

After COVID Vaccine Roll Out, the FAA Tacitly Admitted that Pilots Electrocardiogram (EKG) Are No Longer Normal.

We Should be Concerned. Very Concerned

By [Steve Kirsch](#)

Global Research, January 18, 2023

[Steve Kirsch's newsletter](#) 17 January 2023

Region: [USA](#)

Theme: [Science and Medicine](#)

All Global Research articles can be read in 51 languages by activating the **Translate Website** button below the author's name.

To receive Global Research's Daily Newsletter (selected articles), [click here](#).

Follow us on [Instagram](#) and [Twitter](#) and subscribe to our [Telegram Channel](#). Feel free to repost and share widely Global Research articles.

When asked about the change, the FAA couldn't justify it. Uh oh. Fact checkers aren't going to touch this story.

Tucker covers [@StKirsch](#)'s bombshell finding about the FAA loosening its EKG range for pilots while offering no explanation as to why to the public. Guest: [@LTCTheresaLong](#) pic.twitter.com/vTwVjEDE5U

— TexasLindsay™ (@TexasLindsay_) [January 18, 2023](#)

Executive summary

In the October 2022 version of the FAA Guide for Aviation Medical Examiners, the FAA quietly widened the EKG parameters beyond the normal range (from a PR max of .2 to unlimited). And they didn't widen the range by a little. They widened it by a lot. It was done after the vaccine rollout.

This is extraordinary. They did it hoping nobody would notice. It worked for a while. Nobody caught it.

But you can't hide these things for long.

This is a tacit admission from the US government that the COVID vaccine has damaged the hearts of our pilots. Not just a few pilots. A lot of pilots and a lot of damage.

The cardiac harm of course is not limited to pilots.

My best guess right now is that **over 50M Americans** sustained some amount of heart damage from the shot.

That's a lot of people who will be very upset when they realize the vaccine they took to reduce their chance of dying from COVID actually worked in reverse making it:

1. More likely that people will get COVID
2. Be hospitalized from COVID and other diseases
3. Die from COVID (and other diseases)
4. You also have an excellent chance of getting a lifetime of heart damage for no extra charge.

But don't worry; you can't sue them. They fixed the law so none of them aren't liable (the doctors, the drug companies, the government). After all, you took the vaccine of your own free will. It's not like you were forced (or coerced) to take it or anything like that! And there were plenty of people warning you not to take the shots (even though they censored most of them).

In this article, I will explain the evidence and thinking behind all my claims.

As I learn more, I will refine the estimate.

Introduction

On October 24, 2022, the FAA quietly, without any announcement at all, widened the EKG requirements necessary for pilots to be able to fly.

The PR (a measure of heart function) used to be in the range of .12 to .2.

It is now: .12 to .3 and potentially even higher.

This is a very wide range; it accommodates people who have cardiac injury. Cardiologist Thomas Levy is appalled at this change:

Why did they make the change?

Why would they do that?

I'll take an educated guess as to why they did that. I believe it is because they knew if they kept the original range, too many pilots would have to be grounded. That would be extremely problematic; commercial aviation in the US would be severely disrupted.

And why did they do that quietly without notifying the public or the mainstream media?

I'm pretty sure they won't tell me, so I'll speculate: it's because they didn't want anyone to know.

In other words, the COVID vaccine has seriously injured a lot of pilots and the FAA knows it and said nothing because that would tip off the country that the vaccines are unsafe. And you aren't allowed to do that.

Why we sure it was the vaccine that did it

There are several clues that are consistent with “it was the vaccine and not COVID”:

1. They were quiet about it. If it was COVID, you can be public. But the vaccine is supposed to be safe.
2. The timing. October 2022 is late for COVID. If it was due to COVID, it would have happened well before now. They can make changes every month.
3. The vaccine creates far more injury to the heart than COVID ([which creates **NO added risk**](#) per this large-scale Israeli study of 196,992 *unvaccinated* adults after Covid infection).
4. Anecdotally, cardiologists only started to notice the damage post-vaccine.
5. All the sudden deaths started post-vaccine.

The data supporting my 20% damage estimate

I know from a study of 177 people in Puerto Rico (97% of whom were vaccinated) ages 8 to 84, that [70% of those people, when screened for cardiac injury using an FDA-approved testing device \(from Heart Care Corp\), exhibited objective signs of cardiac injury.](#)

There was a study done on pilots. It will be published in *The Epoch Times* later this week. That indicated heart damage in over 20% of pilots screened (*The Epoch Times* will release the exact number).

The [Thailand study showed nearly 30% of kids had abnormal cardiac biomarkers after the shot.](#) But kids are indestructible so a 30% injury rate in kids translates into a higher rate for adults.

VAERS shows that cardiac damage happens at all ages, not just the young:



Search Results

From the 1/6/2023 release of VAERS data:

Found 141 cases where Vaccine is COVID19 and Symptom is Atrial tachycardia

[Government Disclaimer on use of this data](#)

Table

↓ Age	Count	↑ ↓ Percent
6-17 Years	3	2.13%
18-29 Years	7	4.96%
30-39 Years	14	9.93%
40-49 Years	11	7.8%
50-59 Years	16	11.35%
60-64 Years	5	3.55%
65-79 Years	19	13.48%
80+ Years	5	3.55%
Unknown	61	43.26%
TOTAL	141	100%

Bottom line: The most logical conclusion is that the FAA knows the hearts of our nations pilots have been injured by the COVID vaccine that they were coerced into taking, the number of pilots affected is huge, the cardiac damage is extensive, and passenger safety is being compromised by the lowering of the standards to enable pilots to fly.

The right thing would be for the FAA to come clean and admit to the American public that the COVID vaccine has injured 20% or more of the pilots (based on their limited EKG screening), but I doubt that they will ever do that.

The change: from 200 msec to 300 msec and beyond

The changes were made on October 24, 2022 to the [GUIDE FOR AVIATION MEDICAL EXAMINERS](#).

Here is the [change log where you can see the change listed](#) (see page 4):

Guide Version	Official Date	Revision Number	Description Of Change	Reason For Update
				removed several hours before cornea exam.
2022	10/26/2022	6.	Medical Policy	In Item 36. Heart, Arrhythmias , revised 1 st Degree AV Block into two categories: PR interval of less than 300 ms and PR interval of 300 ms or more.
2022	10/26/2022	7.	Medical Policy	In Item 58. ECG Normal Variants List , revise 1 st Degree AV Block criteria to "less than 300 ms (0.30 sec)."

Here is what the policy was before the change. It was just one row:

Guide for Aviation Medical Examiners

DISEASE/CONDITION	CLASS	EVALUATION DATA	DISPOSITION
Arrhythmias (continued)			
1 st Degree AV Block	All	Document history and findings, CVE Protocol, and submit any tests deemed appropriate	If no evidence of structural, functional or coronary heart disease - Issue Otherwise - Requires FAA Decision
2 nd Degree AV Block Mobitz I	All	Document history and findings, CVE Protocol, and submit any tests deemed appropriate	If no evidence of structural, functional or coronary heart disease - Issue Otherwise - Requires FAA Decision

Here are what it looks like as of Oct 24, 2022 (click the image to see the context):

1 st Degree AV Block with PR interval of LESS than 300 ms	All	If no symptoms or AME concerns	ISSUE Annotate Item 60
1 st Degree AV Block with PR interval of 300 ms or MORE	All	Submit the following: A current Holter and cardiac evaluation	DEFER Submit information to the FAA for review

So it's now two rows, one for less than 300 ms (it used to be 200 ms), and a second row to handle 300 ms or more.

For more information about the change, see [Myocarditis: Once Rare, Now Common](#).

The Thailand study

In the US, we are not allowed to do lab tests on people before and after the vaccine.

The reason for that is simple: it would make it crystal clear that the vaccines are unsafe. That is why there are no before/after studies in the US. There never will be.

Why? Because that is how science works in America today: it's unethical to design a study that might expose that the COVID vaccines that they forced us to take cause harm.

Think I'm kidding about how they game the trials? Get yourself a copy of [Turtles All the Way Down](#) and just read the first chapter. It's eye opening.

Even though we can't do a before/after study in the US, they did such [a study in Thailand](#) on 301 kids. They found that 29.24% of the participants developed cardiac injuries within days after they got the second shot:

least one elevated cardiac biomarker or positive lab assessments. Cardiovascular manifestations were found in 29.24% of patients, ranging from tachycardia or palpitation to myopericarditis. Myopericarditis was confirmed in one

But here's the most important part about that study that nobody points out:

None of the tests that were done in the Thailand study included doing a cardiac MRI with contrast on all the participants since that would be expensive and invasive. That test is the gold-standard for cardiac injury.

In other words, the **29% rate of injury was a lower bound of injury.**

If you did a cardiac MRI on all those kids, you are going to find stuff that you will not find using the cheap and easy tests. Maybe a lot of stuff.

Summary

I believe that the actual rate of heart injury from these vaccines will be found to be well over the 29.7% rate of heart damage in the Thailand study.

At a more conservative 20% injury rate, we are looking at 50M Americans with heart damage caused by the jab.

As more studies are done, it's going to be crystal clear why so many people are dying suddenly, especially kids. It's also going to explain why nursing homes have lost up to 33% of their residents in 12 months where before they were losing only 1 or 2% a year. It's going to explain why I was unable to find even a single nursing home where the all-cause mortality dropped after the vaccines rolled out. And it's going to explain why none of the nursing homes wanted to talk to me about what happened to people after the shots rolled out.

Confidence in the CDC and the medical community should hit rock bottom after it is revealed how extensive the damage caused by these vaccines is.

The fact that the Thailand study was published in a peer-reviewed journal, that they only did

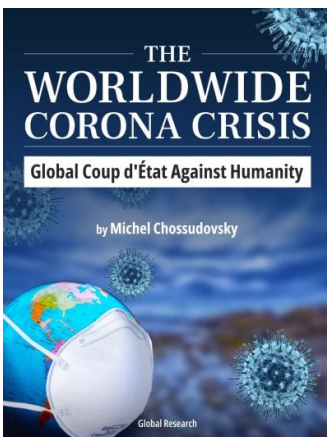
the easy-to-do assessments (which only found a portion of the damage), and the FAA quietly changed their EKG guidance should at least open your mind to the possibility that I might be right.

This narrative is going to start falling apart at an accelerated rate.

Stay tuned. The best is yet to come. And it's going to be epic.

*

Note to readers: Please click the share buttons above. Follow us on Instagram and Twitter and subscribe to our Telegram Channel. Feel free to repost and share widely Global Research articles.



The Worldwide Corona Crisis, Global Coup d'Etat Against Humanity

by Michel Chossudovsky

Michel Chossudovsky reviews in detail how this insidious project “destroys people’s lives”. He provides a comprehensive analysis of everything you need to know about the “pandemic” — from the medical dimensions to the economic and social repercussions, political underpinnings, and mental and psychological impacts.

“My objective as an author is to inform people worldwide and refute the official narrative which has been used as a justification to destabilize the economic and social fabric of entire countries, followed by the imposition of the “deadly” COVID-19 “vaccine”. This crisis affects humanity in its entirety: almost 8 billion people. We stand in solidarity with our fellow human beings and our children worldwide. Truth is a powerful instrument.”

ISBN: 978-0-9879389-3-0, **Year:** 2022, PDF Ebook, **Pages:** 164, 15 Chapters

Price: ~~\$11.50~~ Get yours for **FREE!** [Click here to download.](#)

We encourage you to support the eBook project by making a donation through Global Research’s [DonorBox “Worldwide Corona Crisis” Campaign Page.](#)

The original source of this article is [Steve Kirsch's newsletter](#)

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [Steve Kirsch](#)

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca

www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca