

Mr. Chairman and Distinguished Members of the Committee,

My name is Anne Teixeira. I submit this statement as a factual account of the medical treatment my mother, Mary Jean DeGroat, received while hospitalized. As her daughter and Medical Power of Attorney, I witnessed institutional decisions that directly impacted her care, survival, and passing under standard hospital COVID-19 protocols at Dignity Health Mercy Gilbert in Arizona.

My mother passed away on December 16, 2021. She was the independent, loving matriarch of our family—mother to six, grandmother to seven, and great-grandmother to six.

At intake, paperwork was signed on her behalf by verbal agreement, without the required witness signature, stating she did not want family notified and placing a Do Not Resuscitate order. After I provided MPOA documentation and my mother stated she wanted all measures short of intubation, the DNR was removed. Five days later, she called distressed, saying it had been reinstated. The nurse denied this DNR. Hospital records confirmed a physician had reinstated it against her wishes.

She was isolated, allowed only one thirty-minute visit daily. Staff knew of her hearing loss but made no accommodations. She received minimal assistance with mobility and toileting and was reprimanded for removing her oxygen mask to get water. Her phone, glasses, water cup, and the pen and paper I left were routinely out of reach.

She called and texted daily she was hungry and thirsty, once texting, "Just some ice chips would be nice." Despite our daily requests for food and water and repeated staff assurances, hospital records show she received only 13½ cups of water over eleven days and minimal food: 5% of dinner day four, minimal days five through seven, and 10% of one meal day 10. Requests for a feeding tube, IV fluids, Ivermectin, monoclonal antibodies, and IV vitamins were denied.

Communication was limited and, at times, false. On day nine, my brother was told she was receiving therapies when records show she was not. Staff failed to chart our requests for food, water, and

IV fluids until day nine. Requests for alternative treatments were never charted. My MPOA status was not documented until day ten. Nurses documented encouraging food and water on days records show she received little to none.

Negative references in her chart regarding her unvaccinated status lead our family to question whether discrimination affected her treatment.

Removing our mother from the hospital was difficult. One nurse stated, "What happens when they're ready to be done with treatment is that they have their last meal here and die here." After home hospice was arranged, she was made NPO without our knowledge or consent and denied basic comfort care until release nearly twenty-one hours later. When we arrived, she was dehydrated and significantly weakened. A nurse repeatedly refused her request, and her children's, for a single ice chip, stating, "It's the protocol when they're going home," despite a

dietitian's note two days earlier authorizing food and drink for comfort.

Hospital records show she was given morphine and Ativan before transfer without informed consent. She was brought home December 15, 2021, and passed away the following day, surrounded by family.

Our discrimination complaint to HHS was denied because the hospital took eight months to provide the requested records. HHS requires complaints within six months of incidents. I ask the United States Senate to investigate pandemic hospital protocols, including isolation; lack of informed consent; lack of Right to Try; unwanted DNRs; potential financial incentives; the withholding of food, fluids, and basic hygiene care; and interference with family advocacy, to ensure future protection of patient rights.
Anne Teixeira