetic variant of the* [alleged] *virus that* [allegedly] *causes* [the alleged disease referred to as] *COVID-19* [allegedly] *identified in the United Kingdom,* directly from a sample taken from a diseased patient, where the patient sample was **not** first combined with any other source of genetic material (i.e. monkey kidney cells aka vero cells; fetal bovine serum).

   Please note that I am using "isolation" in the every-day sense of the word: *the act of separating a thing(s) from everything else*. I am **not** requesting records where "isolation" refers instead to:

   - the culturing of something, or
   - the performance of an amplification test (i.e. a PCR test), or
   - the sequencing of something.

1. describe the **discovery** (**not manufacture / fabrication / creation / assembly / alignment / trimming / mapping**) of the alleged genome for this alleged particular *new variant of coronavirus*;

2. describe how this alleged *new variant of coronavirus* relates to the alleged "SARS-COV-2";

3. include **any** additional analysis/investigation into this alleged "*new variant*".

Please note that my request **is not** limited to records that were authored by agents of

Vancouver Coastal Health Authority, or to records that pertain to work done by agents of the Vancouver Coastal Health Authority; it includes **any** sort of record, authored by anyone, anywhere, ever.

If any records match the above descriptions of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each record with certainty (i.e. author; title; date; publisher); please provide URLs where possible.

Format:

URLs and/or pdf documents sent to me via email; I do not wish for anything to be shipped to me.

Contact Information:
Last Name: [redacted]
First Name: [redacted]

Email: [redacted]

Happy New Year

Vancouver Coastal Health
Promoting wellness. Ensuring care.

LEGAL SERVICES
11TH FLOOR, 601 WEST BROADWAY
VANCOUVER, BC V5Z 4C2
TEL: 604-875-4859
FAX: 604-875-4593

March 4, 2021

Dear [redacted]

Re: BC *Freedom of Information and Protection of Privacy Act* (the "Act")
Freedom of Information Request: VCH File No. 2020-F-183

We are writing in response to your request dated December 31, 2020.

We have not been able to find any records that are responsive to your request.

You may request a review of VCH's response within 30 working days of receiving this email by writing to the following address:

Office of the Information and Privacy Commissioner for British Columbia
PO Box 9038, Stn. Prov. Govt.
Victoria, BC V8W 9A4
Telephone: (250) 387-5629
Fax: (250) 387-1696

If you choose to request a review by the Office of the Information and Privacy Commissioner, you should include with your request:

1. a copy of your original request for records; and
2. a copy of this response.

For your reference, a copy of FIPPA can be found online:
www.bclaws.ca/Recon/document/ID/freeside/96165_00

Yours truly,

Melissa Donnett
Coordinator, Freedom of Information
Vancouver Coastal Health Authority

Gmail Christine Massey <cmssyc@gmail.com>

Fw: Health Canada Access to Information request A-2021-000719

Michel Ethier <treeoflifemission@yahoo.ca> Wed, Nov 10, 2021 at 4:08 PM
To: "christinem@fluoridefreepeel.ca" <christinem@fluoridefreepeel.ca>

Hello here sister

Iamm providing you with a copy of a document from Hellth Canada, which I received today.

The document is a response to a request that I have made pursuant to the Freedom of Information Act in regards Covid19 being isolated.

It is a tad different to the response which you received from Hellth Canada for a simitar request.

I hope that you can add this to the responses that you have from other health institutions.

I do have a few other places in mind, in my locsl area to make similar requests. Once I get a response, I will provide you with the details.

Thank you Glad to have you on our side.

Blessed be.

Michel D. Ethier

----- Forwarded Message -----
From: Smith, Christinen (HC/SC) <christinen.smith@hc-sc.gc.ca>
To: treeoflifemission@yahoo.ca <treeoflifemission@yahoo.ca>
Sent: Wednesday, November 10, 2021, 12:01:45 p.m. EST
Subject: Health Canada Access to Information request A-2021-000719

Good Morning Michel D. Ethier:

Please find attached the final response to your Access to Information request for the following: **I wish to receive the following information from your office:**

a) All records describing the isolation of a SARS-Covid-2 virus, directly from a sample taken from a diseased patient, where the sample was not first combined with any other source of genetic material (i.e. monkey kidney cells, aka vero cells; liver cancer cells).

b) Please note that I am using "isolations" in an every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COVID-2" instead refers to:

- The culturing of something, or

- The performance of an amplification test (i.e. a PCR test), or The sequencing of something.

c) To clarify, I am requesting all such records that ae in the possession, custody or control of Health Canada (for example: downloaded to a computer, printed in a hard copy, etc.).

This completes the processing of your request.

Thank you and have a nice day

Christine Smith

(she | elle)

Team Leader, Access to Information and Privacy
Health Canada and the Public Health Agency of Canada / Government of Canada
christinen.smith@hc-sc.gc.ca / Tel: 613-862-6063

Chef d’équipe, Accès à l'information et protection des renseignements personnels

Santé Canada et Agence de la santé publique du Canada / Gouvernement du Canada
christinen.smith@hc-sc.gc.ca / Tél: 613-862-6063

Final Response - A-2021-000719 - 2021-11-10.pdf
228K

Health Canada Santé Canada
Access to Information and Privacy Division
7th Floor, Suite 700, Holland Cross - Tower B
1600 Scott Street, (Mail Stop: 3107A)
Ottawa, Ontario K1A 0K9

Our file: A-2021-000719 / CS

Michel D. Ethier
Tree of Life Mission
201A - 65 Queen Street
Box 5149
Sturgeon Falls, Ontario
P2B 2C7

Dear Michel D. Ethier:

This is in response to your request made under the *Access to Information Act* (the Act) for the following information:

I wish to receive the following information from your office:
a) All records describing the isolation of a SARS-Covid-2 virus, directly from a sample taken from a diseased patient, where the sample was not first combined with any other source of genetic material (i.e. monkey kidney cells, aka vero cells; liver cancer cells).
b) Please note that I am using "isolations" in an every-day sense of the word: the act of separating a thing(s) from everything else. I am not requesting records where "isolation of SARS-COVID-2" instead refers to:
- The culturing of something, or
- The performance of an amplification test (i.e. a PCR test), or The sequencing of something.
c) To clarify, I am requesting all such records that ae in the possession, custody or control of Health Canada (for example: downloaded to a computer, printed in a hard copy, etc.).

Having completed a thorough search, we regret to inform you that we were unable to locate any records responsive to your request. A search of emails, electronic databases and files as well as hard copy materials uncovered no documentation describing the isolation of SARS-COV-2 viruses from patient derived samples. Health Canada's role is not to do pure scientific research and discovery, it is to review evidence provided by sponsors in order to make regulatory decisions to approve products and authorize clinical trials. In addition, Health Canada does not work directly with patient samples or SARS-COV-2 virus as this would require Level 3 containment facilities which are not housed at Health Canada.

Additionally, when the request for the same information went to the Public Health Agency of Canada, the following explanation was given as to why it resulted in no

records: The request has resulted in a "No Records Exist", because of the way the request was formulated. The isolation of the virus is not completed without the use of another medium, therefore we have no records that would show this process taking place. It is important to understand the following: The gold standard assay used to determine the presence of intact virus in patient samples is viral isolation in cell culture. With this assay, if virus is present in the patient sample, it will multiply and produce visible cytopathic effects, which means that infected cells demonstrate visible changes. Additionally, the detection of an increase in the genetic viral material by PCR further confirms that intact virus is present in the patient sample, since increasing viral genetic material necessitates replication of the viral within the cell culture. This technique was
successfully used to confirm that intact SARS-COV-2 was present in Canadian patient samples as evidenced in the material provided. In the case of SARS-COV-2 isolation, Vero cells combined with minimal essential medium (MEM) were used because they are essential to support viral replication and cell growth. This combination supports the growth of other coronavirus types and was successful in the case of SARS-CoV-2 as well

Should you have any questions or concerns about the processing of your request, please do not hesitate to contact Christine N. Smith, the analyst responsible for this file, either by phone at 613-862-6063, by email at christinen.smith@hc-sc.gc.ca, with reference to our file number cited above.

Please be advised that you are entitled to complain to the Office of the Information Commissioner of Canada concerning the processing of your request within 60 days of the receipt of this notice. In the event you decide to avail yourself of this right, your notice of complaint can be made online at: https://www.oic-ci.gc.ca/en/submitting-complaint or by mail to:

Office of the Information Commissioner of Canada
30 Victoria Street
Gatineau, Quebec K1A 1H3

Yours sincerely,

Smith, Christine N

Digitally signed by Smith, Christine N
DN: C=CA, O=GC, OU=HC-SC, CN="Smith, Christine N"
Reason: I am the author of this document
Location: your signing location here
Date: 2021.11.10 11:54:35-05'00'
Foxit PDF Editor Version: 11.0.1

Christine Smith
Team Leader, Access to Information and Privacy

Re: Final Decision - FOI Sensitive Request # A-2021-00236 / CG (COVID-19 Records)

[redacted] Wed, Nov 3, 2021 at 3:34 PM
To: "Gapski, Chris (MOH)" <Chris.Gapski@ontario.ca>
Cc: "Babos, John (MOH)" <John.Babos@ontario.ca>, "Gartshore, Jason (MOH)" <Jason.Gartshore@ontario.ca>

Hello, can I have this response on formal letterhead sent by pdf, not an email response.
Thank you.

From: Gapski, Chris (MOH) <Chris.Gapski@ontario.ca>
Sent: November 3, 2021 3:23 PM
To: [redacted]
Cc: Babos, John (MOH) <John.Babos@ontario.ca>; Gartshore, Jason (MOH) <Jason.Gartshore@ontario.ca>
Subject: Final Decision - FOI Sensitive Request # A-2021-00236 / CG (COVID-19 Records)

Dear [redacted]

I am replying to your access request made under the *Freedom of Information and Protection of Privacy Act* (*the Act*), for the following information:

> 1. Breakdown by month of the number of hospitalized Covid patients that had; 0 doses of vaccine; 1 dose of vaccine; 2 doses of vaccine // 2. Breakdown by month of the number of Covid deaths that had : 0 doses of vaccine; 1 dose of vaccine; 2 doses of vaccine // 3. Breakdown by month of the PCR cycle rate used to test : unvaccinated persons; persons with 1 dose of vaccine; persons with 2 doses of vaccine // 4. Total number of patients by month admitted to Sunnybrook and McMaster field hospitals // 5. Scientific evidence there is no risk to eating maskless in a restaurant vs the risk and need to wear a mask walking to the table or using the restaurant washroom // 6. Scientific evidence of benefits of eating donuts to boosting immunity against covid // 7. Scientific evidence that movie shoots are an 'essential service' vs cancer screenings or surgeries // 8. Scientific evidence the Delta strain has been isolated and a PCR test can distinguish the Delta variant from other
>
> Time Period: 2021/03/01 to 2021/07/31
>
> Clarified Request:
>
> 5. Scientific evidence there is no risk to eating maskless in a restaurant vs the risk and need to wear a mask walking to the table or using the restaurant washroom
> 6. Scientific evidence of benefits of eating donuts to boosting immunity against covid
> 7. Scientific evidence that movie shoots are an 'essential service' vs cancer screenings or surgeries
> 8. Scientific evidence the Delta strain has been isolated and a PCR test can distinguish the Delta variant from other
> strains of Covid 19
>
> Time Period: 2021/03/01 to 2021/07/31

Per your email, subsequent to the submission of your request above, a search was conducted for all items (1-8) in your request, not just the clarified items (5-8). However, this is to inform you that

no responsive records were located. A reasonable search of the Office of the Chief Medical Officer of Health/Public Health Division was conducted and no responsive records were found. Dr. Kieran Moore, Chief Medical Officer of Health, Office of the Chief Medical Officer of Health/Public Health Division is responsible for this decision.

The cost for the search in accordance to Regulation 460 are minimal and have been waived under section 57(4) of *the Act*.

However, although the ministry does not maintain records responsive to the specific questions posed in your request, the links provided below provide information that may contribute to answering some of your questions:

- As you're likely aware, the Roadmap to Reopen was the province's three-step plan to lift the public health measures and restrictions related to the COVID-19 pandemic safely and gradually. This roadmap, along with the documents linked within the roadmap, including the Regulation 364/20: RULES FOR AREAS AT STEP 3 AND AT THE ROADMAP EXIT STEP, provide insight into factors/data points that the government considered/monitored in imposing and now lifting COVID-19 restrictions.
- With respect to question 5 in your request, regarding masks, the About COVID-19 non-medical masks document from Public Health Agency of Canada and Public Health Ontario's COVID-19: Non-medical Masks and Face Coverings document, along with the further resources linked within those documents, provide information on why masks are recommended/mandated by Public Health organizations throughout Canada and how masks contribute to preventing the spread of COVID-19.
- With respect to question 7 in your request, Directive 5, as well as the associated memo from Ontario Health to Hospital CEOs, provides authority under the *Health Protection and Promotion Act* to ramp down scheduled surgeries in order to free up bed capacity and enable to redeployment of staff, and the Directive itself, and documents linked within the Directive, provide some of the rationale for this "ramp down."
- Per questions 3 and 8 in your request, the Ministry does not directly conduct laboratory research and therefore, does not have original microscopic images of viral isolates, but you can find more information about how PCR tests are administered in Ontario and throughout Canada at the following links:
    - Coronavirus Disease 2019 (COVID-19) – PCR – information on PCR testing in Ontario from Public Health Ontario.
    - COVID-19 testing, screening and contact tracing – information on PCR testing throughout Canada from the Public Health Agency of Canada.
- Finally, with regard to question 8 in your request, more information on tracking variants of concern, including the Delta variant, in Ontario and throughout Canada, can be found at the following links:
    - SARS-CoV-2 (COVID-19 Virus) Variant of Concern (VoC) Surveillance – information on variants of concern in Ontario from Public Health Ontario.
    - SARS-CoV-2 variants: National definitions, classifications and public health actions – information on variants of concern throughout Canada from the Public Health Agency of Canada.

Additionally, you may wish to contact Public Health Ontario as they may have records responsive to your request. They may be reached at:

Privacy Officer
Public Health Ontario
661 University Avenue, Suite 1701
Toronto, ON M5G 1M1

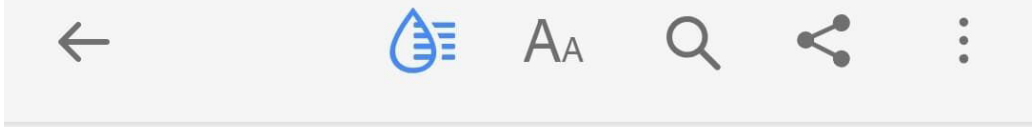
You may request a review of this decision by the Information and Privacy Commissioner 2 Bloor Street East, Suite 1400, Toronto ON M4W 1A8. Please note that you have 30 days from the date of this letter to request a review. In the event that you do seek a review, please provide the Commissioner's Office with:

1. The request file number: A-2021-00236 / CG
2. A copy of this decision letter.
3. A copy of your original request.
4. A cheque or money order in the amount of $25.00 payable to the Minister of Finance.

If you have any questions, please contact me at chris.gapski@ontario.ca or 416-568-0173.

Sincerely,

Chris Gapski
Consultant, Access & Privacy



simcoe muskoka
DISTRICT HEALTH UNIT

June 17, 2022

Jessica Clark
[redacted]

Dear Jessica Clark:

RE: Your Access Request dated June 7, 2022
-Our File FOI 22-24

This is further to your access request under the Municipal Freedom of Information and Protection of Privacy Act (the "Act") dated June 7, 2022, requesting the following:

"All studies and/or reports in the possession, custody, or control of Simcoe Muskoka Health Unit describing the purification of any "SARS COV 2" aka "COVID 19 virus" (including any variants") (via maceration, filtration, and/or of an ultracentrifuge, also referred to as as "isolation") directly from a sample taken from a diseased human, where the patient

Records related to COVID-19 testing as you requested are not in the custody or control of the Simcoe Muskoka District Health Unit. Your request can be directed to:

Ministry of Health
438 University Avenue
Toronto, ON M5G 2K8
416-327-4327
Website:
https://www.ontario.ca/page/ministry-health

Public Health Ontario
Privacy Officer
Public Health Ontario
661 University Avenue, Suite 1701
Toronto, ON M5G 1M1
Website: https://www.publichealthontario.ca/

We believe this satisfies your request. Please refer to our file FOI 22-24 on any future correspondence on this issue.

Sincerely

Jessica Clark Jun. 17

Good afternoon Susan, It appears my requests have been misunderstood. I

R

Riewe, Natalie 2:09 p.m.

to me, Munroe

Hi Jessica

Susan forwarded your email to me for response. In regards to your request for records related to "showing proof of isolation or purification of these two alleged viruses from a lab, scientific paper, etc", our response is that such records are not in the custody or control of the Simcoe Muskoka District Health Unit. Our recommendation would be to inquire with the Ministry of Health of Ontario and Public Health Ontario and Health Canada to seek information regarding these specific laboratory methodologies.

Sincerely,

Natalie