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18 May 2021

Via FedEx Airbill [773760891186](#)

Dr. Harvey Risch, MD, PhD  
Yale University  
60 College Street  
New Haven, CT, US, 06510  
203-785-2848

**Subject: Your Resignation From Yale University**  
**Reference 1: Descent of Mr. Peter Salovey into Abject Criminality**  
**Reference 2: My 12 April 2021 Letter to the Ivy League Law School Deans**

Dear Dr. Risch:

We hold you in the highest regard. You are deeply competent in your profession, you are intrinsically ethical; you are implicitly connected to words and deeds that sustain and improve the human condition.

In stark contrast, Mr. Peter Salovey has demonstrated the exact opposite, posing an immediate and intolerable threat to human beings worldwide. According to Salovey the following photograph provides no historical precedence, no moral guidance, no legal validity; indeed Salovey apparently deems it irrelevant:



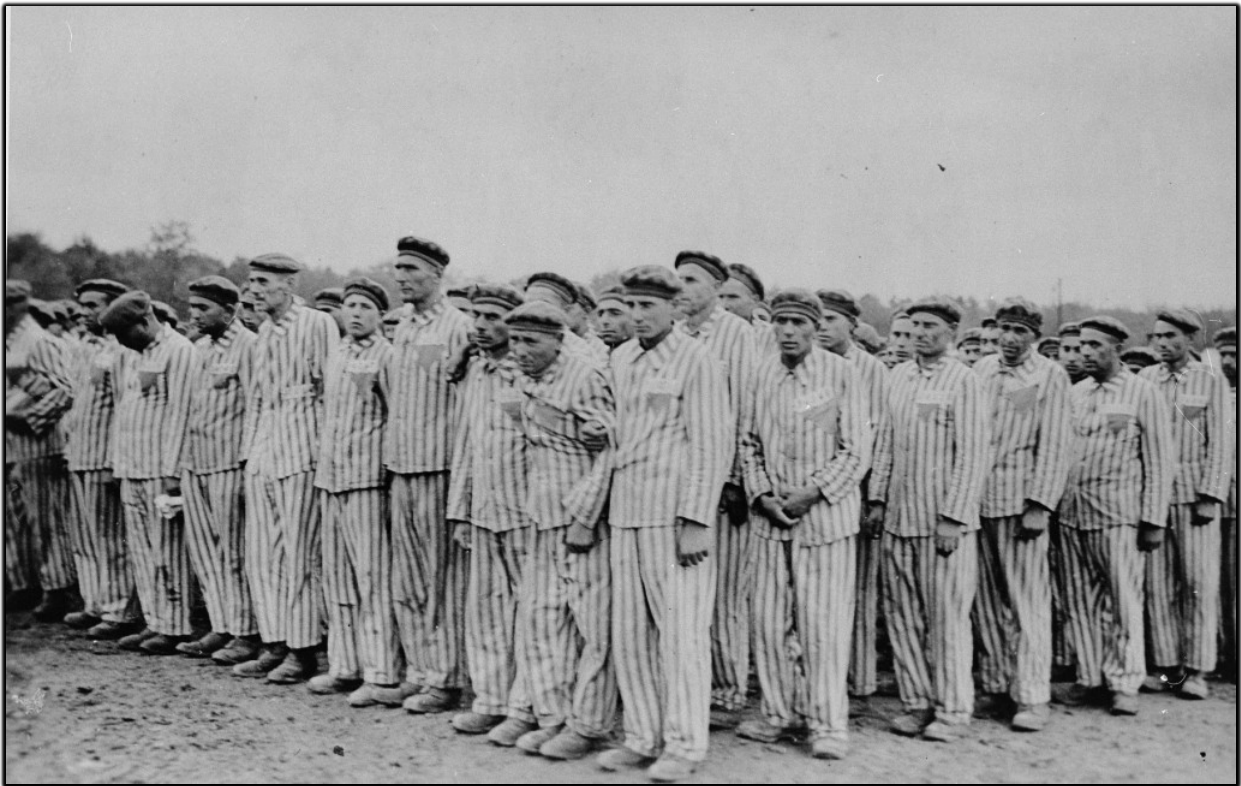
### Resignation Criteria – Part 1: The Nuremberg Code

In your interview of 8 March 2021, with [Dr. Jay Bhattacharya of Stanford University](#), on The Ingraham Angle; in response to Laura’s questioning of mandatory vaccination of school children, you stated:

*“Well...this is unconscionable. The State has no interest in vaccinating people that does not reduce the transmissibility very much. Because the only interest in the State, is protecting people who are unexposed, that get exposed to other people. If vaccination does not reduce that very much, then the State has no interest. It cannot mandate a behavior that is an **experiment** on humans; **it violates the Nuremberg Code**. In order to do **experiments** on people that have no interest in the State in the first place.”*

My letter of 12 April 2021 to Mr. Anthony Fauci was forwarded in hard-copy to the Ivy League Law School Deans. I dedicated **ten full pages** to the following title:

*COVID-19 “Vaccines,” the Nuremberg Code and the Impossibility of ‘Informed Consent’*



The complete Fox News interview: <http://pvsheridan.com/Harvey-Nuremberg.m4v>

The 12 April 2021 letter: <http://pvsheridan.com/sheridan2fauci-3-12april2021.pdf>

SPODs for Law School Deans: [http://pvsheridan.com/SPODs-Ivy\\_League\\_Law-1.pdf](http://pvsheridan.com/SPODs-Ivy_League_Law-1.pdf)

**Resignation Criteria – Part 2: The Insidious Ploy vs. the Avoidable Deaths in the Nursing Homes**

In my 12 April 2021 letter, forwarded to the Law School Deans, I declared that Mr. Fauci was connectable-to the deaths of tens-of-thousands in the nursing homes:

12 April 2021

VIA FEDEX AIRBILL [773420981392](#)

Dr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20852  
301-496-2263 / [anthony.fauci@nih.gov](mailto:anthony.fauci@nih.gov)

**Subject 1:** Sworn Testimony of Dr. Anthony Fauci, Litigation Involving Nuremberg Code  
**Subject 2:** Connections of Dr. Anthony Fauci to the Nursing Homes Deaths  
**Reference 1:** My Letter to You of 21 July 2020  
**Reference 2:** My Letter to You of 21 December 2020  
**Reference 3:** My Letter to the Presidents of the Ivy League of 6 March 2021

[Reference 3](#), which I had forwarded to you discusses the Nuremberg Code in three locations. Subject 2 took eleven pages; you are prominently quoted in that section.

The screenshot shows the AARP website interface. At the top, there is a red navigation bar with the AARP logo, a 'MENU' button, and links for 'Join', 'Renew', 'Help', 'Member Benefits', 'AARP Rewards', 'Register', and 'Login'. Below the navigation bar, the page is categorized under 'FAMILY CAREGIVING' and 'Medical'. A horizontal menu lists various topics: 'Basics', 'Care at Home', 'Nursing Homes', 'Medical', 'Financial & Legal', 'Life Balance', 'Community', 'Local Resources & Solutions', and 'Stories'. The main content area features a large article title: 'Four Months That Left 54,000 Dead From COVID in Long-Term Care'. To the left of the title are social media sharing icons for Facebook, Twitter, LinkedIn, Email, and Print. Below the title, the subtitle reads 'The oral history of an American tragedy'. The author information is 'by David Hochman, AARP, December 3, 2020 | Comments: 4'. At the bottom left of the article area, there is a link for 'En español'.

Contrary to The Great Reset, and its parroting by Ivy League University presidents, the “key” issue has *never* been profitable, expensive, dangerous “vaccinations.” The key issue remains the Hippocratic Oath. And *then* the safety & well-being of global patients. In the context of Fauci’s “surprise outbreak,” the long-term well-being of patients prioritizes health through immunization; **especially when attained through the natural immune system response** . . . which is known to result in the long if not the permanent term.

Fauci and Salovey are both liars; they proclaim that immunization/health can only be attained through experimental vectored or mRNA injections. This is not merely farcical; **it is insidious with respect to the COVID-19 deaths, especially connectable to the deaths in the nursing homes. This is not where these connections end; upon scrutiny this is merely a viable, if not obvious legal beginning.**

By **coercing** “vaccination” of the Ivy League and the public, the Fauci/Salovey cabal is **insidiously and coyly** declaring that the deaths in the nursing homes were *unavoidable*?! Unavoidable because there were no then-existing outpatient treatments that could have saved those lives; known treatments that could mitigate the short term but deadly COVID-19 symptoms, until the natural immune system could respond and provide natural immunity. Salovey’s recent promotion, “*vaccine coverage is critical*,” affirms his ongoing connectivity to this nursing home death history.

The ‘unavoidable’ lies are endemic to this entire criminal enterprise. One could easily interpret that the following **crap** was written by Pfizer’s public relations and marketing staff:

3. There is no adequate, approved, and available alternative to the emergency use of Pfizer-BioNTech COVID-19 Vaccine to prevent COVID-19.<sup>4</sup>

Perhaps it was . . . but officially this sputum comes from Dr. Denise Hinton of the FDA!

Returning to the nursing homes . . . the Fauci/Salovey sputum ostensibly declares that the December 2020 ‘Emergency Use Authorization’ of the Pfizer/Moderna “vaccines” was too late to save prior loss of human life. **You, of all people, know that to be criminal fraud.**



The insidious part of the Salovey **coercion** provides Fauci with legalistic momentum; Salovey is declaring that the only way to health, versus Fauci’s “surprise outbreak,” is by forced injection of the experimental “vaccines.” It should be obvious that the Fauci/Salovey cabal is angling for *legal* immunity. But that is just one of their insidious lies. It is doubtful that Mr. Salovey will detail for Yale University how Big Pharma attained ‘liability immunity’ . . . an immunity that does not obviate the portent of the Nuremberg Code.

**Resignation Conclusion: The above and much more, constitutes at a minimum, ‘crimes against humanity’ that the good Dr. Harvey Risch cannot remain party to.**

## The Resignation of Dr. Harvey Risch from Yale University – Post Script

A screenshot from the VAERS webpage of the Centers for Disease Control (CDC):

### How VAERS reports are reviewed

Vaccine safety experts review all reports of serious adverse events submitted to VAERS. A serious adverse event after vaccination is something that causes

- Permanent disability
- Hospitalization or an extended hospital stay (if vaccinated while in the hospital)
- Life-threatening illness
- Birth defects (congenital anomalies)
- Death

When VAERS staff members investigate a report of a serious adverse event, they ask for the patient's medical records related to the serious adverse event to learn more about what happened. They review these medical records and determine whether the vaccine caused the reported serious adverse event.

Perhaps your current employer, Yale President Mr. Peter Salovey, will offer the basic courtesy of explaining to the staff/students why the 'adverse event' connected to attorney [Ms. Midwin Charles](#), a woman in the prime of her life, **was never reported to VAERS**:



### Recommendations

1. When your mutual schedules permit, in the context of ["shedding."](#) I recommend that you tutor/update Mr. Salovey on the upcoming need to quarantine the "vaccinated."
2. In view of your long-established humanity and professional competence, I recommend that you consider filling an ***anticipated*** high-level opening at the National Institutes of Health.

Please feel free to contact me at any time.

Respectfully yours,

Paul V. Sheridan

Enclosure/Attachment

cc: [Mr. Peter Salovey](#) ( via FedEx AirBill [773760988859](#) )

# Office of the President

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HOME > FROM THE PRESIDENT > STATEMENTS > [REQUIRING FACULTY, STAFF, AND TRAINEES TO BE VACCINATED AGAINST COVID-19](#)

## Requiring faculty, staff, and trainees to be vaccinated against COVID-19

**Date:** Friday, May 14, 2021

Dear Members of the Yale Community,

For more than a year, we have anticipated the day we can return fully to on-campus teaching and learning. With improving public health conditions, we are optimistic that we can do so for the fall semester. As we plan for this exciting transition back to campus, our top priority will continue to be the health and safety of students, faculty, staff, and individuals with whom we interact outside of our campus.

A high percentage of vaccine coverage is critical for a safe return to in-person university operations. Therefore, **we are requiring all faculty, staff, and postdoctoral and postgraduate trainees to be fully vaccinated against COVID-19 by August 1.** This decision follows our announcement in April of the vaccination requirement for all [undergraduate, graduate, and professional school students \(https://president.yale.edu/president/statements/requiring-students-be-vaccinated-against-covid-19\)](https://president.yale.edu/president/statements/requiring-students-be-vaccinated-against-covid-19).

Our decision is based on the recommendation of Yale's experts in public health, medicine, and nursing, as well as discussions with staff and faculty across campus. The university also is engaged in conversations with its union partners regarding the implementation of this policy.

There is abundant evidence that vaccines are the strongest tool we have for preventing the spread of COVID-19 and that they are safe. For example, we are already seeing notable reductions in infection rates as levels of vaccination have increased. As a leading global research university, we have a responsibility to demonstrate to others the importance of taking actions based on evidence.

Please review the preliminary information below about ways to be vaccinated, registration requirements, exemptions, and other considerations. In the coming days, faculty, staff, and postdoctoral and postgraduate trainees will receive additional information regarding returning to on-campus work. University leaders will continue to provide regular updates about our plans for the fall semester over the next few months.

### Ways to receive the vaccine

Vaccinations are available through the [Yale COVID-19 Vaccine Program \(https://yalehealth.yale.edu/yale-covid-19-vaccine-program\)](https://yalehealth.yale.edu/yale-covid-19-vaccine-program) and Yale Health at the Lanman Center on campus. Yale New Haven Health also is offering both [walk-in and scheduled vaccination appointments \(https://www.ynhhs.org/patient-care/covid-19/vaccine/get-your-covid-vaccine.aspx\)](https://www.ynhhs.org/patient-care/covid-19/vaccine/get-your-covid-vaccine.aspx). Many additional options are available throughout the [state \(https://portal.ct.gov/Vaccine-Portal\)](https://portal.ct.gov/Vaccine-Portal). We encourage all those who have not yet been vaccinated to do so at their earliest convenience.

## Registration requirements

Beginning June 1, 2021, faculty, staff, and postdoctoral and postgraduate trainees who have received their COVID-19 vaccination outside of the Yale COVID-19 Vaccine Program will be required to submit their vaccination record to the university. Instructions will be forthcoming.

Having records of individuals' vaccination information is essential to the university's efforts to protect the campus and surrounding communities and plan on-campus activities. Knowing the level of vaccination in the Yale community will allow us to take measures to mitigate the risks of a COVID-19 outbreak and will inform our decision-making in the fall and beyond.

## Exemptions from the vaccination requirement

Faculty, staff, and postdoctoral and postgraduate trainees may apply for exemption from the vaccination requirement for medical reasons or based on religious or other strongly held personal belief. Everyone will receive an email in the coming weeks about steps individuals will be required to undertake to request an exemption. Yale will require those who receive approved exemptions to undergo regular COVID-19 testing and abide by additional health and safety requirements to protect themselves and others in the community. For individuals who have been fully vaccinated and have registered their vaccination status with the university, regular testing likely will not be required.

## Other considerations

Faculty, staff, and postdoctoral and postgraduate trainees who are not in the New Haven area should consult their state and local authorities either in the United States or in their country of residence for information about vaccination availability and scheduling in their region. For those unable to obtain vaccination appointments before returning to campus, Yale will assist you in receiving vaccinations prior to or concurrent with your return to campus.

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For over 15 months, we have worked tirelessly to protect each other from illness. Yale's vaccination requirements are an acknowledgement and an extension of these efforts. At this turning point in the pandemic, the administration of each vaccine brings us one step closer to the end of this public health crisis. We are grateful for all you have done for Yale and our community's health. To those who have yet to be inoculated, please join us in becoming [vaccinated against COVID-19](https://yalehealth.yale.edu/yale-covid-19-vaccine-program) (<https://yalehealth.yale.edu/yale-covid-19-vaccine-program>).

Sincerely,

Peter Salovey

President

Chris Argyris Professor of Psychology

Scott Strobel

Provost

Henry Ford II Professor of Molecular Biophysics & Biochemistry

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# Yale

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## THE NUREMBERG CODE

1. The voluntary consent of the human subject is absolutely essential.

This means that the person involved should have legal capacity to give consent; should be so situated as to be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision. This latter element requires that before the acceptance of an affirmative decision by the experimental subject there should be made known to him the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonably to be expected; and the effects upon his health or person which may possibly come from his participation in the experiment.

The duty and responsibility for ascertaining the quality of the consent rests upon each individual who initiates, directs or engages in the experiment. It is a personal duty and responsibility which may not be delegated to another with impunity.

2. The experiment should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random and unnecessary in nature.
3. The experiment should be so designed and based on the results of animal experimentation and a knowledge of the natural history of the disease or other problem under study that the anticipated results will justify the performance of the experiment.
4. The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.
5. No experiment should be conducted where there is an a priori reason to believe that death or disabling injury will occur; except, perhaps, in those experiments where the experimental physicians also serve as subjects.
6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.
7. Proper preparations should be made and adequate facilities provided to protect the experimental subject against even remote possibilities of injury, disability, or death.
8. The experiment should be conducted only by scientifically qualified persons. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.
9. During the course of the experiment the human subject should be at liberty to bring the experiment to an end if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.
10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill, and careful judgment required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject.