



## NATIONAL CITIZENS INQUIRY

Truro, NS

Day 1

March 16, 2023

### EVIDENCE

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**Witness 9: Chet Chisholm**

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[00:00:00]

**Alison Steeves**

Good afternoon. My name is Alison Steeves. Like Ches, I'm a non-practising lawyer, a member of the Nova Scotia Bar.

**Ches Crosbie**

Thank you. Do you affirm that you will tell the truth, the whole truth, and nothing but the truth?

**Chet Chisholm**

Yeah.

**Ches Crosbie**

Thank you.

**Alison Steeves**

Can you please state your name for the record?

**Chet Chisholm**

Yeah, my name is Chet Chisholm

**Alison Steeves**

And where are you from?

**Chet Chisholm**

I'm from Antigonish, Nova Scotia.

**Alison Steeves**

And what is your occupation?

**Chet Chisholm**

I am a paramedic. I've been a paramedic for 12 years.

**Alison Steeves**

For 12 years?

**Chet Chisholm**

Twelve, yes.

**Alison Steeves**

And how do you like being a paramedic?

**Chet Chisholm**

Oh, it's the best job in the world, man. It's probably one of the most rewarding professions that you can ever work. You show up on people's worst day and your goal is to improve it. No one's ever mad that the paramedics show up. Well, some are, but not many!

And with everything that's happened, if I had a lot of friends and colleagues, who say, "Hey, if you could go back and do it all again, would you?" And my answer has always been, "Yeah, I'd go back, and I'd have done it sooner."

**Alison Steeves**

So back in March 2020, when we started hearing about COVID, were you working as a paramedic at that point?

**Chet Chisholm**

No, I was currently off work. I was off with workers' compensation in March of 2019. I was diagnosed with post-traumatic stress disorder and was placed on medical leave awaiting treatment.

**Alison Steeves**

Were you planning to return to work, eventually?

**Chet Chisholm**

Yeah, that was the hope. My mental health team was pretty keen on getting me back to work. I was gung-ho to get into treatment, get back on the trucks. And kind of what was looming on the horizon, and the state of EMS in Nova Scotia, I felt it was imperative to do so.

**Alison Steeves**

Did you receive the treatment that you were waiting for?

**Chet Chisholm**

No, I was I on deck to get what's called EMDR, which is eye movement desensitization and reprogramming. It is often used very well with PTSD, and they see a lot of success with first responders and veterans. And my first appointment was kind of like the meet-and-greet appointment, to kind of set up a rapport. That was the first day of lockdown. So we showed up, we talked about what we were going to do, and that was it. Everything got canned thereafter, and then I was put into limbo and wasn't seen again for close to another year. Because we weren't allowed to have any in-person appointments whatsoever.

**Alison Steeves**

So you did get the treatment after a year?

**Chet Chisholm**

No. I went from a psychologist to working with a counselor, and we were kind of doing the prep stages, building the rapport, getting a background on what was going on. And things would kind of— We'd get a little bit of momentum and then they'd say, "Well, you can't meet in person again, and EMDR is an in-person thing."

So we'd have to just kind of do talk therapy on the phone and discuss things and talk about stressors. But we never really got to, we never got into a groove of things.

It was on and off, on and off, on and off, up until probably late spring, early summer of 2021. Things just kind of got canned again, and I got put back into the wait list and waiting in limbo. And where we continue to sit.

**Alison Steeves**

And what impact would you say that the delay in this treatment had on you?

**Chet Chisholm**

I've certainly had relapse since I saw my PTSD symptoms, which I've had previously somewhat under control. And not being able to— You kind of had to do maintenance while you're working through this. And we couldn't do any of that. And being in person, and actually being able to connect with somebody and talk about these things, and work through it, and then actually build to a therapy, is incredibly beneficial. There's such a disconnect when it's on the other end of a phone or on a screen. And not only that, but my counselor was getting extremely frustrated. She's like, "you are pretty well primed and ready to go, we can get you back on the trucks and get you going. But this keeps getting in the way." It's like we always had to keep starting from scratch again.

**Alison Steeves**

So are you still on leave from the same job?

**Chet Chisholm**

Yes, I'm still on leave. And due to the time frame that I've been off with our contractual agreement with the union, because the clock has ticked down,

[00:05:00]

I've been terminated for my position at EHS [Emergency Health Services].

**Alison Steeves**

So you're only allowed to be off for so long with an injury before you become terminated.

**Chet Chisholm**

Yeah. At two years. They'll hold your full-time position for two years. So that timeframe ran out. And, as we'll get into it in a little bit here, that's when we needed to push for this, so I don't lose anything else. At a three-year mark, you're canned, and that's it. You lose all your seniority and everything.

**Alison Steeves**

Do you have reason to believe that, had you received the treatment in the time frame that was originally scheduled, you would have returned to work in time to avoid losing your job?

**Chet Chisholm**

Pretty well everyone in my mental health team was pretty keen. Like, pretty sure Chet's going to go right back on the trucks. He wants to be there. And there's been such a high success rate with this with other first responders. It was looking good. Not so much.

**Alison Steeves**

During the time you're awaiting treatment, did you take the vaccine against COVID-19?

**Chet Chisholm**

Yeah, there was a push for it from our employer. And initially, I declined because I was eligible in December of 2020 and January of 2021. Because I was off work, I'm a young guy, pretty healthy. I said, "No, thanks. I'll wait. If we're going to give it to anybody, give it to people who are vulnerable and whatnot, I don't need it right now."

But when it became available for people in my age group, for people in their 30s, I got my first shot on May 21st. And the reason is we work with the most vulnerable people at the most vulnerable point in their life. And we are in constantly different clinical situations throughout a shift. You can start your shift in a backseat of a car in a ditch. And then you can be in an old-folks home and treating a COVID patient. And then you could be going into the ICU. It's a mixed bag every time you go to work. So the likelihood that I'm going to get a lot of exposure to COVID is quite high. And it's going to be in the back of an ambulance. And it's going to be probably right in my face. So the hope was that this could help mitigate cross-exposure amongst vulnerable people.

**Alison Steeves**

You didn't feel coerced to taking it?

**Chet Chisholm**

Yes and no. I was a little annoyed with kind of, the push. It's like, "Hey you got to do this, you got to do this right now." But I wasn't ever angry at the point of getting it. Because if it did what they said it did on the tin, then that could be beneficial—both for myself but, more importantly, for the vulnerable people whom we deal with every day.

**Alison Steeves**

Who administered it to you, do you recall?

**Chet Chisholm**

It was given to me by an RN and that was done at one of the local pharmacies in Antigonish.

**Alison Steeves**

Before taking it, did they advise you of the risks?

**Chet Chisholm**

The only risk that we really discussed was the risk of anaphylaxis. Because I have food allergies. So we talked about that, because it's like, "Hey, just hang around for like an extra like 20 minutes or so just so we can keep an eye on you." And I've done vaccination clinics for flu shots and stuff. I know you know the whole rigamarole of, "Hey we're going to give you this, we're going to keep an eye on you and make sure nothing happens. And if something happens, we'll report it and take care of you."

**Alison Steeves**

And how did you feel after taking it?

**Chet Chisholm**

Initially, I felt fine. But by that evening, I was pretty slack; really, really tired. And that was kind of par for the course for any other vaccines I've gotten for work or school in the past. But what kind of really drew attention to some things is I've been dealing with PTSD and crippling insomnia for years at that point—for two years at that point, where I would need to take medication to sleep. I went from not sleeping at all, to sleeping most of the day, to sleeping probably like 20 hours or more. And then just being incredibly sluggish and getting a little shorter breath here and there, and that kind of escalated over the next few weeks.

**Alison Steeves**

So those symptoms persisted and increased?

**Chet Chisholm**

Yeah, it started with incredible fatigue, which led to shortness of breath. And then eventually, I would get a tinge of chest pain when I was laying on my back. And it ultimately built up to— My dad had taken a tree down in the yard, and I went out to help him just load a couple chunks of log in the front of his tractor.

[00:10:00]

I got extremely short breath. I had stabbing chest pain here, just left my sternum, which radiated into my back. I told my dad. I was like, “Hey, we have to go to the hospital right now; something’s up. I can’t say what, but there’s something very wrong at the moment.” And I became incredibly diaphoretic, really sweaty, and pale as a ghost.

**Alison Steeves**

Had you had similar symptoms in the past?

**Chet Chisholm**

No.

**Alison Steeves**

You said you went to the ER. You consulted a healthcare provider about these symptoms?

**Chet Chisholm**

Yeah, I went in, talked to the triage nurse and said, “Hey, this is what’s going on.” And was admitted, had EKGs and stuff done, and explained, talked to the nurse. These are all people I work with, and I’m like, “Dude, what do you think’s going on?” And it’s like, “Well, I think it’s one of these things.” And they’re like, “Yeah, something’s definitely up because you never look like this.”

We did a bunch of EKGs, blood work, did my vitals, my vitals were all abnormal.

**Alison Steeves**

And did they find anything?

**Chet Chisholm**

Not at the time. I was really hypertensive. My blood pressure was up quite a bit. I was tachycardic. But the doctor didn’t seem to see anything in my blood work or my EKGs. He just said, “maybe it’s just esophageal spasms,” and sent me on my way.

**Alison Steeves**

And did the symptoms persist after that?

**Chet Chisholm**

Yeah, they never quite resolved. They would calm down, but they did persist. And any time, on any exertion or lying on my back, things would exacerbate. I’d get more short of breath. I

could, again, develop more chest pain. The fatigue persisted. Well, it still persists, but I would be pretty well bedridden some days. No energy to get up and do anything, which was entirely new. It was like a complete shift. Because I used to be up doing stuff pretty regularly. I used to be in really good shape and whatnot. So it was a drastic change.

**Alison Steeves**

And how many health care providers did you consult about these symptoms?

**Chet Chisholm**

Well, I was admitted into the emergency room three times over the course of the summer. Nothing was ultimately found, aside from having abnormal vitals and just symptoms that I presented with. The second physician that I saw in the ER kind of just shrugged and said, “Man, I don’t know what’s going on. You’re obviously in distress, something’s up, but we can’t pinpoint anything.” And the third doc I saw, which would have been probably late July, said, “I think this warrants further investigation. We should order some more cardiac tests, like echocardiogram, and you should follow up with your family doc, get a cardiac MRI, and get a stress test and see if we can pin down what’s going on. I don’t know for sure, but just on the way you’re presenting and what you’re telling us and your vitals—there’s something here, there’s something wrong, so we need to look into it.”

He actually gave me a shot of Toradol, which is a strong anti-inflammatory, which took the edge off for maybe a couple hours. But again, the symptoms persisted. I had discussions with my family physician, who was often very dismissive and abrasive about my concerns. And I’ve had a yearly follow-up that I had with WCB [Workers Compensation Board]. Because we have a follow-up every year where a physician comes in and talks to you, and it’s like, “Hey, how’s your PTSD going? What are the symptoms you’re having?” And we talked about that, and then we talked about this. And he’s like, “yeah, based on your history and kind of the cycle of symptoms, there’s something going on here, and we should look into it.”

**Alison Steeves**

Did you ask any of these physicians if there could be a link with the COVID-19 vaccine?

**Chet Chisholm**

I don’t think I ever asked if there was a link, but when they asked, “When did this start?” I told them I didn’t feel good after getting the vaccine and it hasn’t let up since. But I don’t think we ever specifically honed in. I suspected it, but do I know for sure? Absolutely not.

**Alison Steeves**

So they couldn’t find anything objectively wrong to explain your symptoms and they knew that they had started within close proximity to you taking the COVID-19 vaccine. Do you know if any of them filed an adverse event following immunization form?

**Chet Chisholm**

No, there was no discussion of that.

**Alison Steeves**

They didn't ask you any more questions about that or indicate that they were concerned?

[00:15:00]

**Chet Chisholm**

No, none whatsoever.

**Alison Steeves**

How did they respond when you mentioned that it was in relation to the vaccine?

**Chet Chisholm**

It wasn't really discussed; it was just kind of glazed over. Some of the nurses expressed more concern when they asked me. I had paramedic colleagues who expressed their concern just with the timing and some of the things that they had seen on calls that they have been discussing with me as well.

**Alison Steeves**

And have you shared your concerns about a link between your symptoms and the vaccine with others?

**Chet Chisholm**

Yeah, I've spoken to numerous family and friends and colleagues. And you get a mixed bag of the way people react. I've had people call me an anti-vaxxer, a far-right conspiracy theorist, and every other nasty thing under the sun. But then I've had others who've come to me and said, "This is what happened to me, this is what my family members experienced."

I've had medical colleagues come to me and say, "Hey man, we were talking about what might have happened to you in the hallway. The other crew that was there was talking about how they had three kids who had myocarditis and POTS and stuff coming in through 911." We don't see kids in EMS very often, and that was concerning.

But yeah, it's been a mix. I've had friends who have since abruptly stopped talking to me whatsoever. I've talked about this publicly and my concerns, and I've talked about some of the problems that we're having in EMS right now. I've had people from across the country thank me for speaking about these things. Recently, I had somebody reach out and say, "You and I have never met, but I know who you are because you helped someone in my family on a 911 call, and they still talk about you years later. Thank you for doing this. Thank you for talking. Thank you for your service, and I'm sorry for what you're going through."

**Alison Steeves**

You had concerns that these might be related to the vaccine. Your first dose—did you end up taking the second dose?



**Chet Chisholm**

No, I did not.

**Alison Steeves**

And in October 2021, when Nova Scotia implemented the vaccine passport policy and several mandates, how did this impact your life?

**Chet Chisholm**

Well, because I'm not vaccinated enough, I was banned from restaurants. I wasn't allowed to access some different services, couldn't go to the gym—not that I was feeling well enough to do so anyway. When I went in to pick up the results from my echocardiogram and copies of my bloodwork and EKGs from the hospital, I stopped at the door and they said, "You can't come in." It's like, "I'm picking up bloodwork, man, I just got to go around the corner." And it's like, "No, you need to be double-vaccinated to come in here." And it was a back and forth throughout a good 20 minutes explaining, "I'm here because we're investigating, trying to determine if something has happened with results as a result of this. I need to get that paperwork so we can figure out what happened, if anything." Eventually they're like, "Just let him go in, he's just got to go around the corner. It's 30 feet."

And one of the worst things is that one of my best friends was diagnosed with cancer during the pandemic. And because I haven't taken the shot twice, I wasn't allowed to go see him when he was dying in the hospital. I never got to say goodbye to one of my best friends. Because "you're not vaccinated enough, you're not allowed in here."

And, as many people know, the vaccine mandate for healthcare providers is still in effect. So even if I do get a clean bill of health and my PTSD is, you know, wiped clean, we're going to go. I'm still banned from going back to work: I'm not allowed to go.

**Alison Steeves**

Chet, do you have any final words about the impacts of the COVID-19 measures on your life?

**Chet Chisholm**

Yeah, it's had a significant impact, not only on my mental health, but on my physical health. Associated with PTSD as well. And you can see just with the way EMS is right now in Nova Scotia: Morale is plummeting every day since the start of 2020. We have lost 331 paramedics from the workforce, that's one quarter of the paramedics who work for EHS. We've since hired some new people, but these are people who are fresh out of school; they don't have experience. Even on my rotation, there's four of us on my rotation that have either been put off on injury or PTSD. And there's 60 years between the four of us. And that's gone, you can't get that back.

[00:20:00]

It's infuriating. It's also detrimental to the well-being of everybody in this province that there's people like me—and I'm not the only one who's in this situation—who want to go back to work. And who would like to help and who would like to fix the problem, as the EMS system is crumbling. But we're told no. I've even spoken to Michelle Thompson and the answer is, "That's the policy. We're sticking with the policy." And if you haven't seen

what the medical exemptions are to get to opt out for healthcare provider: you need to have either blood clots, myocarditis or pericarditis, a stroke, or have an allergic reaction. All of which have to result from the first shot. You have no medical exemption, it's "take it or else you're let go." Or if you have an adverse event, you're probably not going to be working again anyway.

**Alison Steeves**

Thank you. That's all my questions.

**Chet Chisholm**

No problem.

**Alison Steeves**

Do the commissioners have any questions? No.

**Chet Chisholm**

Cool.

[00:21:50]



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***Final Review and Approval:*** Jodi Bruhn, August 3, 2023.

*The evidence offered in this transcript is a true and faithful record of witness testimony given during the National Citizens Inquiry (NCI) hearings. The transcript was prepared by members of a team of volunteers using an "intelligent verbatim" transcription method.*

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