

EXHIBIT 4

Executive Summary – Asymptomatic Transmission

- The theory of asymptomatic transmission as a driver of infective spread and fatalities is overstated at best and fatally flawed at worst.
- **Wuhan Participant Study** - 9,898,828 enrolled participants were tested using qualitative COVID RT-qPCR testing. Only 300 possible asymptomatic carrier candidates were identified. Of the 300 possible asymptomatic carriers, all were tested using live cell cultures to determine if their PCR samples could produce replication-competent virus. All 300 live cell cultures were negative for being able to produce replication-competent virus, indicating that none of the 300 people identified as potential asymptomatic carriers from the 9,898,828 people tested were infectious. Therefore 0.00% of COVID transmissions were asymptomatic.
- **U.S. Projection Study** - Zero participants were enrolled, yet the study was still sanctioned by the CDC. This published manuscript is a mathematical projection model estimating the percentage of people that tested positive and were presumed asymptomatic based upon a number of dubious assumptions. It asserts that 59% of COVID transmissions in the United States were asymptomatic.

Category	Wuhan Study	US Study
Location	Wuhan, China	None
Publishing Journal	Nature	JAMA
Publishing Date	11/20/2020	1/7/2021
Peer-Reviewed	Yes	No
Enrolled Participants	9,898,828	0
Methods	PCR, Antibody, Viral Culture	Math Assumptions Only
Suspected Asymptomatic Carriers	300 Total	NA
Actual Asymptomatic Carriers	29 Possible	NA
Asymptomatic Contacts	1,174	None
Asymptomatic Contacts Infected	0	NA
Asymptomatics w/ Replication Competent Virus	0	NA
% Asymptomatic Carriers	0.00029%	Not Stated
% Asymptomatic Transmitters	0.00000%	59%

Wuhan Study - <https://www.nature.com/articles/s41467-020-19802-w>
 US Study - <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2774707>

- The theory of asymptomatic transmission is yet to be definitively proven. There are 5 gold-standards of medical investigation: (1) Confirmed absence of clinical symptoms; (2) Confirmed serologic presence of viral antigen load; (3) Confirmed serologic absence of IgM and IgG antibodies; (4) Confirmed ability of nasal sample to produce replication-competent virus in live human cell culture; and (5) Confirmed infective spread to a susceptible host. For a person to be infectious, including persons assumed to be asymptomatic without definitive laboratory evidence, their nasal or serologic sample must be able to produce replication-competent virus in a live human cell culture.
- Until evidence exists regarding replication-competent virus in human cell cultures, the theory of asymptomatic transmission should not be used as a basis for public health policies for otherwise healthy individuals.