



By Email

Chair Lynn C. Schulman
Members of the Committee on Health
The New York City Council
City Hall
New York, N.Y. 10007

August 22, 2022

Re: **Committee on Health August 24, 2022 Oversight Hearing – Monkeypox Virus (MPV) in New York City, File # T2022-1872**

Dear Chair Schulman and Members of the Committee:

We represent **Dr. Don Weiss**, a long-time Department of Health and Mental Hygiene (DOHMH) employee and whistleblower concerning flawed DOHMH messaging about the Monkeypox pandemic.¹ We submit this letter and **ask that it be treated as written testimony and included in the public record** for the above-captioned hearing scheduled for Wednesday August 24, 2022 at 10:00 am in City Hall. Dr. Weiss is the victim of retaliation; we ask for your assistance.

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¹ Government Accountability Project (<https://whistleblower.org/>) is the nation’s leading whistleblower protection organization. Through litigating whistleblower cases, publicizing concerns and developing legal reforms, our mission is to protect the public interest by promoting government and corporate accountability. Founded in 1977, we are a nonprofit, nonpartisan advocacy organization.



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Executive Summary

Dr. Weiss is a physician and medical epidemiologist who has proudly served at DOHMH for 22 years. Until August 1, he was the Director of Surveillance within the Bureau of Communicable Disease (BCD), part of DOHMH’s Division of Disease Control. In mid-July, Dr. Weiss raised significant concerns with *at least ten* DOHMH staff and managers, including Commissioner Ashwin Vasan, about DOHMH’s wrong public messaging about Monkeypox endangering public health and safety. His concerns were ignored; the messaging was never corrected (it remains on DOHMH’s Monkeypox web page). It quickly became apparent that DOHMH was not going to do anything. Dr. Weiss disclosed his concerns to the *New York Times*. Its July 18 article, *Debate Over Monkeypox Messaging Divides N.Y.C. Health Department*, is available <https://www.nytimes.com/2022/07/18/nyregion/nyc-monkeypox-health-department-information-inaccurate.html>.

Four days later, on July 22, 2022, Dr. Weiss was informed that he was being stripped of his duties. Effective August 1, 2022, he was transferred a new DOHMH Division and Bureau where he has never worked – the Division of Family and Child Health – specifically to the Bureau of Maternal, Infant, and Reproductive Health. There, he has been tasked with creating training



materials for home visitation staff and reviewing and providing feedback on existing home visitation educational materials. The *only* “reasons” for the “transfer” are DOHMH’s “effort to better align our operations” and agency “urgency.” These are plainly pretextual. Dr. Weiss is a victim of whistleblower retaliation. He seeks reinstatement as BCD’s Director of Surveillance.

Background

About Dr. Weiss

Dr. Weiss is a renowned medical epidemiologist. He is the most senior, experienced, medical epidemiologist at the DOHMH. He has authored over 80 peer reviewed publications and has mentored dozens of medical public health trainees, including U.S. Centers for Disease Control (CDC) Epidemic Intelligence Officers, Infectious Disease Fellows, and Medical and Master of Public Health students.

Over his 22 years at DOHMH, Dr. Weiss has led or participated in investigations on every major public health crisis affecting millions in the City, State, Nation, and World. They include: COVID-19 (he was in the team that identified the first case in the City); Zika Virus; Legionnaire’s Disease; Ebola; Meningitis; Botulism; H1N1 Influenza; SARS-Cov-1; Bubonic Plague; Anthrax; and Hepatitis C. He has also served as a consultant to the NYC Office of the Chief Medical Examiner, the NYC Poison Control Center, the Department of Homeless Services, the Metropolitan Transit Authority, the US Open Tennis Tournament, and the National Basketball Association.

Dr. Weiss has also been the chief scientist for Syndromic Surveillance, a program created in New York City and respected by health departments around the world (numerous countries have visited to learn about the program). He also served as a consultant to the European Union CDC during the 2013 meningococcal outbreak in Europe.

Dr. Weiss has also consistently received the highest annual evaluations. Between 2014 and 2018, he was rated Outstanding – the highest rating – in three out of four years. For instance, for his 2018 evaluation finalized in April 2019 his supervisor wrote:

Dr. Weiss is an extremely experienced, dedicated and competent public health physician who has a practical and seasoned approach to acute public health issues. He continues to demonstrate great intellectual insight and initiative in addressing communicable disease issues, with his focus in recent years on ways the Bureau can better address the challenges of multidrug resistant organisms ... as well as to move the DOHMH to being more proactive in our efforts to ensure judicious antibiotic use. One of his greatest strength[s] is his attentive mentorship to both students and junior epidemiology staff and over the years, he has definitely done his part to contribute to the growth of applied public health epidemiology in local and state public health.



About DOHMH and BCD

DOHMH employs a staff of over 6,000 throughout the five boroughs. It is one of the largest public health agencies in the world and, with over 200 years of leadership, is one of the nation's oldest public health agencies. It is also “behind the scenes with our disease detectives, investigating suspicious clusters of illness. Our epidemiologists study the patterns, causes and effects of health and disease conditions in New York City neighborhoods. These studies shape policy decisions and the City's health agenda.”²

BCD is headed by an Assistant Commissioner -- to whom Dr. Weiss reported directly -- who reports to the Deputy Commissioner for the Division of Disease Control. According to the DOHMH organizational chart,³ the Deputy Commissioner also supervises six other Bureaus. While serving as BCD's Director of Surveillance, Dr. Weiss supervised seven to nine direct reports and over 50 indirect reports.

Since 2011 BCD has been located in Long Island City. Prior to this the offices were at 125 Worth Street, in Manhattan. During his 22 years at DOHMH, Dr. Weiss has worked with dozens of epidemiologists at those locations and external to BCD.

About the Monkeypox Pandemic

Monkeypox is not a new human disease; it has been endemic in the nations of Central Africa for decades. Starting in May 2022 it began to spread across the globe and continues to do so. Growth has been explosive. According to the CDC, as of August 19, 2022 (at 5 pm ET), there were 41,358 confirmed cases worldwide, of which 40,971 are in locations that have not historically reported Monkeypox.⁴ Prior to May 15, 2022 there were *no* suspected or reported cases in the United States.⁵ The U.S. now leads the world, with 14,594 cases,⁶ New York State

² *About the NYC Department of Health and Mental Hygiene*, available at <https://www1.nyc.gov/site/doh/about/about-doh.page>.

³ Available at <https://www1.nyc.gov/assets/doh/downloads/pdf/public/dohmh-orgchart.pdf>.

⁴ Available at <https://www.cdc.gov/poxvirus/monkeypox/response/2022/world-map.html>.

⁵ Available at <https://www.cdc.gov/poxvirus/monkeypox/response/2022/mpx-trends.html>.

⁶ <https://www.cdc.gov/poxvirus/monkeypox/response/2022/world-map.html>.



leads the U.S. with 2,744 cases,⁷ and New York City leads the State with 2,596 cases (as of August 18 at 10 am).⁸ Within the City, 2,405 are men, 2,047 are under 45 and 1,644 identify as LGBT+.⁹

On August 1, 2022, Mayor Adams issued Emergency Executive Order No. 158 declaring a Local State of Emergency relating to Monkeypox.¹⁰ Governor Hochul issued a similar disaster order for New York State on July 29,¹¹ and the CDC activated its Emergency Operations Center for Monkeypox on June 28.¹² DOHMH activated its Incident Command System (ICS) for Monkeypox on June 21, 2022. The ICS is an established protocol for handling emergencies. As DOHMH's leading expert, Dr. Weiss participated in multiple ICS meetings until July 22 when he was stripped of that duty.

Timeline

DOHMH's Flawed Public Messaging

Initial, Appropriate Messaging

The City of New York first publicly disclosed Monkeypox on May 19, 2022. Then, DOHMH issued its first press release, *Health Department Investigating Possible Monkeypox Case in New York City*.¹³ On May 26, DOHMH issued a second press release announcing that one New Yorker had been presumptively diagnosed with Monkeypox.¹⁴ On June 23, DOHMH issued its

⁷ <https://www.cdc.gov/poxvirus/monkeypox/response/2022/us-map.html>.

⁸ <https://www1.nyc.gov/site/doh/data/health-tools/monkeypox.page#surveillance>

⁹ Id.

¹⁰ Available at <https://www1.nyc.gov/assets/home/downloads/pdf/executive-orders/2022/eo-158.pdf>.

¹¹ Available at <https://www.governor.ny.gov/sites/default/files/2022-07/EO%2020.pdf>.

¹² Available at <https://www.cdc.gov/media/releases/2022/s0628-monkeypox-eoc.html>.

¹³ <https://www1.nyc.gov/site/doh/about/press/pr2022/monkeypox-possible-nyc-case.page>

¹⁴ DOHMH Press Release, *Health Department Update on Person Diagnosed with Presumed Monkeypox in New York City* (May 26, 2022), available at <https://www1.nyc.gov/site/doh/about/press/pr2022/monkeypox-presumed-case-update.page>.



third press release on Monkeypox.¹⁵ It announced the opening of a vaccine clinic, that “[a]nyone can get and spread monkeypox, but most cases in the current outbreak are among gay, bisexual or other men who have sex with men” (MSM), and that the “new vaccine clinic expands eligibility to all gay, bisexual, and other men who have sex with men (cisgender or transgender) ages 18 and older who have had multiple or anonymous sex partners in the last 14 days.” The press release closed with the following messaging about prevention and care:

To reduce the chance of getting or spreading monkeypox, do not engage in sex or other close physical contact (such as touching, massage, or kissing) if you or your partners are sick and especially if you or they have a new or unexpected rash or sores anywhere on the body. Avoid gatherings and direct contact with others if you are unwell or have a rash or sores. Wash your hands, sex toys and bedding before and after sex or other intimate activities.

This messaging continued in press releases issued on July 6, 2022,¹⁶ July 11, 2022,¹⁷ and July 14, 2022.¹⁸

Switch to Wrong and Dangerous Messaging

The messaging materially changed in the DOHMH press release issued on July 15, 2022.¹⁹ The new messaging stated (and continues to state), with emphasis added:

¹⁵ DOHMH Press Release, *Health Department Launches Monkeypox Vaccine Clinic for People Who May Have Been Exposed to Monkeypox* (June 26, 2022), available at <https://www1.nyc.gov/site/doh/about/press/pr2022/monkeypox-vaccine-clinic.page>.

¹⁶ DOHMH Press Release, *Health Department Announces Next Phase of Monkeypox Vaccine Strategy* (July 6, 2022), available at <https://www1.nyc.gov/site/doh/about/press/pr2022/health-department-announces-next-phase-of-monkeypox-vaccine-strategy.page>.

¹⁷ DOHMH Press Release, *Health Department Announces Next Allocation of Monkeypox Vaccine and the Opening of New Appointments* (July 11, 2022), available at <https://www1.nyc.gov/site/doh/about/press/pr2022/monkeypox-next-allocation-vaccines-new-appointments.page>.

¹⁸ DOHMH Press Release, *Health Department Announces New Details of Monkeypox Vaccine Strategy* (July 14, 2022), available at <https://www1.nyc.gov/site/doh/about/press/pr2022/health-department-announces-new-details-of-monkeypox-vaccine-strategy.page>.

¹⁹ DOHMH Press Release, *NYC Health Department on Monkeypox Vaccination Strategy and Prioritization of First Doses* (July 15, 2022), available at



In addition to vaccine, prevention measures offer some level of protection. These include avoiding close physical contact if sick, especially if there is a new or unexpected rash or sore. **For those who choose to have sex while sick, it is best to avoid kissing and other face-to-face contact. Also, sores should be covered with clothing or sealed bandages. This may help reduce — but not eliminate — the risk of transmission.** Cleaning hands, sex toys, and bedding before and after sex or other intimate activities is advised. **When making plans, New Yorkers should consider the level of risk. Having sex or other intimate contact with multiple or anonymous people (such as those met through social media, dating apps, or at parties) can increase risk of exposures.**

This public messaging had not changed. For instance, the August 3, 2022 DOHMH press release on Monkeypox states, with emphasis added:

If you choose to have sex or other intimate contact with someone while they are sick, cover all rashes and sores with clothing or sealed bandages. This may reduce spread from contact with the rash or sores, but other methods of transmission may still be possible.²⁰

This same messaging is also found on the current DOHMH Monkeypox web page.²¹

Dr. Weiss' Disclosures of Concerns to DOHMH Management

This messaging alarmed Dr. Weiss. Within minutes of learning of the press release in the late-afternoon of July 15, he emailed eight experienced DOHMH colleagues – including two Assistant Commissioners – about his concerns. Collectively, they have served the City and the agency for over 75 years.

Dr. Weiss wrote that the messaging in the release -- “[f]or those who choose to have sex while sick, it is best to avoid kissing and other face-to-face contact ... sores should be covered with clothing or sealed bandages” – was “Unbelievable.” He said the messaging should be (with emphasis in the original):

<https://www1.nyc.gov/site/doh/about/press/pr2022/monkeypox-vaccination-prioritization-first-doses.page>.

²⁰ DOHMH Press Release, *Health Department Provides Update on Next Round of Monkeypox Vaccine Strategy* (Aug. 3, 2022), available at <https://www1.nyc.gov/site/doh/about/press/pr2022/monkeypox-vaccine-update-new-clinics.page>.

²¹ <https://www1.nyc.gov/site/doh/health/health-topics/monkeypox.page>.



If you wish to avoid monkeypox, DON'T HAVE SEX, most importantly, not anonymous/multiple partner sex.

Dr. Weiss' Colleagues Concur

All eight recipients either agreed with Dr. Weiss or did not disagree. One replied: "It's mindboggling. Cover sores with clothing or bandages? Cover penile and perianal lesions? Avoid kissing? Face-to-face contact? Seriously?" The same writer observed in a second email:

In my 20+ years of service here, I've had the pleasure of working with leaders who wouldn't hesitate to say and do what the circumstances demanded. ... They never would have tolerated how we have refused to speak frankly while a sexually transmitted disease rampaged through LGBT communities. Growing up professionally during the worst of the HIV/AIDS pandemic, they accepted the ACT UP creed that silence=complicity.

There's so much disingenuous claptrap in this and other press releases that it's pointless to say more about them.

Others replied with one word (emphasis in the original): "WOAH!!!" and "Wowza!!!" Another wrote:

Why are we putting ourselves in the position to do damage control? Damage that has come from within, despite our group repeatedly insisting that the messages need to be clear direct, and unafraid? It's terrible for the community and making our jobs so much harder.

Senior DOHMH Managers Agree

Notably, one of the Assistant Commissioner recipients replied that -- after receiving approval from DOHMH's Deputy Commissioner for External Affairs -- she was working on a Monkeypox prevention letter to DOHMH organization partners "to provide more! better! clearer! information about risk and self-assessment and personal decision-making.... Very much borne out of this same frustration -- and hoping it can help course correct a bit through a different channel..." In a second reply email the Assistant Commissioner wrote (with emphasis in the original): "Making it crystal clear here that I AGREE!! Very very problematic. And dangerous." And in a *third* email "written this evening to Celia [Quinn (the Deputy Commissioner for Disease Control)] to register my major concerns. Encourage others to do so!"

Dr. Weiss expressed similar concerns to that Deputy Commissioner earlier, during ICS meetings held at least twice per week. He told the group that vaccination alone was not going to be enough to stop transmission. DOHMH needed to advise MSM to alter their sexual practices and avoid sex; it was not doing enough through public messaging to alert MSM to the risk. No one



at the ICS meetings disagreed. The Deputy Commissioner for Disease Control and the Deputy Commissioner for External Affairs informed Dr. Weiss they were working through community partners to get the message out.

Dr. Weiss also emailed his concerns on July 15 directly to the Executive Deputy Commissioner, writing: “This is a rather pitiful prevention message ... Embarrassing.” The Deputy Commissioner did not disagree. She replied, “I think they lifted this from CDC guidance,” to which Dr. Weiss answered: “This is a sexually transmitted disease. The risk is any non-monogamous sex and likely people are infectious before rash. Saying anything less is doing MSM and the greater community a disservice.”

Notwithstanding these significant concerns expressed by a meaningful consensus of experienced DOHMH managers and staff, it was apparent that DOHMH was not going to correct the faulty messaging. Dr. Weiss emailed the group the following later in the evening of July 15:

I thank all of you for sharing my outrage. I was ready to resign in protest, but maybe I still have a little fight left in me.

Dr. Weiss Further Discloses His Concerns

The New York Times

Time was and is of the essence. Based on DOHMH’s obvious inability to correct the flawed messaging, the daily, exponential expansion of the pandemic and the increasing danger to public health safety, Dr. Weiss reasonably concluded further action was needed. Public disclosure would alert the community at risk so that they could steps to protect themselves as well as shine a bright light on the problem – perhaps sufficient to persuade DOHMH to correct the flawed messaging and thus likely enhance public health and safety. Accordingly, on July 16, Dr. Weiss met with and shared his and his colleagues’ concerns with the *New York Times* staff. Its article was published in the late afternoon of July 18.

Dr. Weiss Alerts Commissioner Vasan and Additional Senior DOHMH Managers

Hours before publication, Dr. Weiss sent an email to Commissioner Vasan and eight other senior managers, including four Deputy Commissioners and Two Assistant Commissioners. Four of the eight had received Dr. Weiss’ July 15 email, discussed above, with which they either agreed or did not disagree. The July 18 email’s subject was *Monkeypox Is a Sexually Transmitted Infection, Messages Suggesting Otherwise Are Misinforming and Prolonging the Outbreak*.²² In

²² The email is reprinted, with names of the other eight DOHMH recipients redacted, at <https://doctor-with-a-badge.webnode.page/dear-commissioner/>, a website operated by Dr. Weiss.



it Dr. Weiss wrote: “[t]he evidence is overwhelming” that Monkeypox is a sexually transmitted infection and “[n]ot communicating this clearly and often is a public health failure.” He went on to describe the statistical and epidemiologic evidence discussed above and he cited four supporting peer-reviewed articles involving cases in Europe and the Western Hemisphere.

Dr. Weiss also disclosed his meeting with the *Times* to the Commissioner, writing:

I cannot in good conscience permit improper messaging to continue. I have shared the above information with The New York Times with the goal of fulfilling the health department’s mission of informing the public about communicable disease risk.

Neither Commissioner Vasan nor any of the eight other DOHMH recipients replied to this email, or ever spoke to Dr. Weiss about his concerns.

DOHMH’s Public Statement

However, the agency did reply to the *Times*, stating that Dr. Weiss was wrong. Its July 18 article reported:

“For decades, the L.G.B.T.Q.+ community has had their sex lives dissected, prescribed, and proscribed in myriad ways, mostly by heterosexual and cis people,” the statement said. The city’s response to monkeypox is grounded in the science and history of “how poorly abstinence-only guidance has historically performed,” the statement said, “with this disgraceful legacy in mind.”

DOHMH provided no further explanation.

Additional Overwhelming Medical Evidence Demonstrating Dr. Weiss Is Right

Monkeypox is – and should be treated openly and honestly as the sexually transmitted infection it plainly is. On August 8, 2022, the *Lancet* published the results of an assessment of confirmed Monkeypox cases in three Spanish clinics from mid-May through the end of June 2022.²³ The study “strengthens the evidence for skin-to-skin contact during sex as the dominant mechanism of transmission of monkeypox, with important implications for disease control.” On July 21, 2022, an international collaborative group of clinicians reported in the *New England Journal of Medicine* on an assessment of Monkeypox infections across sixteen countries between April and

²³ The *Lancet*, *Clinical Presentation and Virological Assessment of Confirmed Human Monkeypox Virus Cases in Spain: A Prospective Observational Cohort Study* (Aug. 8, 2022), available at [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(22\)01436-2/fulltext#](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(22)01436-2/fulltext#).



June 2022.²⁴ It found that “[s]exual activity, largely among gay or bisexual men, was by far the most frequently suspected route of transmission.” The authors noted:

Health care professionals need to be educated to recognize and manage cases of monkeypox. Targeted health promotion that sensitively supports enhanced testing and education in populations at risk is needed. Involving communities from the outset in shaping the implementation of public health interventions is essential to ensure that they are appropriate and nonstigmatizing and to avoid messaging that will drive the outbreak underground.

This has led scientists like Dr. Weiss to go to public media outlets to urge public health authorities like DOHMH and the CDC – based on so much overwhelming evidence -- to “update their monkeypox communication strategies to more strongly emphasize the centrality of intercourse among gay and bisexual men, who comprise nearly all U.S. cases, to the virus’ spread.”²⁵

That is all that Dr. Weiss and his colleagues were – and are – saying. DOHMH’s Monkeypox messaging is wrong and is harming public health. Advising at risk groups to “cover all rashes and sores with clothing or sealed bandages” when having sex has no scientific basis and is wrong. It remains on DOHMH’s website to this day.

²⁴ New England Journal of Medicine, *Monkeypox Virus Infection in Humans across 16 Countries — April–June 2022* (Jul 21, 2022), available at <https://www.nejm.org/doi/full/10.1056/NEJMoa2207323>.

²⁵ NBC News, *Sex Between Men, Not Skin Contact, Is Fueling Monkeypox, New Research Suggests* (Aug. 17, 2022), available at <https://www.nbcnews.com/nbc-out/out-health-and-wellness/sex-men-not-skin-contact-fueling-monkeypox-new-research-suggests-rcna43484>.



DOHMH Retaliates Against Dr. Weiss

The “Reassignment”

On July 22, 2022, Dr. Weiss was directed to meet that afternoon with the DOHMH Assistant Commissioner in charge of the Bureau of Human Resources and Labor Relations. At the meeting, he was handed a one-page memorandum. Its Subject was “Reassignment.” It states:

This will serve as formal notice that as a result of [DOHMH]’s effort to better align our operations, you are reassigned to the Division of Family and Child Health effective [August 1]. Your schedule, civil service title and salary will remain unchanged.”²⁶

The memorandum further advised that Dr. Weiss was now to have the Office Title “Maternal, Infant and Reproductive Health Medical Specialist” within the Maternal, Infant and Reproductive Health Bureau (MIRH). His new work location was now on West 100th Street in Manhattan, where he was assigned a specific seat (Seat 2-13).

At the brief meeting, which Dr. Weiss openly taped,²⁷ the Assistant Commissioner read and handed to Dr. Weiss his memorandum. Dr. Weiss asked who authorized the move; the Assistant Commissioner he could not share that information. Dr. Weiss asked and was told he had no right to appeal to anyone because this was a “reassignment.” The Assistant Commission also told Dr. Weiss that his ICS would terminate that day.

Dr. Weiss asked and the Assistant Commissioner acknowledged that he was aware of the whistleblower statute. Specifically, that the agency could not do any retribution for coming forward with information Dr. Weiss “felt was necessary for the public to know ... because this could be seen as retribution. Especially the timing of it. Since the article came out on Tuesday, it is now Friday.”

While Dr. Weiss was meeting with the Assistant Commissioner, the Deputy Chief of the Disease Control Division had convened a call with BCD Executive Staff. Dr. Weiss was told that the staff was told that the transfer was to “fill an urgent need,” that the “urgent need” would not be revealed, and that the person who ordered the move would not be revealed.

Other than the foregoing, Dr. Weiss was never told anything else. This is especially remarkable given that as the most experienced DOHMH medical epidemiologist Dr. Weiss: (i) was

²⁶ A copy of the memorandum is available at <https://doctor-with-a-badge.webnode.page/our-services/>.

²⁷ The recording is available at https://drive.google.com/file/d/1ZOObtYOO-jxJdFAFxFYsC7gZXc-6dYU_/view.



DOHMH's lead on limiting the spread of the exploding Monkeypox pandemic; (ii) had decades of experience on managing outbreaks; (iii) was a key player at the DOHMH ICS emergency response planning meetings for Monkeypox; (iv) had never worked on the issues addressed by MIRH during his 22 years at DOHMH; (v) was never told how the move would "better align our operations" or "fill an urgent need;" and (vi) no other staff were reassigned, no new positions were created to fill the need.

New York City was ground zero for Monkeypox. The pandemic was – and is -- growing by the hour.

The "Job"

DOHMH's retaliation came into even sharper focus once Dr. Weiss arrived for work at the MIRH outpost on the Upper West Side on August 1. There, unlike BCD, there was no one of comparable skills and experience – the facility was staffed with nurses and supervisors who do home visits and who worked in a different MIRH unit than Dr. Weiss. There, unlike BCDG, he supervised no one. There, unlike BCD, he worked with no other co-workers on site.

Dr. Weiss' assigned "tasks" were equally demeaning. He was told to create training materials for a program he had limited knowledge about, specifically four sets of training slides for new parent home visiting staff, and to review handouts and brochures. In an August 3 email from his new supervisor, Dr. Weiss was told MIRH was "interested in updating the training process" for home visitors and slide decks "will accomplish this goal." The four topics were infant feeding, safe sleep, "Warning signs for infant health in the first few weeks (to months)," and routine immunizations. Professionally produced, free training videos on these topics are already available online.²⁸

In sum, there was no "urgent need" for reassigning Dr. Weiss. There was no "realignment" in DOHMH operations. What there is here is obvious: retaliation against a whistleblower.

²⁸ From among others the Institute for the Advancement of Family Support Professionals, available at <https://institutefsp.org>.



Conclusion

We ask for your assistance. Dr. Weiss should be reinstated immediately. For this new, exploding pandemic the public is entitled to the best public health experts available. This is not the time to keep Dr. Weiss on the sidelines.

Thank you.

Very truly yours,

/s/

DAVID Z. SEIDE

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Cc: Speaker Adrienne E. Adams