

Why are there no diagnosis codes for vaccine injuries after covid-19 vaccines?

by *Jeanne Rungby, medical specialist, in collaboration with Active Citizens and Dissens Media, 11. Dec. 2022, LINK*

In Denmark, everyone has the right to equal examination and treatment in the Danish healthcare system. The political parties sing the praises of equality in health. But this does not apply to people with injuries after the covid-19 vaccines. The silence is loud.

There is no diagnostic code for injuries after these so-called vaccines. It is a requirement that a diagnosis code be applied. Whether it is a code for a normal examination, every medical record must be completed with a code. Without the code, no money for the department.

WHO has control over - and has introduced the ICD10 diagnostic coding system internationally long before Covid and the vaccines.

There are 9 diagnosis codes related to Covid-19, but no codes for keywords such as "post vaccine syndrome", "Covid-19 vaccine" or "Sequelae vaccine". Doctors will therefore have to apply other diagnosis codes after an examination, even if there is an obvious link with the vaccines. These diagnoses may well be a consequence of the vaccines. Heart disease, hypertension, chronic fatigue syndrome, menstrual disorders, miscarriages, diabetes, chest pain, pulmonary hypertension, lymphatic cancer, heart rhythm disorders and more.

If politicians are serious about equality in health for all, why can't patients with injuries after Covid-19 vaccines be diagnosed on an equal footing with other patients e.g. with long covid?

If vaccine injuries are not acknowledged, then nothing is done - or taxpayers' money is allocated - to investigate and treat injuries, focusing on the particular side effects caused by these so-called vaccines. It might well be that early treatment would turn out to be crucial for the life and health of the individual. Instead, injuries are swept under the carpet.

The health authorities have not issued information to doctors on which adverse reactions have been recorded via reports and how they should be diagnosed or treated. They have just quietly restricted the vaccines to the over 50 age group. I wonder why?

None of the Danish public or private pathology departments have set up the immunohistochemistry staining method for the detection of the vaccine spike protein in tissue samples and blood smears. According to German pathologist Dr Arne Burkhardt, this is a standard method that any laboratory can set up.

When these studies are not performed, vaccine injury following the mRNA vaccines cannot be proven. They remain suspicions - and can thus be dismissed as injuries - by the National Board for Patient Complaints.

It is a gross failure of those who have pulled the plug to show public concern and have subsequently been injured or died. In particular, there is a marked arrogance towards the relatives who have lost their child or close relative when the cause of death is not adequately investigated through autopsy and immunohistochemical staining of the tissue.

Vaccine victims are passed from speciality to speciality without doctors being able to detect that the condition is due to the vaccine.

It can be done much better:

Article at Vaccinationsforum: "Vaccineskader kan påvises", LINK

Report on side effects after covid-19 vaccines, LINK



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