- 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 to
- 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 to
- 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
- 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 on
- 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. I'm
- 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 son.
- 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
- 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

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00:12:49 sugar was over 1400. My organs were failing. I told my husband I wasn't gonna make it. You know,
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- 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
- 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
- 00:17:39 destroying their immune systems to the point where uh they, they can't resist the cancer and the

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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
          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 to
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.
         Sorry. Is he ok? Yeah, he's fine. Just
00:19:05
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 a
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,
         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
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00:20:08 I wasn't that creative niche in my brain still doesn't

00:20:18 that will help me get well and try to live the best life

00:20:27 And this is about your sister. It is about my sister. Ok?

function at all. I just want to find someone

that I can with my family and my Children.

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 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.
- 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 \sin 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 the
- 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

- 00:23:27 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
- 00:23:43 dead. I mean that she barely had a pulse. I said to the doctor, I said, I'm begging you, please give
- 00:23:50 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,
- 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
- 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

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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
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- 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
- 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

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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
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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 for

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

- 00:37:45 they would only talk to her because they didn't say this. But she was the vaccinated one on the
- 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. It
- 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 of
- 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
- 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

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00:44:37 completely declined. And when I called that night I said, what are you giving her? They named off
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- 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. They
- 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

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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
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- 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. They
- 00:47:21 knew that it caused kidney damage. We had a dialysis machine running all the time in the ICU
- 00:47:28 because of the renal failure, people would come in with normal kidneys and then end up in renal
- 00:47:32 failure. That could have been Remdesivir. It could have been renal injury from dehydration and uh lots
- 00:47:38 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
- 00:48:04 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 Remdesivir
- 00:48:23 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
- 00:48:58 to start an antiviral as soon as possible upon first symptoms. Within the first day or two or three,
- 00:49:05 we knew that people who entered the hospital typically around day seven or eight, there was this

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00:49:10 viral replicated phase and then there was this uh inflammatory phase that ensued. Think of it. Most
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- 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
- 00:49:27 for nursing that you do not administer an antiviral. Uh more than 24 to 48 hours post symptom onset
- 00:49:36 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
- 00:49:52 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
- 00:50:12 more harm than good. The risk benefit analysis does not correlate the moment she went in to staid ha
- 00:50:19 Remdesivir in the emergency room. I had written even before we went in like get oxygen, get vitamin C,
- 00:50:26 get all of these different protocols, get steroids, get antibiotics, whatever you need, but no Remdesivir
- 00:50:32 no intubation. And that was the very protocol that they wanted to do. This is our policy and
- 00:50:36 our protocol and this is the medicine that that works the best. They immediately put him on Remdesivir
- 00:50:43 and as soon as they put him on that, everything started to go downhill. They gave me an IV dose of
- 00:50:48 Remdesivir every day for five days. I got sicker and weaker and sicker and weaker. As soon as he
- 00:50:55 gets Remdesivir within 24 hours, everything starts plummeting the page of his medical shows that he
- 00:51:02 got two doses of Remdesivir and two doses of perceive the generic for Remdesivir in one day. So
- 00:51:09 technically four doses in one day and two more. The next I know all his symptoms were was he was he
- 00:51:16 needed oxygen? That's all he needed oxygen. Quote. He texted me this they have to keep, they have to
- 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

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00:51:40 $3000 are COVID patients worth more to hospitals when it comes to money. According to section 3710
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- 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

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00:54:01 incentives mean that people that didn't even have anything to do with COVID. They were never in the
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- 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 a
- 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 I
- 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 them
- 00:55:27 for long times before we could even detect this virus quote unquote. And so people were being thrown
- 00:55:34 into the hospital was something that was very likely not true. You know, you have to wait 10 days
- 00:55:42 after the first test before you do the test again to make sure you're not positive. Well, tests were
- 00:55:48 being done on people who are positive every day and all those numbers were being sent to public
- 00:55:52 health as new numbers. Even though it's from this one, same person. The other thing that went very
- 00:55:58 wrong is when I would purport a negative test, they would send me five more samples to run. And I
- 00:56:03 said, well, I've already done it and they said it doesn't matter, keep running up. I got to up to 10
- 00:56:09 specimens per patient per day to run. And what I couldn't understand because in normal cases, you

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00:56:16 don't run things multiple times over and over. I realized later that they were fishing for positives
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00:56:23 $\,$ 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 all the time and then count any sample you want to, that reaches a certain amount of amplification

00:56:36 as a positive without knowing where zero is. Then of course, you're going to have this 60% false

00:56:42 positive rate. The ones that were coming up at 38 48 40 42 cycles were probably just garbage that

00:56:49 was out in the environment. And the doctors we even put in the documentation, I don't understand

00:56:55 $\,$ this. It's like the patient doesn't have anything I can treat. I keep doing the PC R test. It keeps

00:56:59 coming up positive and they, they have nothing wrong and that would happen. They would do like 678

00:57:07 tests and it would be positive, but they, the patient would have nothing wrong with them and the pa

00:57:12 the doctor would be really confused. Sometimes they would do, you know, four or five tests and they

00:57:17 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 and when your cortisol goes up, your immune system plummets. People were literally scared, being

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 18 of the experts had financial ties to Gilead. So that's called a conflict of interest. And it

00:58:34 means, you know, we're interested in the money and not in patients. The primary end point was the

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00:58:40 time to recovery, namely the ability to be discharged.
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- Well, first of all, I'm glad you brought up
- 00:58:47 Rendez, uh, horrible drug. I mean, unfortunately I used it in the beginning because I didn't know
- 00:58:52 any better. And that was the accepted drug, but it was 20 in November of 2020. The World Health
- 00:58:59 Association actually put out a warning saying that Rend Devere was dangerous for liver disease and
- 00:59:06 kidney shutdown. And in the US, somehow that was ignored. Remdesivir brought in \$873 million for
- 00:59:13 Gilead in the quarter. The world held organization, a number of doctors in an article in the British
- 00:59:20 Magical Journal did say that they do not recommend rem de severe and that is Gilead Sciences
- 00:59:26 treatment that we know has been used in hospitals. Interim results from the trial. Now show that the
- 00:59:31 other two drugs in the trial, Rem De Sevier and Interferon have little or no effect in preventing
- 00:59:39 death from COVID-19 or reducing time in hospital. This will be the standard of care, the standard of
- 00:59:46 care, the standard of care.
- 01:00:00 Gilead had actually applied for a new tech bonus payment for Rem Devere. So the new code was created
- 01:00:07 for Rem Devere in April. Um And that's actually what launched the hospital protocols because people
- 01:00:12 were actually doing well when they were treating them with hydro Chloroquine, which came from
- 01:00:16 operation warp speed actually. And the um hydro, the national stockpile of hydroxychloroquine
- 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 to
- 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 into
- 01:04:57 the waivers. Um something called DR S which are diagnosis related groups. And that's how the
- 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 X
- 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 three
- 01:10:01 times. It was with my mother. She said, uh, do we have your permission to vent him? And by the third
- 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 not

- 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 with
- 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,
- 01:14:43 we raced there. Um, we ran inside, they wouldn't let us up the elevators because the elevators
- 01:14:50 didn't open to the COVID floor till seven. And I was like, my dad's literally upstairs like dying
- 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 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
- 01:15:25 laying there dead. But yes, I was laying in bed with her when she took her last breath because she

- 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 stayed
- 01:15:52 with him until his body got cold and then I kissed him goodbye for the last time before I left. And,
- 01:16:02 um, I buried my husband the day after our anniversary. It was the, it was October 6th and it was in
- 01:16:12 the morning and they came in and they took out, took him off the ventilator and his mom was on one
- 01:16:23 side of the bed holding his hand. I was on the end of his side and he was breathing on his own.
- 01:16:34 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 they're just roll up and I know she thought it too.
- 01:16:49 But we all, you said for two hours and listen to his seat breaths and
- 01:16:58 it was at 1:09 p.m. What do you take this size?
- 01:17:03 You basically watch him, watch him die through a window
- like that. I don't know any spouse that can
- 01:17:09 do that, any child or parent that can do that.
- 01:17:14 The doctor called Cindy and I shortly after 10 o'clock. So he said, what did you decide relative to
- 01:17:21 the ventilator? And we said we're not gonna put, we're not gonna give a preauthorizations for a
- 01:17:26 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 at 1056 he
- 01:17:40 put an illegal do not resuscitate order on Grace's chart. Jessica called us panicking. She said, Dad,
- 01:17:46 Grace's numbers are dropping like crazy. I said, get the nurses in. She said I've been trying, they
- 01:17:50 refuse. So now we're on a facetime call. And so Cindy and I start screaming, save our daughter. And
- 01:17:58 they hollered back from outside the room. She's DNR. We had no idea. So we screamed back. She's not
- 01:18:06 DNR saver daughter. They would, no one would come in the room. You know, we watched her die in that
- 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 not

- 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 survival
- 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 to
- 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 Ivermectin.
- 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 ${\tt I}$
- 01:29:32 got COVID. So we immediately threw the kitchen sink out all kinds of meds, monoclonal antibodies. Uh
- 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.

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01:33:45 The shift, people don't communicate, there's always risks in hospitals. But during COVID, they
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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%? I I 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

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 died

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 her
- 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
- 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
- 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

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01:47:49 go in to getting married to having Children about the dangers of vaccines. This is what happened to
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- 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 the
- 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
- 01:50:35 people is a revolutionary act. And that's what the bus is.
- 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.