Vaxxed 3 | Authorized To Kill Premiere

- 00:02:07 Have activated the most serious response level after an outbreak of a new type of viral pneumonia in
- 00:02:13 central China. The disease COVID-19 health officials this morning are reporting the first
- 00:02:18 Coronavirus death outside of China had Coronavirus officially hitting the US. Here is what we know
- 00:02:25 days after the virus hit New York on March 11th, the World health Organization declared COVID-19 a
- 00:02:30 global pandemic new cases from entering our shores. We will be suspending all travel from Europe
- 00:02:38 the United States for the
- 00:02:43 120,000 known cases in 114 things will get worse than they are already a national emergency back
- 00:02:51 normal. That's what people want to know. When does that happen? The only thing that will really
- 00:02:55 allow life as we once do it to resume is a vaccine. This will be the new normal until a vaccine is
- 00:03:02 developed. You have to get about 70 to 85% of the population vaccinated. If you get that many people
- 00:03:11 vaccinated, you will have what we call an umbrella or a blanket of herd immunity. That means the
- 00:03:18 vaccines will get us to the end of that. But we're not gonna get there unless people get vaccinated
- 00:03:25 in the pandemic of the, of the unvaccinated. The reason we're here is because people have not gotten
- 00:03:32 vaccinated, 80 million of them. You've been patient, but our patience is wearing thin and your
- 00:03:39 refusal has cost all of it. Don't get the vaccine. You can't go to the supermarket, don't have the
- 00:03:44 vaccine. You don't show it. Can't go to the ball game, don't have the vaccine, can't go to work. You
- 00:03:49 don't have a vaccine.
- 00:04:00 The absurdity of what we live through is just, it's really unfathomable to me. The world went mad.
- 00:04:08 They went completely mad but they went mad because of unrelenting propaganda and censorship. None of
- None of
- 00:04:14 it made any sense and playing instruments inside tents, wearing masks and they're, they're, they're
- 00:04:21 blowing into horns like you go to a restaurant, you wear a mask, you take it off and you eat and you
- 00:04:26 breathe it. None of it made sense. A lot of this started with fear. Right. That's how they got
- 00:04:33 people to comply. And I was frankly shocked and they wore the masks and they stood 6 ft apart and
- 00:04:39 they stayed locked down in their house and they took the shop
- 00:04:45 that was easy
- 00:04:48 friends. Star Jennifer Aniston is cutting ties with people in her life who are unvaccinated. We have
- 00:04:54 to stop coddling the morons who will not get the shot. When are we gonna stop putting up with the
- 00:05:00 idiots in this country and just say you now it's mandatory to get vaccinated f them, their freedom.
- 00:05:06 I want my freedom to live. They are all snowflakes and cowards and idiots and losers. I just want to
- 00:05:16 say to all of you cowards out there don't be such a chicken squad. If you're willing to walk among
- 00:05:24 us, unvaccinated, you are an enemy. The persecution worked and people that I knew that I thought
- 00:05:32 would never get a vaccine ended up getting a, a COVID shot for those of us who, who got the
- vaccine.
- 00:05:39 We know, you know, look now I can stand here with my mask off and have this conversation with you. A
- 00:05:44 vaccinated person gets to the virus, vaccinated. People do not carry the virus don't get sick. We
- 00:05:50 get to herd immunity from a vaccine. The virus does not infect them. The virus cannot then use that
- 00:05:57 person to go anywhere else. That's how you get to herd immunity. Not by letting everybody get
- 00:06:01 infected. People are believing the information that they're being fed. They're not questioning it.
- 00:06:05 They're trusting the sources where it's coming from and those sources are not to be trusted. And uh
- 00:06:11 you know, prior to COVID, I trusted those sources. It's a shorter list to tell you what was true
- 00:06:17 than you know, to tell you about all the lies. Everything was a lie about the vaccine, about the
- 00:06:21 masks, about the tests, about the lockdowns, about school closures, about the safety about the
- 00:06:27 efficacy. The government was lying. The media was lying and they're still lying. They're telling us

- 00:06:35 the unvaccinated are dying in hospital. They're telling us the unvaccinated are spreading this
- 00:06:39 disease. Everything we were told was a lie. There were so many lives during COVID. It was just wave
- 00:06:45 after wave, after wave, all these things that don't add up. So there's only one thing left for us to
- 00:06:51 do. We need to get a bus and get back out on the road and find out for ourselves what is going on
- 00:06:57 because only the people will tell us the truth. We knew that from the last bus. So it was time to
- 00:07:02 get back out again. So on the first bus, we started to sign the names. So we were, we were honoring
- 00:07:09 the people that had been injured or killed by vaccinations and these were approved vaccinations on
- 00:07:14 the first tour. So it would sign the names on the bus and it would fill the bus up. I think that bus
- 00:07:19 had been incredibly important in uncovering the extent of vaccine injury. So we went to
- 00:07:27 Children's Health Defense and said we need a bus and they said, yes, see the bus for the first time
- 00:07:35 there is
- 00:07:43 and thank God for children's health expense because they managed to fund the bus and we were able to
- 00:07:47 get out on the road. I must add in much more style than the last bus.
- 00:07:54 Are we live? Excellent. We're live here in Houston, Texas with a huge announcement with a long
- 00:08:02 awaited, so much hard work behind the scenes to make this happen. So we here at
- 00:08:06 Children's Health Defense are gonna go back out on the road from September. We are gonna push
- 00:08:12 through and speak to every single one of you. What have you been through? We are
- 00:08:16 Children's Health Defense. What have your Children been through through COVID through all of the
- 00:08:22 issues that we've had over these last two years. We want to hear all of your stories. So the first
- 00:08:28 thing we did was we turned to our pad an event and it wasn't the beginning of the tour. It was just
- 00:08:34 a little surprise visit. We are live in a secret location. I cannot tell you where we are. There
- 00:08:40 were droves of vaccine injured. So that's why I was thinking, ok, we really are going to go out
- 00:08:46 there and hear just tons of COVID or vaccination, injuries and death. You are now gonna see who is
- 00:08:53 going to be our number one. Come on in. Tell everyone who you are. My name is Ernest Ramirez.
- - 00:08:59 the father of Ernesto Ramirez junior and I'm honored to be here with you. We thrilled
 - 00:09:05 Children's Health Defense unanimously shows you you're brave the way you speak out about your
 - 00:09:10 Tell everybody briefly. We do know your story, but there may be some watching that do not what
 - 00:09:13 happened to your son. Well, being a single parent, I was concerned with the COVID and they, they
 - 00:09:19 lied to us that it was safe and effective. So we went to get the vaccine and five days later, after
- 00:09:28 his first dose of uh pfizer, he died suddenly, he just collapsed and the government denies it
- 00:09:37 everyone. No one wants to be, you know, admit to the wrongdoing. And I mean, it just, uh I was
- upset,
- 00:09:44 I got suicidal. The good Lord put me in the path to try to protect other Children. So I do this to
- 00:09:49 honor my son and uh I know you'd want me to protect other, other, other kids. But that's the reason
- 00:09:58 I do this. We have to protect one another. Yes, you do. Would you sign your son's name as number one
- 00:10:06 please on the Children's Health Defense bus,
- 00:10:22 we filled it up quite a few. I mean, 2025 just from that small visit of COVID deaths and injuries.
- 00:10:28 We went back, we got the bus ready and we were ready to go. We set the tour, we had it all figured
- 00:10:34 out where we were gonna go and we officially launched. So everybody, we will be live on CHD dot TV.
- 00:10:39 Sign up for the bus alerts and we'll be going live tomorrow with stories. We're on the road, we're
- 00:10:44 going out. All right. Yeah,
- 00:11:30 they said it was safe and effective and necessary and it was none of those three really as we're
- 00:11:36 finding out now.
- 00:11:57 So after you get the shot. You're told to go wait in a chair for about 20 minutes. The lady's like,
- 00:12:03 Natalie, you're free to go. And I was like, no, I said, no, I'm not. I was like, my heart rate is
- 00:12:07 sorry, within 15 minutes, I noticed that I was starting to slur my words 40 minutes after I took
- 00:12:14 that shot, I felt like I was on fire inside like fire from within, like my skin was on fire from the

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00:12:21 head down to my toes. Kind of if somebody's pricking you with little knives all over your body. At
00:12:25 the same time, my knees started buckling. I couldn't stand up. I fell to the ground and I went
00:12:31 unresponsive. I was on the floor convulsing within three hours. I was in the hospital. My left side
00:12:38 just drooped. You could see my whole left side of my face would droop. I still can't smile and then
00:12:44 I started having a seizure. Have you ever had seizures before? No, I'm previously healthy. My blood
00:12:49 sugar was over 1400. My organs were failing. I told my husband I wasn't gonna make it. You know,
00:12:55 they were like, how long has she been dia diabetic? And he's like, never like she's, she's not a
00:12:59 diabetic. My throat is tingling and I'm covered in enough. She says we can't give her intravenous
00:13:06 Benadryl. We can't give her in intravenous steroids because it will stop the vaccine from working.
00:13:12 Well, I asked him, well, should I get the next one? He said, yeah. Either that or died from COVID.
00:13:17 You gotta be kidding me. I just had a stroke. That following morning I had the worst, most irritable
00:13:23 pounding in my head. BBB, shaky, weak, uneasy, shortness of breath, random chest pain. My
memory was
00:13:31 shot short term memory, long, long term memory. A couple of days later, I had tremors in all four of
00:13:38 my limbs. My talking was just all crazy. I was very disoriented and dizzy. Come to find out they
00:13:43 think it was a mini stroke. And then from that day on. So this is a week, seven days after my
00:13:48 vaccine, I was having three or four seizures every single day. I was getting hospitalized like every
00:13:53 other week because of because of my chest pains, I left there nine days after being admitted with a
00:14:01 nonworking pancreas on steroids on beta blockers, chronic inflammation, demyelization,
00:14:07 polyneuropathy. I have tinnitus heart palpitations, tremors, tremors, you know, my chest was
burning,
00:14:14 dizziness. I had Guillain barre postural orthostatic tachycardia syndrome, pericarditis, myocarditis,
00:14:22 myocarditis. It's a uh inflammation and damage of the heart muscle known as myocardium. Uh This
00:14:29 inflammation can reduce my heart's ability to pump blood. It can also cause chest pain, shortness of
00:14:34 breath and rapid or regular heart rhythms, which fits perfectly with what I was experiencing back in
00:14:39 California. And even now, it was just crazy. The craziest symptoms during my menstrual cycle. I have
00:14:45 huge clots that I've never had before. The long blood clots in my sinuses. This is the bottom of my
00:14:53 lung that is filled with blood. That's the day. Yeah. Every time that I see a specialist or see
00:15:00 someone new in the health or medical field that acts as if they're trying to help me and figure this
00:15:09 out. They just push me off to the next person and I've already rec clotted once. Um, those are my
00:15:18 eyes. This is a huge, um, tumor about huge, the size of a softball behind my eye. They said it was
00:15:30 the most aggressive cancer that they seen but got bounced around from hospital to hospital
because
00:15:38 nobody ever seen this type of tumor before. It's usually found in um, little kids and also dogs post
00:15:47 r vaccinations. Interferon is one of the most important chemicals that many of our cells make.
00:15:53 There's a type one interferon and this particular spike protein from this virus decreases that
00:15:59 interferon, which when that spike protein is present, those cells suppress that interferon and now
00:16:09 it can't recruit your other immune cells to fight off important things like cancer. I'm David Ras.
00:16:16 And what are your qualifications? I have a PD in chemistry and I've worked in the pharmaceutical
00:16:21 biotech industry for 20 years and I've worked since then, over 20 years in cancer research, normal
00:16:30 cancers prior to a couple of years ago. Uh, for as long as we've known about cancers are slow it
00:16:37 takes to develop uh blood cancers, typically a few years for blood cancers and decades for solid
00:16:44 tumors like colon cancer, breast cancer and things like that. These, um MRN A and DNA vaccines,
00:16:50 these genetic injections are devastating the immune system. We, we, we know that's happening
already,
00:16:57 but now we're seeing a consequence of that devastated immune system. It's an acceleration of
tumors
00:17:04 that were probably already in you to begin with, where benign probably go away on their own. You'd
00:17:08 never know you had it. Uh And, but once your immune system is really, really depressed, now these
00:17:14 things can develop rapidly, not only that, but the spike protein itself binds to certain families of
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00:17:22 genes in our body that suppress cancers. It's a whole family of genes called P 53. And there are 00:17:28 several studies showing that this spike protein can bind to that tumor suppressor family. And then

00:17:33 that tumor suppressor family can't function properly, which allows cancers to take off. We're

the

00:17:39 destroying their immune systems to the point where uh they, they can't resist the cancer and the 00:17:45 cancer cells are now growing like they are in cell culture. They don't have anything impeding their, 00:17:51 their uh their ability to proliferate. I reported to bears right away in May. And again, you're just 00:17:59 an, it feels like you're just a number and it's just a data collection. It's not even a follow up to, 00:18:08 you know, s see if you're OK. They get to judge, they get to judge whether or not this is my new 00:18:18 normal and this is what I have to fight every day. This is better than what I was before. She was in 00:18:26 the bed for basically a year before she could actually talk and be present because it was so bad. I 00:18:35 mean, she would have anywhere from 15 to 30 mini seizures throughout the day. They are starting 00:18:43 go into one. Are you having an episode? Of course. Yeah. Do you need me to stop from? I'm not. Yeah, 00:18:49 I'm ok. I'm ok. I'll be all right. What, what else am I supposed to do? So this is, this is, this is 00:18:56 the life that I have now. I can't even have my grand babies. Hold my babysit, my grandpa. 00:19:05 Sorry. Is he ok? Yeah, he's fine. Just 00:19:11 push it back. And 00:19:17 so this is not a quality of life, you know it when you start thinking, ok, how do I end my life? 00:19:23 Life is different. We're fortunate blessed that Tim is alive and, you know, doing as good as he's 00:19:30 doing today and they credit that really. All of the doctors had one thing they agreed on and that's 00:19:35 because he was in such good health before he had the shots. I went from, you know, squatting with а 00:19:43 bar and 40 fives on each side and playing college softball to my physical therapy was me sitting on 00:19:49 a table trying to lift my leg up. I spent 31 months sitting in an effusion center getting IV I, 00:19:56 that's intravenous and mu Globin. Uh just where I can do my everyday living. I can't, my life will 00:20:01 never be the same ever again. It took, driving away. It took my, I'm a professional photographer and 00:20:08 I wasn't that creative niche in my brain still doesn't function at all. I just want to find someone 00:20:18 that will help me get well and try to live the best life that I can with my family and my Children. 00:20:27 And this is about your sister. It is about my sister. Ok? Tell us what happens. Take us back to 00:20:32 oneness. And unfortunately, the story is really short. That's it. She takes the shot 10 days later, 00:20:38 she's dead. Her daughter got her heart starting. This is the hard part 00:20:49 and the um A MT S Cream 00:20:55 they um threw in the ambulance, I believe they had to start her heart again. They um took her to a 00:21:00 hospital and they um diagnosed brain aneurysm. The reason I'm here, she can't speak for herself and 00:21:08 it, it has to stop, it has to stop these things have to be off the market because they are dangerous. 00:21:13 And you know what Michael is one of the lucky ones because she's, she's, she's not suffering like a 00:21:19 lot of other people are from these vaccinations. 11 moderna, my son, Victor Samoas, he was killed by 00:21:29 the Pfizer vaccine. He only took one shot. He took it on April 20th, 2021 and a, on the morning of 00:21:37 the 16th day, he passed away suddenly. Uh, he had been feeling, um, chest pains in the morning 00:21:46 around one o'clock in the morning. And he called 911. He had a jaw of pain. He also had a racing 00:21:52 heartbeat. Uh, he called 911. The medics um, arrived, he went downstairs from his apartment where he 00:21:58 was living in Seattle and he was sitting on the bench, he started taking his blood pressure. His 00:22:03 girlfriend arrived. He says this is my girlfriend and he collapsed. He became unresponsive. The 00:22:11 medics worked on him. They took him to the, er, and he passed away. So now we are a bereaved family. 00:22:20 We are lost to a better son. Um, you know, we'll never be the same. Our lives are gray, they'll 00:22:28 never be bright again. I cry every day. My husband goes to the cemetery every day. These are, you 00:22:34 know, people don't realize, you know, you lose a family member, I'll move on. You don't move on.

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00:22:38 This is my step brother, Robert Weeks Junior. He received a shot for COVID on Friday and his first 00:22:50 shot. Yes, his first shot and was found dead on Sunday six or 89 months before he had had the J and 00:23:01 J back. They said, but you have to be boosted. Went to the nearby pharmacy and all they had was

- 00:23:09 Pfizer booster. He took it on that day, he had a, uh, blood clot to the lung and died instantly. She 00:23:19 didn't feel well at all after the booster and about two days after her booster, she collapsed, her legs were completely paralyzed. She had no feeling in her legs and she didn't, she was even 00:23:35 incontinent. She fell on the floor and they found her face down in her own urine and feces almost dead. I mean that she barely had a pulse. I said to the doctor, I said, I'm begging you, please give her a chance. She had a port that went directly to her heart and it um developed an infection and 00:23:59 she died. My wife has passed away and the doctors attributed her passing away to getting the vaccine.
- 00:24:08 She started having heart problems, her blood pressure kept dropping every time she would stand up.
- 00:24:13 They put a pacemaker in her thinking it was her heart but it wasn't, you know, and everything was
- 00:24:18 fine before we got the shots. Madonna Moderna. And did you take 22? And here I am, this is the
- 00:24:25 fourth time I've had COVID and I got both of the shots, no boosters, but both of the shots as well.
- 00:24:30 Why did I get the COVID four times if I got something that's supposed to stop it so much we're
- 00:24:35 working, it may kill us, but it's not helping to keep the virus. Out of us. I'm pretty sure the only
- 00:24:42 person that can call someone home is the Lord. And these people are playing a role of God right now
- 00:24:50 and taking lives and you cannot do that. Uh,
- 00:24:57 you know, the benefit didn't outweigh anything. You know, you can, you can, you know, pick and
- 00:25:04 choose, you know, who should live, who should die when you know, the side effects are severe and
- 00:25:11 deadly. 1200 people died from the trial. Nobody knew, nobody still knows about it and justice has to
- 00:25:19 be served. My husband can't go down as a statistic on a medical journal somewhere. He deserves far
- 00:25:25 more. The ill that a vaccine injured deserved far more. And the people that lost their lives, it's 00:25:33 fine, deserve more.
- 00:25:38 I have really good news today, our nation has achieved a medical miracle. We have delivered a safe
- 00:25:45 and effective vaccine in just nine months. This is one of the greatest scientific accomplishments in
- 00:25:51 history. The vaccines, let me say it again are safe, they are safe and they are free and they are
- 00:26:04 effective and it is that simple. The pandemic may have begun in China, but we are ending it right
- 00:26:12 here in America. People are being, are literally being mind controlled with very sophisticated
- 00:26:19 technology and subliminal programming and media persuasion where people they really like and admire
- 00:26:26 are absolutely encouraging them to do something and they can't fathom that it could be dangerous.
- 00:26:31 They just can't believe that the government would lie in a way that would kill millions of people or
- 00:26:37 disabled, millions of people. They can't fathom that if you hadn't been vaccine injured or you
- 00:26:42 didn't have a loved one and you understood that they were vaccine injured, you didn't know about how
- 00:26:47 dangerous vaccines could be. Right? Remember that for 100 years, the American public has been
- 00:26:53 inculcated with these ideas. Vaccines are safe and effective. vaccines are safe and effective
- 00:26:57 vaccines are safe and effective. And the information about vaccine injury had been censored for a
- 00:27:03 long time. Most Americans and most people around the world would have had no idea that if you got a
- 00:27:10 vaccine, you could become paralyzed, you could have a stroke, you could have a neurodegenerative
- 00:27:16 injury. You could die. Most people that would not enter into their consciousness that it could be
- 00:27:22 that severe.
- 00:27:44 I'm Claire Duly, I'm 24 years old and I'm the videographer on the Children's Health Defense bus. Hi,
- 00:27:49 my name is Caroline mcgrady and I am the outside manager for the Children's Health Defense bus. I
- 00:27:56 was expecting a lot of COVID vaccine injuries, I think. But what I didn't expect was the hospital
- 00:28:04 protocol deaths. I remember the first week I came on the bus, I was just sitting there in shock. At
- 00:28:12 first when we were listening to these stories, it was easy to isolate it to the specific hospital.
- 00:28:18 But once we kept traveling and hearing the same exact story we were absolutely shocked and it wasn't
- 00:28:26 just one, it was all like all of the hospitals were doing the exact same thing. They all came on,

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00:28:31 they all told the same exact story and all these commonalities started rising out of it. But
00:28:36 whenever one person after the next, after the next, after the next comes in and says the same exact
00:28:41 thing, you really start wondering, did these people really die of COVID?
00:28:52 I'm doing a great job. Grace. Grace had Down syndrome as you know, and she could do everything
she
00:28:59 could public speak. Uh, she played violin, she could read, write. There's nothing she couldn't do.
00:29:06 Oh, you're doing great. I taught her how to drive a car. She deer hunted with me this car. What
00:29:12 happens that Grace ended up even going to hospital in the first place? Yeah, that's, uh, that's
00:29:19 maybe the most important question.
00:29:27 What happened is on the morning of October 6th. Grace's oxygen saturation dropped to 88%. And
we
00:29:35 perceive that as an emergency because the protocol said, if that number drops below 94% admit
00:29:41 yourself to the hospital, did she look like she needed to go to hospital? No, she had a cold
00:29:47 emergency room physician said, well, I think as a preventative, let's just check Grace into the
00:29:51 hospital for three or four days, put her on oxygen and a steroid and get her home. And I thought,
00:29:57 well, that makes that makes sense. We got into the room shortly after midnight on October 7th. Uh,
00:30:03 the first day was just a blast. You know, I had a fun day with my best buddy. She was so, uh, she
00:30:10 was a blessing Polly. She was a special kid. Now that we have the records, we see that the, um, a
00:30:19 anesthesia drug called Prosed was started on the ninth and the health care power of attorney, why
00:30:25 wasn't I told what they're doing? Prosed is supposed to only be used for 34 hours for anesthesia for
00:30:33 surgery. And the package insert for that med says that if you use it for more than 24 hours, it
00:30:39 causes acute respiratory failure. And if you look at Grace's death certificate, you could go all the
00:30:44 way to October 13th and their death certificate says first cause of death, acute respiratory failure
00:30:49 with hypoxemia. So it's a cause and effect for using preso for more than 24 hours. She was on prex
00:30:55 from October 9th through 6:37 p.m. The day of her death. That's five full days. I'm a medical coder.
00:31:04 And what does that mean? You look at medical records, every kind of medical record, all the
00:31:09 diagnostics, you take that information and you put it into a code which goes to insurance and that's
00:31:16 how hospitals and physicians get paid. So if I do my job right, then the physician and the hospital
00:31:21 make the most money and they don't get sued for fraud. I worked the, er, during the start and
height
00:31:28 of COVID, I would hear patients come in if they'd have COVID, they weren't sick enough to be
00:31:34 admitted, but sick enough to get maybe some treatment. I knew doctors were doing steroids
00:31:41 occasionally just to help with some of the respiratory and coughing. But I would hear doctors say
00:31:47 sorry, there's no treatment, there's nothing we can do for you by probably August or September. We
00:31:52 started to see the waves of patients coming in with this respiratory illness even then because I
00:31:57 think the hospitals were trying to avoid overcrowding the system that we were not admitting
patients
00:32:03 like we should have. And so I think that was kind of the first look into how we could have done
00:32:08 things differently because these patients still had respiratory symptoms, but they were not severe
00:32:13 enough. So they were um being sent home and told to come back when symptoms got worse or
they
00:32:19 weren't unable to breathe. What was happening in the hospital was we stopped treating people. We
we
00:32:25 essentially told everyone to stay home, right? And not come into the hospital. And then within the
00:32:31 next, you know, so many days of patients being sent back home, they were coming back to the
hospital
00:32:37 system uh in such bad shape, the ones that were coming through the door were immediately, you
know,
00:32:43 put on a ventilator, you know, different protocols were being utilized and we started to notice very
00:32:48 quickly that the success rate of these patients getting better was next to zero. Did he have one of
00:32:52 those things on his finger to test the oxygen level? Yes. Yeah. Our primary care doctor told him, um,
00:32:59 that if it gets below 88 to go into the emergency room for supplemental oxygen. So the big
00:33:04 difference came in that my husband's pulse ox dropped really well. They took his, his vitals and his
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00:33:10 oxygen was 91. And they told us that we need to go to the hospital. His oxygen was like in the
00:33:14 eighties. So I was like, ok, now I panicked, she didn't want to go to a hospital. Um, but like so
00:33:19 many other people, we didn't know what else to do. We were following the guidelines at the time as
00:33:25 far as when your oxygen reaches a certain point you should go in. Um I didn't know and no one told
00:33:31 us that he could have just had oxygen at the house. He was having slight um, che chest tightness if
00:33:39 you can't breathe, go to the hospital. That was all they told him he wasn't improving and it got low
00:33:44 enough to the point that we needed to go to the hospital. And on the seventh, I finally said, I
00:33:49 think that we need to go to the hospital. And this was a hospital that we have doctored at for 30
00:33:54 years. We had our babies there let's get you to the hospital. Let's nip this in the bud, let's get
00:33:59 better. We could come home and the doctor literally, that was treating him, said stay out of the
00:34:04 hospital because they're killing people. I was on the phone with my daughter at the time. She was in
00:34:10 Savannah, Georgia. And she said, mother, you've got to call 911 and my husband is hearing us talk
00:34:16 and he said, no, don't call 911. If they take me to the hospital, they will kill me. And so I made
00:34:21 the worst decision in my entire life. I called 911. The last time I saw her was five days after that
00:34:29 appointment with the doctor. And when she was heading out the driveway, I could see her face
through
00:34:34 the back window lying on the gurney as they were headed to the hospital. They wouldn't let me go
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00:34:34 the back window lying on the gurney as they were headed to the hospital. They wouldn't let me go 00:34:40 with her and I met her at the ambulance bay back by the er, um, I never thought that that was gonna

00:34:45 be the last day that I saw her. I called and said, you know, when you know, can I come and see you? 00:34:50 No, you can't, you can't even come to the house at all. Did you get to see your son at any point at 00:34:56 all? Not at all. They didn't allow us in the hospital because they said of COVID. But when he passed, 00:35:01 they let us in the hospital with all the COVID patients at the time, the hospital, of course, wasn't 00:35:06 allowing anybody in support or to advocate for her that, ok. Well, we need to go ahead and admit him.

00:35:13 You have to leave. I said I wanna bring my kids in. You know, I, you know, we'll wait in the lobby 00:35:19 or whatever. We're just, no, you have to leave, we're gonna admit him. So I'm all alone. I have no 00:35:25 advocate, no family. And that is unbelievable to be in a hospital like that situation and you 00:35:33 wouldn't have anyone and you might be sleeping. You know, you're feverish, you know, you're weak. 00:35:38 It's just a very scary, very scary time. We were so quick to put him in that like we didn't hug him 00:35:45 or kiss him. I should have been allowed to, somebody should have been allowed to be with him, you 00:35:51 know, at all times they told me you can't see me longer, you know, tell him bye and I ran out to the 00:35:59 parking lot and cried for about an hour because I'm thinking, you know, it's the last of them. We 00:36:05 never were allowed to see her. We didn't get to say goodbye, we didn't get to be part of her care. I 00:36:10 said, well, I'm his healthcare advocate and he needs me with him and they said, well, you, you can't 00:36:15 go back, you have to get out of here. It's the COVID, er, and he has COVID. I said Well, I live with 00:36:20 him and then they said get out of this hospital. If you don't get out of this hospital, we're gonna 00:36:24 call the police and have you taken to jail? He was transferred to the COVID ward and I was told 00:36:29 there was no visitation and I never saw him again taking care. You know, of a lot of patients coming 00:36:36 in. You know, I saw a lot of isolation. A lot of people really truly did not know what was going on 00:36:42 with their families for the patients. They're being told that they're not allowed to have any 00:36:45 support people in the hospital with them. So they're facing surgeries, they're facing procedures all 00:36:50 along and they don't know what that outcome is gonna be and they don't have anybody to advocate

00:36:56 them. I didn't notice right away the harm of these protocols until uh I had to tell family members 00:37:05 that they couldn't come to the bedside of their dying loved ones that uh to me was a crime against 00:37:13 humanity and a violation of my oath that I knew right away should not have been happening. Uh We 00:37:21 isolate people in prison. We put them in the brig when they've done something wrong to torture them.

00:37:27 And that's what I felt like I was being forced to do when I had to tell my patients family members 00:37:33 when they couldn't come into the hospital to be, you know, their dying loved ones. Nobody contacted

00:37:39 us for, we kept trying to call, kept trying to call. My one sister is the only vaccinated one and

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00:37:49 health care proxy. They had my information and they wouldn't communicate with me. They were
just
00:37:53 going through my mother and my sister, he asked to talk to his wife. The nurse said, I'll have her
00:37:58 call you. She called back in two seconds and they said he can't talk, he doesn't want to talk. Um,
00:38:06 and so for about 10 days, he went without any, any word from his family at all. Let me have my
phone
00:38:12 back. I need to text my family. And so I text my husband, you know, um, oh my God, they've come in
00:38:20 to put me to sleep and on the ventilator. And I could tell I had no choice. II, I don't know how I
00:38:25 could tell, but I could tell and I couldn't swing my legs out of the bed and get out of there. To be
00:38:30 honest, I don't think I could have by then. So I told my family, you know, please find out, please
00:38:37 pray for me. I love you all. And so I said, can I wait for a reply? Because she grabbed my phone
00:38:42 again. I mean, she was adamant about getting this phone out of my hands and getting it in the
closet,
00:38:46 in my purse. And she said, uh, no, there's no time. So she takes my phone and she turns it off
00:38:53 because I saw that emergency. You know, like when you swipe it off and she put it in the closet,
00:38:59 they hadn't given her water all day or food. She was like water, water. I need water. She kept
00:39:05 repeating that and they refused to give it to her. Oh, no, she's not going to get water. Well, what
00:39:10 do you mean? No, she's not going to get water. No, she's not going to get water. That is a protocol.
00:39:14 Why was she not allowed water? Well, they said it was the protocol. They, they said that it was
00:39:19 because she had COVID. The COVID patients don't do well with, um, with fluids. She was in the
00:39:25 hospital for 10 days. She was never fed, she was never bathed. She was not returned. Yeah, on the
00:39:34 10th day they decided to try to feed her. Well, then Mikey, his son took him some lunch, probably
00:39:41 around noon, some food. And he said what she brought him for breakfast was still sitting on the
00:39:48 security guard's desk downstairs. He was hungry. He was thirsty. He was texting his wife like I, he
00:39:55 was hungry. He was thirsty. They were not, they did not care. They stopped food five days before the
00:40:00 vet because they know what they were gonna do. I don't know if they fed him. He wasn't fed, he
00:40:05 received no nutrition. Uh, the only fluids he was getting was through an IV. She wasn't getting
00:40:10 water, she wasn't getting food because for water every day we, we didn't, we didn't know we
brought
00:40:19 her for care. Um, and, and she was murdered. You cannot survive on 13.5 cups of water in 11 days.
00:40:28 is not possible. The ones that are still able to tax their loved ones are asking for water. I need
00:40:33 water. Isn't that one of the first things you do when someone is sick is hydrate them. And then at
00:40:39 some point, ok, we're gonna give her something just to calm her down. She has pain. So they
00:40:43 suggested morphine and I thought, well, morphine. So then my sister says it's ok, it's for pain. So,
00:40:49 ok, it's for pain. But she said, but we on the look out and watch out if they try to give it to
00:40:53 frequently and then if they increase the dosage, then there's a problem and an indication that
00:40:59 they're trying to expedite the patient's death. So she's a hospice nurse, Loraz, which is a Benzo
00:41:07 fentaNYL, which is an opiate propofol. He administered fentaNYL and the amount of drugs that
were
00:41:14 being pumped into his body. I knew we found out after his death that he was given tons of
00:41:21 antipsychotic medication. Uh, while he was in there, he was on medication that sedated him. None
00:41:28 this was asked to us as his family fentaNYL morphine. He was literally on Precedex. When I look in
00:41:38 the, when, when I look in the medical records, you're only supposed to be on that for 24 hours. He
00:41:42 was on it. I believe his entire stay 70 different medications that I was that I count 30 different
00:41:49 other drugs in 13 days. And then he would get anxiety. Well, why did he get anxiety? Because she
00:41:57 just told him he's probably gonna die. So they use that as an excuse then to get them out of van and
00:42:05 other anxiety drugs, fentaNYL, they hit him on propofol, had him on fentaNYL, propofol. He was on
00:42:11 sedatives paralytics and he was pretty much like that for nine days. He was sedated, they gave him
00:42:18 Ativan um a few, a few hours before they ventilated him. And that's around the time he got the
00:42:25 Ativan is where in his records that he has notes that they, um, you know, we're, we're saying he's
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00:37:45 they would only talk to her because they didn't say this. But she was the vaccinated one on the

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00:42:31 unaware of the risks to be intubated. So I don't know how you can have informed consent if you're
00:42:38 drugged. And so then I told her, I wanted him to have, um, Ivermectin. I wanted them to do the, you
00:42:46 know, the FLCCC protocol. And she said, I don't know what that is, but we don't do it. And I said,
00:42:53 what do you do? And she said, well, we give rem de severe and I said, well, do not give it to my
00:42:57 husband and she said, why not? And I said because it kills people.
00:43:08 My mom was murdered by the hospital COVID protocols. In 2021 I took her to the hospital and she
from
00:43:16 that point on, they just unleashed a series of protocols and gave her re to severe against her will
00:43:21 and did all kinds of things against her will. So the whole time I was fighting to get in to save my
00:43:26 mother because I am a nurse and I am completely capable of saving her and they would not let me
in.
00:43:33 They insisted that it's our policy. You can't come in for doctors and nurses on the front lines, a
00:43:37 new weapon in the fight against COVID-19, an anti viral medication proven effective in clinical
00:43:43 trials. Doctor Fauci announced a breakthrough at the White House. The data shows that Remdesivir
has
00:43:50 a clear cut, significant positive effect in diminishing the time to recovery. This is really quite
00:43:59 important when I dropped her off. I said make sure you tell them not to give you Remdesivir and
00:44:04 that you just need oxygen. So when she got to the hospital, they put 2 L of oxygen on her, on just a
00:44:09 simple nasal cannula and her SATS went up to like 95%. So I was like, ok, she's gonna be fine. Uh
00:44:17 she just needs oxygen. She'll be there a couple of days and then she'll be better and she'll come
00:44:22 home. They gave her Remdesivir at two in the morning, that first night that she was there and
00:44:27 then I didn't know about it and she didn't know about it. And then four days go by, she keeps
00:44:32 getting Remdesivir and neither one of us know about it. And then on day four is when she
00:44:37 completely declined. And when I called that night I said, what are you giving her? They named off
00:44:42 all these medications and then they said, Remdesivir. And I said, why are you giving that to her?
00:44:47 She told you not to give that to her. And they said, well, it's our protocol. My heart sank. I knew
00:44:51 at that point my mom was going to die. And so if they had just given her oxygen, like she said, in
00:44:57 the beginning, she would still be here, the combination of revere and being intubated. Definitely. I
00:45:04 mean, we're talking about, uh, and sedatives setting them up, you know, I mean, these patients
were,
00:45:09 many of them were, were intubated and put on Remdesivir. They developed kidney failure from the
room
00:45:15 divere fairly quickly. And, you know, 80% of these patients never made it home after a few doses,
00:45:22 it'll cause kidney failure and liver failure and you fill up with fluid and then uh your sentenced
00:45:30 to a respirator and then you end up in the morgue most of the time. And they said to my husband,
00:45:37 you're the only hope is Remdesivir an event. And I was like, no, uh no, that's not happening. I said
00:45:45 you gave me a terminal diagnosis. I would like the right to try Ivermectin and hydroxychloroquine
00:45:52 and Bein. And I want my priest to be allowed to come in here to give me my final sacraments. No, to
00:45:59 both. And they said, I will let your priest come in if you agree to Remdesivir. So he negotiated and
00:46:06 I said, get the priest in quick, get the priest in very quick. He came the next day with you first
00:46:15 thing and gave me my sacraments. He blessed the room and I knew that if she got the spiritual uplift
00:46:21 from that, that it would give her the strength to move forward no matter what happened. Did they
00:46:26 give you more Remdesivir? Then just the one dose I never feared dying of COVID. I feared being
00:46:32 murdered in the hospital. At that point, they gave him Remdesivir but not just five days. They gave
him
00:46:39 10 days with the Remdesivir. Even though he had no kidney issues. I found out what he was on.
00:46:46 said Remdesivir. I said, take him off immediately that doctor promised me that he took my son off
00:46:52 that medicine until the last day. And then, um, he said that his kidneys were closing down. And I
00:46:59 said, I thought you took him off and he said he was on the full dose. A few days later, they started
00:47:06 telling me that they're watching his kidneys closely. And I was like, well, why are we watching his
00:47:11 kidneys? You know, he didn't go in with any kidney problems. Did you give him Remdesivir? And they
00:47:15 wouldn't answer me. We started prescribing it and the hospital had a protocol about Remdesivir.
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	They			
	00:47:21	knew that it caused kidney damage. We had a dialysis machine running all the time in the ICU		
		because of the renal failure, people would come in with normal kidneys and then end up in renal		
		failure. That could have been Remdesivir. It could have been renal injury from dehydration and uh		
	lots	Tailare. That coala have been remacsivil. It coala have been renaringary from denyaration and an		
		of things. But protocols, it looked like protocols because it was so consistent. It was consistently		
	00:47:43	happening. We had several new dialysis patients admitted to our clinic who had been hospitalized		
	00:47:50	with COVID and they were told in the hospital that COVID had shut down their kidneys. But by that		
	00:47:59	time, I was pretty savvy and I knew what was happening. They were getting Remdesivir. The drug		
	that	tille, I was pretty savvy and I knew what was happening. They were getting Kerndesivii. The drug		
		some nurses call run death is near and that was shutting down their kidneys. COVID itself is not a		
	00:48:09	kidney disease but Remdesivir causes kidney failure in animal trials. A third of animals receiving		
	00:48:16	remdesivir had kidney failure and then organ failure. My patients seemed to decline after		
	Remdesiv			
		especially after more than two doses. They all ended up with kidney failure within a few days		
	00:48:28	were with her. When she died in the last 15 minutes, they finally let me in in the last 15 minutes.		
	00:48:35	My mom was beautiful. She was 6 ft tall. She was about 100 and 80 pounds, redhead, curly hair,		
	00:48:41	vibrant. And then when I got there, she had been completely stripped of all her dignity. Her hair		
	00:48:47	was matted. She was laying in her mess. If I had been there with her, I would have taken care of all		
	00:48:52	of that. I would have stayed with her in the hospital the entire time. In viral illnesses. You want		
		to start an antiviral as soon as possible upon first symptoms. Within the first day or two or three,		
		we knew that people who entered the hospital typically around day seven or eight, there was this		
		viral replicated phase and then there was this uh inflammatory phase that ensued. Think of it. Most		
	00:49:15	people got to the hospital usually day 7 to 8 in their disease. That's when the virus has		
	00:49:22	essentially stopped replicating. And I've been taught in my undergrad, my bachelor's degree		
	program	face according that you also not advantage to a participal Lib as one than 24 to 40 become a set according		
		for nursing that you do not administer an antiviral. Uh more than 24 to 48 hours post symptom		
	onset	face a vival infantion. This was disation was being aircraft and mationts who are becautalized with COMP		
		for a viral infection. This medication was being given to patients who are hospitalized with COVID.		
	00:49:42	Usually not until between 10 and 12 days post symptom onset. So it had no rational, logical sense to		
		use a very expensive, somewhat toxic intravenous medicine for days at a time when there's no live		
	00:49:59	virus, when it's an inflammatory condition. So just based on logic, it made no sense. We have		
	00:50:05	evidence showing that the administration of antivirals more than two days post symptom onset		
	causes	and the same the same and the same has a fit as a local scient and a same late the same and the same time to attain		
		more harm than good. The risk benefit analysis does not correlate the moment she went in to staid		
	ha			
		Remdesivir in the emergency room. I had written even before we went in like get oxygen, get		
	vitamin C			
		get all of these different protocols, get steroids, get antibiotics, whatever you need, but no		
	Remdesiv			
		no intubation. And that was the very protocol that they wanted to do. This is our policy and		
		our protocol and this is the medicine that that works the best. They immediately put him on		
Remdesivir				
		and as soon as they put him on that, everything started to go downhill. They gave me an IV dose of		
		Remdesivir every day for five days. I got sicker and weaker and sicker and weaker. As soon as he		
		gets Remdesivir within 24 hours, everything starts plummeting the page of his medical shows that		
	he			
		got two doses of Remdesivir and two doses of perceive the generic for Remdesivir in one day. So		
		technically four doses in one day and two more. The next I know all his symptoms were was he was		
	he	and declaration 2. The Mean like an ended consequence Overhold at the contract of the contract		
		needed oxygen? That's all he needed oxygen. Quote. He texted me this they have to keep, they have		
	to			

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00:51:25 figure out a reason to keep me uh because his oxygen was OK. His numbers were OK. And the

reason was 00:51:32 Remdesivir this was an experimental use product. And I knew that each one of those doses was over 00:51:40 \$3000 are COVID patients worth more to hospitals when it comes to money. According to section 3710 00:51:47 of the Cares Act hospitals are reimbursed by the government an extra 20% for each hospitalized 00:51:53 Medicare patient. So they are incentivized hospitals to use toxic drugs which kill patients. There 00:51:59 was a huge financial gain for the hospitals when these patients would die early into the treatment 00:52:08 and they were dying within a deal too of being on these protocols. But do you know what the hospital 00:52:14 got their money already upfront? Because I authorized that with the insurance companies for the 00:52:19 hospital to get paid. Any patient that was admitted that had a COVID diagnosis. They got a 20% bonus 00:52:25 for that. If they were put on remdesivir, that was a new technology and new tech codes can apply for 00:52:33 an additional 20% bonus in payment because of the risk of an unproven technology. Medicare pays 00:52:38 hospitals based on a diagnosis related group code or DRG. Every patient is given one when they're 00:52:44 discharged and it accounts for what they were diagnosed with and treated for. There's no COVID-19 00:52:50 specific code yet, but politifact a nonpartisan fact checking website says the average Medicare 00:52:56 payment for patients with similar conditions was 13,000 290 \$7 for more severe cases like use of a 00:53:03 ventilator and longer stays. The average payment was \$40,218. On top of that, the new Federal Cares 00:53:10 Act says Medicare will pay an additional 20 percent on top of the original dr they will get the lump 00:53:16 sum payment. So the faster someone dies under that protocol, the more money the hospital will make. 00:53:22 If you look at just the economics of that, you know, if they see the full two weeks, well, they will 00:53:30 make less money. If the patient is able to die faster, you make more money back up a little bit 00:53:37 because remember there was a three month lockdown that starved allopathic medicine, big medicine of 00:53:42 any money for three months. And so then they, they became desperate um to be able to make budget in 00:53:49 any way. And so you have the multi layered incentives for a diagnosis of COVID for an admission of 00:53:55 COVID for a treatment of COVID. A death from COVID was financially incentivized. Those perverse 00:54:01 incentives mean that people that didn't even have anything to do with COVID. They were never in the 00:54:05 hospital with COVID for the first place. We're going to give you a diagnosis of COVID. Probably seen 00:54:09 it on social media. A claim that hospitals are falsely tagging patients with COVID-19 to make more 00:54:16 money from Medicare, which is funded by your tax dollars. Well, when they went from, you had to have 00:54:21 symptoms to get the PCR test, there was hardly any patients that had it. And then when they switched 00:54:27 to now it's readily available. The CD C says that every hospital can do their own testing. And so we 00:54:33 brought it in house and hospitals didn't have to, um, send it to a different lab and wait a week to 00:54:38 get the results back then we could do it all the time. So then 80% of our patient population became 00:54:44 COVID positive whether they had symptoms or not, a hospital Medicare patient with pneumonia without 00:54:50 COVID is worth about \$7700 to the hospital. But with COVID that reimbursement jumps to over 9200 00:54:58 Medicare patient with acute respiratory distress syndrome requiring a ventilator without COVID the 00:55:04 bill \$34,000. But with COVID that Medicare patient now worth almost \$40,000. I got very upset when 00:55:12 brought the test up and we started running hundreds and thousands of them a week, we were having 00:55:19 sometimes up to 30% were positive and the crossing times on these, which means we had to run

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them	
00:55:27	for long times before we could even detect this virus quote unquote. And so people were being
thrown	Tor long times before we could even detect this virus quote anquote. And so people were being
	into the hospital was something that was very likely not true. You know, you have to wait 10 days
00:55:42	
00:55:48	being done on people who are positive every day and all those numbers were being sent to public
00:55:52	
00:55:58	· · · · · · · · · · · · · · · · · · ·
00:56:03	
00:56:09	specimens per patient per day to run. And what I couldn't understand because in normal cases, you
00:56:16	
	when you run a PCR test and you simply allow the machine to run all the way up to 35 which it does
00:56:28	
00:56:36	
00:56:42	
	was out in the environment. And the doctors we even put in the documentation, I don't understand
00:56:55	·
00:56:59	, , , , , , , , , , , , , , , , , , , ,
678	coming up positive and they, they have nothing wrong and that would happen. They would do like
	tests and it would be positive, but they, the patient would have nothing wrong with them and the pa
	the doctor would be really confused. Sometimes they would do, you know, four or five tests and
they	
-	would get a bunch of negatives and then they would get one positive and they would take the
positive	
00:57:22	and then treat the patient for COVID. I watched people who came in who all of a sudden got a
00:57:28	positive PC R test. When they ran their cortisol levels, they went through the roof. These people
00:57:34	
00:57:42	scared to death and they pressured people to get on ventilators too because that upped the money
00:57:49	count. The data shows that remdesivir has a clear cut, significant positive effect in diminishing
00:57:57	the time to recovery. There's numerous trials showing that it had no benefit at all. And the, the
00:58:05	thing about the evidence base for re deer, if you separate out the trials that were done by
00:58:09	independent
00:58:15	showing benefit are those with high conflicts of interest with the pharmaceutical industry. What is
00:58:19	interesting is the NIH panel of something like 23 so-called voting experts. I think something like
00:58:26	·
	means, you know, we're interested in the money and not in patients. The primary end point was the
00:58:40	
00:58:47	, , , , , , , , , , , , , , , , , , , ,
00:58:52	, , , , , , , , , , , , , , , , , , , ,
	Association actually put out a warning saying that Rend Devere was dangerous for liver disease and
00:59:06	
00:59:13	lacksquare
00:59:20	0 , , , ,
	treatment that we know has been used in hospitals. Interim results from the trial. Now show that
the	
00:59:31	
00:59:39	
00:59:46	
01:00:00	Gilead had actually applied for a new tech bonus payment for Rem Devere. So the new code was
created	for Pem Devere in April 11m And that's actually what launched the bestital protocols because
people	for Rem Devere in April. Um And that's actually what launched the hospital protocols because
	were actually doing well when they were treating them with hydro Chloroquine, which came from
01.00.12	were actually doing well when they were treating them with hydro chiloroquine, which came from

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01:00:16 operation warp speed actually. And the um hydro, the national stockpile of hydroxychloroguine
01:00:23 hospitals got a free donation of that like right at the end of March. And then three days later, you
01:00:29 know, a few days later, April 1st, the new diagnosis came out, the bonus for Ran Devere came out
and
01:00:34 it was like a line in the sand. We stopped Azithromycin and hydroxychloroquine and we went
straight
01:00:40 to Re Devere where we got the bonus. According to the Journal of the American Medical Association,
01:00:46 the bonus gives hospitals an incentive to use the medications because prior to COVID, hospitals
were
01:00:53 not typically reimbursed by Medicare for these expensive drugs. Rem DEV was originally developed
01:00:59 treat Ebola and received emergency use authorization from the US Food and Drug administration.
Back
01:01:05 in May. There were four drugs that were being tested for Ebola. Rem Deve killed more people than
01:01:12 Placebo. And the data safety Monitoring board had stopped the study where literally 53% of the
01:01:20 patient died in the failed Ebola trial and was repurposed. It was a failed Ebola drug because it
01:01:27 caused more harm than good. In the Ebola trials, it was still on patent. It was Tony Fauci's drug of
01:01:33 choice. The majority of hospital deaths were caused by Anthony Fauci because his NIH put out
01:01:40 protocols that if the hospital systems adhered to. They got bonuses, big bonuses lots of money.
01:01:48 $3000 for putting an IV in of rem Devere boom, $3000. But guess what, on top of the entire hospital
01:01:56 say a 20% bonus that could be hundreds of thousands of dollars. The data was so overwhelming
that
01:02:03 rem devi killed patients more so than Placebo. The drug had to be stopped. This was published in
the
01:02:10 New England Journal in the end of 2019. It is almost inexplicable that we have made it the standard
01:02:16 of care here. But you see how that top down control in this country, these agencies were given
01:02:21 inordinate power. It seemed like all doctors shut off their brains and just listened to directions
01:02:27 from above without questioning, without skepticism, without resistance. And so you saw that drug
01:02:32 being used into every hospitalized patient and it's absolutely absurd. There is no scientific basis
01:02:37 to use that no logical or rational reason why we should use RM Dere in every hospitalized patient.
01:02:43 If someone has congestive heart failure, the lungs are filled with fluids. If someone has renal
01:02:48 failure, their lungs also filled with fluids because the kidneys and heart are not working well to
01:02:53 get rid of this fluid. And they were putting them on these um supplemental oxygen to just push
01:02:59 oxygen in there. The ventilator was forcing oxygen in there and that was collapsing their lungs and
01:03:07 they were dying within a deal too of being on these protocols. But it's just the money. I mean, the
01:03:12 minute they saw they got bonuses from the, the PT R tests and everything. Yeah, it was, it was
money,
01:03:19 it changed, the whole thing changed the whole thing. Yeah. Yes. Um, it wasn't until we started
01:03:25 investigating where the, the, uh COVID relief money was going from the Cares Act. Um, that we, we
01:03:32 were able to track that money down from the Department of Human Services um to the different
01:03:39 agencies including the CDC and the NIH. And, uh, and then following where that money was going to
01:03:46 hospitals to reimburse them. And um what we discovered first was that C MS issued a series of
01:03:56 waivers that would allow hospitals to do things that normally they would never be allowed to do. In
01:04:03 fact, if they did some of the things that C MS waivers allowed them to do, people could have sued
01:04:09 them and just rip the financial guts out of these hospitals. I asked a question. I said, what is the
01:04:15 prognosis of a person if they get put on a ventilator? And he told me only 20% walk out alive and
01:04:22 then his nurse started crying. She had a daughter named Grace and she knew if I made that
ventilator
01:04:29 decision, Grace was gonna die. And he said to me, isn't a 20% chance better than no chance.
01:04:43 Ventilators, ventilators, ventilators, I didn't know what they were a few weeks ago besides the
01:04:50 cursory knowledge, I know too much about ventilators. Now, we discovered through that research
01:04:57 the waivers. Um something called DR S which are diagnosis related groups. And that's how the
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01:05:03 hospitals have been billing from the beginning. They were taught to bill those with the ICD 10 codes
01:05:10 that was established just for COVID. Every single thing the hospital did to a patient was allotted a
01:05:18 DRG if they came into the hospital and they were having trouble breathing, then that diagnosis
01:05:24 related group was assigned and X amount of money was assigned to that. Then if they were
diagnosed
01:05:29 with COVID, then another DRG was added. And another allotment of funds to that sometimes
hundreds of
01:05:37 drgs uh for every patient and every one of them paid premiums premium dollars to the hospitals.
And
01:05:46 um you know, when, when people first started talking about, you know, the hospitals would get paid
01:05:51 amount of money for ventilators. You know, that was just sort of hyperbole for a while until we
01:05:56 actually found the d that proved it. And that's when we found all the drds that, that paid out all
01:06:02 the big bucks for everything they did to people, sometimes up to a million dollars a patient. He was
01:06:09 intending on her being ventilated because he knew that if she was ventilated, their hospital gained
01:06:18 to gain stood to gain money upon her debt. She said I went out of this hospital. You guys are
01:06:23 killing me. I went out of here. They would not sign her papers to leave the hospital. They wanted
01:06:29 her ventilated they wanted her to die at the hospital uh the third day and then they put him on a
01:06:35 ventilator. And my research shows that most of the hospitals got between 300 and 400,000 from the
01:06:44 COVID funds for using a ventilator. Uh So a as I view it, a patient that is designated COVID will
01:06:55 bring that hospital, a medical administration between a million and $5 million. They tortured him
01:07:03 for 71 days every day. They peed me that she need to go on the vent. They said it's just for a
01:07:10 little bit, you know, she's not going to be on it for long. And I asked that if this was your child,
01:07:15 would you put her on a vent? And he said yes. And that convinced me that if the doctor would do it
01:07:21 to his child, it would be ok for me to do it. We've had so many stories I was telling you and, uh,
01:07:30 horrific. I mean, horrific. Can you tell us what you saw when you were in there? What I saw was
01:07:36 everyone in the intensive care unit was most, everyone in the intensive care unit was on the
01:07:41 ventilator. There was talk among all the nurses that those that did go on vents just never came off
01:07:47 of them alive. And that was just the general consensus among everybody that you don't put your
loved
01:07:53 ones on a vent. If you can help it within the 1st 6 to 7 months I heard in the hospital please don't
01:07:59 put these patients on a ventilator because then they have a 5050 chance of ever getting off again.
01:08:05 It really was a new way of medicine because in the days, you know, before, if somebody was really,
01:08:11 really sick you told them to go to the, er, um, when they weren't breathing well, but now the, er,
01:08:18 was the last place you wanted them to be and no one wanted to go. So I was managing acutely ill
01:08:24
         people at their home, going to their home, doing whatever I needed to do, um, to treat them. We'd
do
01:08:32 anything we could to keep somebody out of the hospital because people went in the hospital, they
01:08:38 would give you re de severe that could shut down your kidneys. They would put you on a ventilator,
01:08:46 then they had to get on dialysis and kind of circling the drain and most of them died. Very few got
01:08:53 off the ventilator. We started to notice very quickly that the success rate of these patients
01:08:57 getting better was next to zero. Most of the time they would deteriorate die and we lost 1 to 2
01:09:03 patients a day on the beds were never, um, empty for long. Um, they have some sort of a, uh, like a
01:09:10 intrant for, for employees and it's like your very own home page that everyone sees when you log in
01:09:16 every time you go to the computer. So that's where they put the messaging. At one point, they sent
01:09:21 out a message that said the FIO two settings on the ventilators had been killing people and we don't
01:09:26 know how to treat COVID. So we were trying these ventilator settings thinking that that was how we
01:09:31 were going to treat COVID. But apparently the FIO two setting was actually killing people on the
01:09:35 vents. So we're gonna stop doing that. We learned uh that that was not working. And so we're gonna
01:09:40 adjust it. And um, and I, I was shocked by that because I had already started to hear rumors that
01:09:46 patients were being killed on ventilators in the hospital, which made sense to me because we had
01:09:51 never had a flu case or a pneumonia case where someone's on a vent for a month and we can't save
01:09:56 them nurse that was in charge of the floor. Her name was Pam. She came and said she asked us
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three 01:10:01 times. It was with my mother. She said, uh, do we have your permission to vent him? And by the

- 01:10:06 time she asked, it was really, I was so agitated. Uh I, I didn't understand this was day 11. Why?
- 01:10:13 You know, we haven't been asked this, uh you know, why are you asking this over and over? And I, I
- 01:10:18 said to her, unfortunately, I am going to drive home to Birmingham. It's an hour drive. I'm gonna
- 01:10:24 get a change of clothes and I'll be back at 8 p.m. And by the time I walked in the door, they were
- 01:10:30 calling me to say they were venting my father on our way to the hospital, we actually talked about
- 01:10:36 ventilators and he said I do not want to be put on a ventilator, not unless it's an absolute dire
- 01:10:42 emergency, you know, where I can breathe at all. And, uh, he said, if they were to do that, I will
- 01:10:51 either call you or I will text you. Either way I will get a hold of you before they do that. As soon
- 01:10:57 as I got off the phone with the doctor, I texted my husband immediately. I'm like what, you know
- 01:11:03 what's going on?
- 01:11:06 Unread. He didn't text me back. No phone call.
- 01:11:13 Then that wasn't like Robert. He would have called me. He would have texted, he would have done
- 01:11:21 something and I really think that they already had him ventilated. This doctor called me again. Said
- 01:11:28 again, I needed to convince my husband to go on a vent. I said, I'm not gonna do that. His oxygen is
- 01:11:33 in the nineties. Why would I do that? His next words were ma'am to be honest with you, we told your
- 01:11:39 husband that we are going to vent him with or without his consent. I was a little bit jaw dropped
- 01:11:45 and I said, um, that's illegal and he slammed the phone down on me. Then I couldn't get a hold of
- 01:11:51 anybody. All communication stopped with my husband. I tried calling the hospital. They told me all
- 01:11:56 the nurses are in isolation. Nobody can take the call. Two hours later, same doctor called me back.
- 01:12:03 Let me know that he vented my husband two hours ago,
- 01:12:12 they are asking us to let him go. He was also telling us that there was no hope that only a miracle
- 01:12:22 can, can save them. Um Then we should start thinking about the war. So what would you, what were
- 01:12:30 they wanting you to do? Think about it? I wonder what he was supposed to be doing, I guess, to
- 01:12:35 unblock him with the meeting was only with a doctor and an administrator from that hospital. And uh
- 01:12:42 pretty much she mentions palliative care. We never got to talk to a doctor in 24 days. The only prac
- 01:12:50 nurse practitioner we talked to was from palliative care when she called us to ask us if we wanted
- 01:12:55 him resuscitated, which devastated us right there for them to even ask us that because we felt like
- 01:13:02 he was getting better. I'm waiting bedside and all of a sudden this woman comes in, she says I'm
- 01:13:06 here from palliative care and I said, why are you here? We don't need you here. Oh, they didn't tell
- 01:13:15 you I was coming and they wanted us to remove care. And we had already decided we're absolutely
- 01:13:21 doing that. Like if God wants to take him home. That can happen. But we're not removing care. I got
- 01:13:27 a call from another nurse who told me no, you can't take her. She won't go home. What happens
- 01:13:33 COVID patients is they stay here. We give them their last meal when they're done getting treatment
- 01:13:37 and then they die here. And I pretty much said over our dead bodies. Will you do that to my mom?
- 01:13:41 She's coming home and that's all we wanted for her. At that point was to be surrounded by people who
- 01:13:50 left her and cared about her. We were not going to let her die in that God forsaken evil place. They
- 01:13:58 called it like two in the morning on that Sunday said, wait, what's going on? And she said, your
- 01:14:05 husband's not going to make it. And I said, what do you mean? I'm, I'm bringing them home on Monday.
- 01:14:10 I got a phone call from the doctor and he told me he goes after you left, Kenny got really sick. He
- 01:14:17 goes, can you get back down to the hospital? And um I said, yeah, I can get there. I go, my son can
- 01:14:22 take me. So I'm under the impression, you know that I'm gonna be going to see my husband die, her
- 01:14:29 and I actually went to the hospital in the morning, dad passed away. They called us and his breath
- 01:14:33 was really low and they said that it was coming, you know, and that if we were going to be there
- 01:14:38 when he passed away that we needed to go. Now, it was at 630 in the morning and we got in the

-		
car,		
	we raced there. Um, we ran inside, they wouldn't let us up the elevators because the elevators	
01:14:50	, , , , , , , , , , , , , , , , , , , ,	
01:14:56	and I need to get up there. And they were like, you're gonna have to go a different route. And so	
01:15:01	they rerouted to the hospital. And in the time they did that, we missed his last breath by two	
01:15:05	minutes. So we walked into the room two minutes after he had, he had gone, I walk in the room a	and
01:15:13	there's my husband laying there dead and they never told me that he died. They let me walk into	a
01:15:20	room without any heads up without any sort of consultation. They just let me walk in and find him	n
01:15:25	laying there dead. But yes, I was laying in bed with her when she took her last breath because she	e
01:15:32	was vented. So it wasn't really like she took her last breath. It was just when the machine no	
01:15:36	longer was keeping her alive. I was able to stay with Kenny when I got there. He was, he was still	
01:15:44	warm. So I climbed in bed with him and I held on to my husband for the very last time and I staye	ed
	with him until his body got cold and then I kissed him goodbye for the last time before I left. And,	
	um, I buried my husband the day after our anniversary. It was the, it was October 6th and it was i	
01:16:12	the morning and they came in and they took out, took him off the ventilator and his mom was on	1
one		
	side of the bed holding his hand. I was on the end of his side and he was breathing on his own.	
	I was always like, oh, but I don't know, it was kind of hope. I was like, maybe he is ok, maybe	
01:16:41		
	But we all, you said for two hours and listen to his seat breaths and	
	it was at 1:09 p.m. What do you take this size?	
	You basically watch him, watch him die through a window like that. I don't know any spouse that	can
	do that, any child or parent that can do that.	
	The doctor called Cindy and I shortly after 10 o'clock. So he said, what did you decide relative to	
	the ventilator? And we said we're not gonna put, we're not gonna give a preauthorizations for a	
	ventilator while we were on the phone with him. The nurse increased the dose of Precedex to the	
01:17:32	maximum allowable dose while we were on the phone. We hung up the phone with him at 1055 a	at
1056 he		
01:17:40		
01:17:46		
	refuse. So now we're on a facetime call. And so Cindy and I start screaming, save our daughter. A	
	they hollered back from outside the room. She's DNR. We had no idea. So we screamed back. She	e's
not		
01:18:06	DNR saver daughter. They would, no one would come in the room. You know, we watched her die	e in
that	for anti-man and the 727 DNA are Out-all are 124b, of 2024	
01:18:11	facetime call at 727 PM on October 13th of 2021.	
01:18:31	The Washington Post is reporting that some hospitals across the country are considering a do no	τ
01:18:38	resuscitate kind of universal policy for virus patients. One Chicagoan Hospital says they want to	
01:18:45	implement it regardless of the wishes of the patient or their family members. First off the surviva	I

01:18:50 rate of people who have a cardiac arrest in the hospital is very low because remember you've been 01:18:54 monitoring the patient the whole time. So if they actually have their hearts stop or they stop 01:18:58 breathing, you sort of knew they were already pretty sick. So if you're not gonna save that many and 01:19:03 you're gonna expose a lot of people which will take them out of the system, helping others. Uh It's 01:19:08 an idea that in a war zone you would consider personally, it's gonna be very difficult for me as a 01:19:12 practicing doctor to, to disregard the wishes of a patient or their family and let them die. If I 01:19:17 have the tools when it was time for my father to die in the hospital, they only allowed two people

01:19:23 to go up there. Um So he died alone. My father died alone in the worst possible way. And it just,

01:19:32 it's horrible because there's no accountability and the guilt and regrets is left to us. You brought

01:19:41 your loved one to somewhere that they were supposed to get help.

01:19:49 Well, he told me he loved me when I left the hospital. But the last thing I heard him say actually

01:19:55 was when the doctor had called me to tell me that they had to intubate him. And I heard her say,

01:20:01 what did you want me to tell your, your wife and her? I heard him in a very strong voice and this is

01:20:07 supposedly with oxygen levels in the fifties, but in a very strong voice, he said, tell her I'm

- 01:20:13 trying.
- 01:20:16 He, the last words he said to me, um, was I love you and that was on the Tuesday after we admitted
- 01:20:26 him on Monday, I never really got to talk to him again. After that my kids were talking to him and
- 01:20:34 he wanted to say he was saying something, but they will not put the phone close to his now so I can
- 01:20:42 hear him what he was saying. So that bothers me till today that. I do not know what he told me.

What

- 01:20:49 was his last word to me or to us? What was the last thing that your daughter said to you? Hm. Mommy
- 01:20:58 don't leave me. Mommy, stay. And I waited till she fell asleep and I kissed her. They put me on
- 01:21:06 speaker phone with my husband. I told them that I loved him not to be afraid.
- 01:21:16 And he said, he said, I love you. He said I love you twice. And that's the last I ever talked to him.
- 01:21:29 It's going to I love you. Now, the second one
- 01:21:38 he's sitting, he's going and they, they have, at that point they have the CPAP machine on him again.
- 01:21:45 He's by himself. No one there. He said goodbye to me. He said he's going to, I see you. You know,
- 01:21:53 he's gonna die. I love him too much. He did. He said they're gonna put, they're gonna vent me. I
- 01:21:59 know I'm gonna die. I love you. Yeah, that's what he said to my mom. Um That's why because she went
- 01:22:07 in with normal vitals. Just a cough. I was just a worried mommy and what they did to her was just
- 01:22:14 what it destroyed her body, destroy. It is unbelievable. We may be watching this right now and
- 01:22:20 saying can be, I would not have believed it myself if I had not heard it. Not once, twice, but
- 01:22:26 hundreds and hundreds of times. And still now as I am doing this interview. I have 4050 a week
- 01:22:33 interviews of COVID hospital protocol deaths. How many did they kill? This is huge. This is mass
- 01:22:42 murder on a level that is difficult to comprehend. And then he calls me at 730 in the morning the
- 01:22:51 next day and he says we have oxygen, we have a oxygen concentrator. Two of them, I have the means to
- 01:22:59 take care of you. I'm gonna come up there and take you out home hospice and I only, I'm gonna try to
- 01:23:04 save your life. Do you wanna go? And I said, heck yeah, if I stay here, I am a dead woman. My
- 01:23:11 husband comes up there, um, with a letter, a cease and desist letter from our attorney. They, they
- 01:23:19 argued with me. Sergeant told me she's in the hospital. She doesn't need a welfare check. She's fine.
- 01:23:24 He said they're gonna have to tase me and drag me out of here. I'm not leaving without you. And, and
- 01:23:29 when they first started telling you to get out, you looked at him, you said I'm not going anywhere.
- 01:23:34 You're not gonna kill my wife. She is not your guinea pig. Finally, these two doctors came in, she
- 01:23:40 said he can't take care of you. He can't manage your oxygen. And I asked him, I said, do you have
- 01:23:47 everything you need to take care of me? And he said, yes. And I told her, I said, I'm, I trust my
- 01:23:55 husband and I'm gonna go home with him today because I would rather die at his hands. Him trying
- 01:24:03 save me than be murdered at yours. And I wanna go home and the police came in and I told him like,
- 01:24:11 you're gonna have to decide today. Am I a patient or am I a prisoner?
- 01:24:19 There's no way people can watch all these videos, see this bus tour and all these people. And I mean,
- 01:24:26 you're making it irrefutable that this is happening.
- 01:24:33 I asked the doctor about Ivermectin. He told me no, that it was not proven. And I already knew that
- 01:24:40 there had been over 54 studies proving it worked. And we requested that we, we get Ivermectin and
- 01:24:48 and hydroxychloroquine. The hospital refused. Every single thing that I asked for was denied. Every
- 01:24:54 single thing. There were so many things he should have had that he didn't. We fought for livermectin.
- 01:24:59 We fought for so many other things and they wouldn't do it for us. I mean the second you mention
- 01:25:05 Ivermectin, it's crazy. You crazy horse face even though this has been approved on the who as one of
- 01:25:11 the safest drugs. And then it said, do not administer Ivermectin patient. And family keeps asking. I

- 01:25:19 said, please give her Ivermectin. Please give her hydroxychloroquine. Please give her 10,000 mg of
- 01:25:25 liquid vitamin C. This is, this is what we want. My mom requested it. They refused. What about
- 01:25:31 Ivermectin? And he laughed at me. Hey, sec. No, no, we don't use that here. If you don't have hooves,
- 01:25:39 if you don't wear a saddle to work and if you don't stand in a field, chewing grass, then ignore the
- 01:25:46 noise on social media. Ivermectin. That's a horse dewormer. The FDA reminding us all this week not
- 01:25:52 to use medicine intended for barnyard animals. Here's the thing about the FDA, the FDA does not and
- 01:25:59 never did practice medicine. The FD determines how companies bring products and pharmaceutical
- 01:26:07 agents to market and how they market them. What we do with them is 100% up to us. But ultimately, we
- 01:26:16 are charged with as the physician to make the best choice for the patient in front of us, given our
- 01:26:22 experience and our judgment and we can literally do or use anything we think is essential and
- 01:26:29 important and worth the risk. Reward for that patient. Ivermectin is an effective antiparasitic that
- 01:26:36 has been around for a long, long period of time. Never has more inconvenient science to merge than
- 01:26:41 the science behind Ivermectin and hydroxychloroquine because both were off patent safe, used for
- 01:26:48 decades, ubiquitously available. And so it threatened everything that they were trying to do. We saw
- 01:26:54 how hydroxychloroquine and Ivermectin and other treatments were vilified and made it very difficult
- 01:27:01 to obtain where they were for a lot of people, very, very effective treatments. But if you had an
- 01:27:07 effective treatment, you could not have an emergency use authorized vaccine. The powers that be the
- 01:27:14 Tony Fauci of the world were prohibiting those therapies to come forward. Because if there was an
- 01:27:21 effective therapy, then there was no way you could get new patented drugs, biologics and vaccines
- 01:27:27 approved under emergency use authorization. So emergency use authorization means that something, it
- 01:27:34 could be a treatment, it could be a vaccine, it could be something else. They are being put into an
- 01:27:39 emergency context that they have not been licensed, that they are not absolutely known to be
- 01:27:45 effective. They may be effective. And it also means that they're subject to the 2005 prep Act, the
- 01:27:53 Emergency Preparedness Act. And basically, one of the most important things is it means you can't
- 01:27:58 sue the manufacturer, you can't sue the doctor that prescribed it and you can't sue the government
- 01:28:04 officials that made these things happen. It was wickedly successful. They pulled every trick in that
- 01:28:08 playbook. And by the way, that playbook was invented by the tobacco industry in the 19 fifties when
- 01:28:14 science was starting to emerge, that was inconvenient to the tobacco industry in terms of cancer and
- 01:28:19 all the harms that tobacco was causing. And so they did that for 50 years trying to convince the
- 01:28:24 world that tobacco is safe. They use doctors. You know, my favorite cigarette is camel. Yes.
- 01:28:28 According to this survey, more doctors smoke camels than any other cigarette. And I saw the same
- 01:28:34 thing but in reverse with Ir Mac, they politicized it and demonized it and um many, many, many
- 01:28:41 people died needless deaths because they didn't know of its efficacy. Opponents say the science
- 01:28:46 behind Ivermectin is clear. In fact, we've been sent a demonstration of just how it defends your
- 01:28:51 bloodstream from the virus,
- 01:28:57 don't do it. There's no evidence whatsoever that that works and it could potentially have toxicity,
- 01:29:03 as you just mentioned with people who have gone to poison control centers because they've taken the
- 01:29:09 drug at a ridiculous dose and wind up getting sick. There's no clinical evidence that indicated that
- 01:29:15 this works. That's not stopping popular podcaster, Joe Rogan from pushing the drug. In fact,
- 01:29:20 crediting it with helping him recover quickly from Coronavirus. More breaking news this evening, Joe
- 01:29:26 Rogan, an extremely popular podcaster announced on social media today that he has COVID turns out I
- 01:29:32 got COVID. So we immediately threw the kitchen sink out all kinds of meds, monoclonal antibodies. Uh

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01:29:38 Ivermectin, one of those drugs he mentioned Ivermectin is something more often used to deworm
horses.
01:29:44 Well, well, if it is an old horse worm, Rogan, I'm glad you're, I'm glad you're well, man, bro.
01:29:52 Do I have to sue CNN? No, do you? They're making shit up. They keep saying I'm taking horse
dewormer.
01:29:57 I literally got it from a doctor. Our chief medical correspondent, Dr Sanjay Gupta sat down for a
01:30:02 three hour one on one with controversial podcast host, Joe Rogan last night, Rogan remains a
vaccine
01:30:10 skeptic despite having caught COVID-19 himself. Does it bother you that the news network you work
01:30:16 for out and out lied, outright, lied about me taking horse dewormer. They shouldn't have said that.
01:30:24 Why did they do that? I don't know, Rogan telling his 13 million Instagram followers that he was
01:30:28 treated with several drugs and he included ivermectin on the list. A drug used for livestock. The
01:30:34 FDA and the CDC warned against using to treat COVID. Turns out I got COVID. They put a
01:30:45 video, I look like shit there. I made a video in three days and it looked too good. So CNN put a
01:30:51 filter on it and made me look yellow. This is me outside in Texas. So it's nice and sunny out and
01:30:58 look at what they did to my face. They made me look like I was ill because I wasn't scared during
01:31:04 the entire pandemic. What they would like is that when I did get sick that I was really sick and I
01:31:10 became really scared and learned my lesson and instead it's the worst case scenario for them. I
01:31:15 bounced back. I was only sick for a day. That's true. Iver Matin is off patent. Um It, it, it
01:31:22 provides no potential for the obscene profits that the pharmaceutical industry is used to enjoying.
01:31:28 If Iver Matins efficacy were known to the country and the world, it would have decimated the
markets
01:31:35 for the entire MRN a vaccine campaign. Pax Slovic mo pr monoclonal antibodies and remdesivir
you're
01:31:42 talking about markets, which in some, probably total, well over $100 billion. I told people from
01:31:51 probably April on, don't go to the hospital. They're killing people in there. Stay away. I don't
01:31:58 know what's wrong. I didn't know what was doing it. I honestly didn't know it was the vince. I
01:32:02 didn't know it was the rem Devere until I looked into it later and I was able to kind of connect all
01:32:07 the dots. Um But I knew they were killing people. So the patients were undertreated, mistreated,
01:32:14 maltreated and died because of money and it boils down to that. It really boils down to that. These
01:32:23 were fundamental violations of human rights, you know, face it. Those that were in hospitals during
01:32:29 that time were sitting ducks for, you know, whatever therapy could be foisted on them by hospital
01:32:34 administrators who were lining their pockets. At the same time, I'm adamant that, you know, we
could
01:32:40 never go down this road again where the FDA and the CD C and the, and our politicians and big
Pharma
01:32:48 and et cetera push protocols on us that um that are not only don't work but that actually harm
01:32:54 injure and even kill patients. We failed as a society, we failed as a medical community. Uh We were
01:33:07 misguided by government agencies, the NIH the FDA, the CDC and especially misguided by money
and
01:33:16 protocols. You, you are not a protocol, you are a human being, you have individual needs. And sadly,
01:33:23 so many people succumbed not to a virus, but to neglect and to wanton wanton greed. Medical
error is
01:33:33 the third leading cause of death before COVID. So hospitals have always been dangerous places.
01:33:39 Mistakes are made over medication happens all the time. Drug interactions, surgeries are botched.
01:33:45 The shift, people don't communicate, there's always risks in hospitals. But during COVID, they
01:33:51 became killing fields, the people are saying that their loved ones were killed in hospitals with
01:33:56 COVID protocol and that should never have happened. Obviously, do you believe them? 100%? II
knew
01:34:03 they were killing people. I knew they were killing people in the hospital. Um I would cry myself to
01:34:08 sleep at night even thinking about giving my speech today. Sorry, there is so much depth. I it was
01:34:16 almost unbearable. It hospitals became the place where people go to die instead of the place where
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01:34:24 people go to go to get better. They separated newborns from their moms. They let people die alone

01:34:32 without being able to say goodbye. They drugged them and they strapped them down and people 01:34:39 without being able to say goodbye to their family. Some of them just got a phone call and that had 01:34:46 never happened before the COVID protocol rolled out in 2020. So yeah, when they say they killed 01:34:53 people, I agree with them. Thank God. For those brave nurses that spoke about the discussing this, 01:35:00 that went on the hospital because they really validated what the parents and the people who lost 01:35:05 loved ones were saying many lost their licenses. I'm told they would never work in the health care 01:35:12 again because of spreading misinformation. But they were just telling us what they saw. I really 01:35:19 think about the heroes who worked inside the hospitals who helped us. And, um, some of them actually 01:35:27 snuck patients out the back door of the hospitals. And um the nurses knew because the doctor would 01:35:35 write candidate for LTC at the top of the chart and they knew that that patient was going to be 01:35:43 there until a, a COVID test came back positive and that patient was going to end up on Rem Devere 01:35:50 and probably dialysis and a ventilator and would die. Medical professionals hands were tied. Those 01:35:59 that wanted to save lives were leaving the hospitals in droves. They couldn't do that. And I just 01:36:06 made up my mind, you know, if we had any more COVID patients in the hospital that I would treat them, 01:36:10 not with Rem Devere, but with uh this math plus protocol. So that's what I did on early December 21 01:36:16 we had three new patients that showed up, probably had the omicron, but uh I decided to not give 01:36:22 me Devere and I was terminated that day. They have vilified nurses and doctors who stood up like me 01:36:29 and reported the wrong and stood against these mandates. I can't, I, I can't remain silent. I feel 01:36:35 that it would be AAA service to my patients and to our fellow citizens. Now we are left with medical 01:36:43 facilities full of people who don't have a backbone to stand up and do the right thing. I am very 01:36:51 concerned for the future of medicine in this country because we have criminalized and disciplined 01:37:00 all of the practitioners who were actually there to protect our patients and families. I was 01:37:08 inundated with people for treatment. And when the first calls came, um I heard God um say that I was 01:37:18 going to do this for his glory and I was not going to take any payment. This whole three year thing 01:37:25 was like a nightmare. But in my case, as a doctor, um it was really almost like fulfilling a calling 01:37:34 because um it needed to be treated and doctors were not treating COVID. Um And that's, that's really 01:37:43 how I think I got involved. And I realized that, hey, this is your real purpose in being a doctor 01:37:50 Thanksgiving Day 2022 a nurse called me from that hospital and said, I'm getting ready to take this 01:37:58 patient down to X ray. And I've been, I've instructed him to, when I, when I leave him in the chair 01:38:05 there by that back door, I'm gonna conveniently forget his records and I've called his family and 01:38:13 they're going to take him, he's gonna go out the back door and he's gonna get in the car and he's 01:38:17 gonna leave and we are not gonna know where this guy went because he needs to live. And, um, his 01:38:25 family picked him up and they immediately took him home and we had a doctor working in the area who 01:38:31 treated him at home and, um, and he survived and that's the kind of heroes. They work. 01:38:45 Some of these people working in the hospitals were not the evil ones that everybody depicts. 01:38:50 Everybody working in hospitals. They were actually helping us. They were just heroes. They were 01:38:56 absolute heroes. So the reason that we're doing this documentary that you're watching this 01:39:01 documentary right now is because of these people, every single person inside this bus, every single 01:39:07 picture that we have here is dead. They're killed by either the COVID shot an approved shot 01:39:13 vaccination or by the hospital protocol desk. And it's because of them that they took one for the 01:39:19 team that we know better and we'll do better as we go forward. 01:39:26 So this is just a fraction, a fraction. There's death in here of what is out there. We've only just 01:39:32 started to unravel the real count of death. So much death in America and around the world, so much

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01:39:40 death
01:39:44 and the motivation for myself and the crew on this bus as we traveled around was these faces
looking
01:39:50 out of us. So in their name and their honor. We will continue. Children's self-defense will continue
01:39:55 and we will not stop until there's justice. And this never ever happens again.
01:41:06 I found out a few months into the tour that I was pregnant. It's such a conflicting feeling because
01:41:13 I have this great joy that's been given to me this tiny little baby. And at the same time, I'm
01:41:18 listening to people, you know, have these horrendous experiences of grief. And I think to myself,
01:41:24 like, how can I have such joy and these people have had such misery in their lives. It's so sad.
01:41:32 Sawyer's story was so heartbreaking. I remember I was about maybe four weeks pregnant, five
weeks
01:41:39 pregnant whenever we met him and she, the mom brought like his urn onto the bus and was sitting
here
01:41:48 and um she was so upset. Uh I think they had actually tried for years, had finally had their miracle
01:41:56 child and he vaccinated him. He passed away one night, just the pain of that mother. She waited for
01:42:04 years to have him and I'm sitting there and I'm thinking I've been given this gift, you know, I'm
01:42:11 pregnant and I will not let Sawyer's death be in vain. You know, like I no vaccine will ever touch
01:42:19 my child. So it totally backfired on them, completely backfired on them because what they've
01:42:26 actually done is they've created so many anti vaxxers or whatever it is, they want to throw at us. I
01:42:33 have a visceral reaction to the way that we lived for those two or three years. But out of that came
01:42:39 so many people who woke up, there was an awakening. There are people who were asking
questions that
01:42:45 have never asked questions before. More and more individuals in society are starting to wake up
and
01:42:53 are starting to ask really, really hard questions. The incidence of chronic healthcare problems in
01:42:59 Children is just ginormous, all kinds of chronic health issues. There is something wrong, something
01:43:08 has happened, which has changed the healthcare trajectory of our Children. And you have to
consider
01:43:16 the vaccine. It's a huge profit center for the vaccine companies and they just want to keep making
01:43:21 vaccines for anything that they can. And they want to put it on the schedule. They've weaponized
and
01:43:25 legalized, mandating of these vaccines and poor Children. Now just to go to school have to go
01:43:30 through, you know, a battery of injections that many parents don't want them to. They know it's
01:43:36 harmful. We now know that unvaccinated Children are far healthier than vaccine Children. You
know,
01:43:40 my kids were vaccinated and I never thought twice about it. And then along came COVID where you
01:43:46 actually start questioning things. And now I realize there is none of these childhood vaccines has
01:43:54 ever undergone a placebo controlled trial. We don't know how effective they are. We don't know
how
01:44:01 safe they are. And I certainly would give great pause if I had my time again. Great pause to
01:44:08 vaccinating. My Children. Are you done with vaccinations now? And no more, are we? Oh, absolutely.
01:44:15 Any pandemic future one? Any scaremongering, any job, would either of you ever take any kind of
01:44:20 vaccination ever again? No. Do you think there is such a thing as a safe and effective vaccine out
01:44:26 there? I'm skeptical now about most vaccines. I'm 69. I'll never take another vaccine on a weekly
01:44:34 basis. I see four to eight people who have suffered an adverse event from the vaccines. Personally,
01:44:44 I would not. Have you seen the health of the unvaccinated? Yes, that to me is the most interesting
01:44:51 to actually find populations of totally unvaccinated people and then comparing them to the uh the
01:44:59 rest of us, it's quite astonishing I've seen and read too much now. I don't think so. And wow,
01:45:08 that's just since COVID began. Thank you. Well, welcome to our side. Thank you. Welcome to saving
01:45:15 babies. We just had our first granddaughter, first grandchild. Talk about giving a new baby. What
01:45:22 would you do? We kind of feel like we were given one, please. So you're probably new to all of us.
01:45:30 My, my blinders came off in March of 2020 because of COVID because of some of the things I was
01:45:36 seeing, I live in a very different world than I lived in four years ago. That's for sure. I'm
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01:45:42 praying that our kids are um heeding this warning because that's one of the biggest regrets I have 01:45:49 is, is ever taking a vaccine or, or allowing my son to be vaccinated. If I can't be transparent and 01:45:56 honest and truthful with my patients, I need to get out of here. I'm gonna go do something else. I'm 01:45:59 gonna join him in the real estate business. I, you know, I just, I'm not gonna sit there and lie. 01:46:05 Thank you. I told Loran, I said, you know, the way things were going I would rather do, I would 01:46:09 rather deliver pizzas than continue in the same model that I was in. Not harming a child. So make 01:46:17 sure those pizzas are organic. Otherwise we will we can't leave the Children. Is there anything that 01:46:23 would make you take a vaccination of any kind ever again? They would have to kill me. Nothing. 01:46:29 Nothing would make me take it. My view on vaccines has completely changed if you were holding a 01:46:36 newborn baby and it was for you. Now, would you give your baby anything? They would get not one 01:46:41 single childhood vaccine period. Full stop. End of story. They would be completely unvaccinated. 01:47:05 Mm 01:47:10 So this is bus number two. Bus number one is full. Can't get another name on it. Bus number two is 01:47:16 full. So how many buses is it gonna take? Everybody needs to know what we have seen on the 01:47:24 Children's Health Defense bus as I said, what happened during COVID could not have happened without 01:47:30 propaganda and censorship and how do we overcome that? Propaganda and censorship. It's primarily 01:47:37 through people not being willing to shut up. Silence is compliance. That's how they get us to comply 01:47:44 is by keeping us afraid and silence. It's so important to be telling women my age who are about to 01:47:49 go in to getting married to having Children about the dangers of vaccines. This is what happened to 01:47:56 my father. This is what happened to my daughter. This is what happened to my cousin. We're trying to 01:47:59 raise awareness. We're trying to remember the ones that we've lost in a way to honor them by telling 01:48:06 our story. We're hoping that we can prevent this from happening to other people. If enough people 01:48:11 stand up and say, you know, we did that the last pandemic, we're not gonna do it this pandemic. We 01:48:17 are 8 billion people against a few 1000 control Aigars. We will win this. We will be able to dictate 01:48:25 the terms of how we want to live. This is such an important time for us to document this because 01:48:34 future generations need to know what happened. Time is now for us to join forces and go forward and 01:48:40 fight this because we will win this. This human experience ties us together. But if you don't use 01:48:47 your voice, then we can't, you know what's a choir, beautiful voices singing together and you need 01:48:53 to add your voice to those other voices. So those symphonic chords can reach more of humanity. 01:48:59 People will listen. If you speak in a kind manner, use your, use your voice for good in the world, 01:49:07 you're always going to get someone to listen. If you use kindness, courtesy, firmness in truth, if 01:49:16 we don't speak out, if we don't become their voices, no one will. So this gives me so much hope that 01:49:23 they're not forgotten. They did not die in vain and that we can save people and that we can change 01:49:29 the tide. We can, we can bring a voice to the silent holocaust and we can end it so that this will 01:49:35 never happen again. Everyone's voice is important. And I think using your voice where you can, how 01:49:41 you can and reaching those years, you can, will protect generations going forward and will protect 01:49:46 Children going forward. But we'll always remember those who sacrificed to help us understand that 01:49:54 point. And I think that's what's so important about the bus and that experience. Well, I think the 01:50:00 bus is an incredible monument to the human spirit. I think it's a monument to the compassion polly 01:50:08 of you and of the team who are on the bus to listen to people's stories to, to sympathize with the 01:50:15 people who came. And it's a monument to the truth. Like I've been saying, we're up against 01:50:20 propaganda and censorship that has nothing to do with truth. It has to do with some people seeking 01:50:26 power and control. So telling the truth is a revolutionary act and showing compassion and love for

01:51:19 The scripture that I think every parent should remember is in second Timothy for God has not given 01:51:25 me the spirit of fear, but of power of love and of a sound mind, the power to rise up and speak your 01:51:36 truth.

01:50:35 people is a revolutionary act. And that's what the bus is.

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