

My name is Briana Ross. I am the widow of Jason Christopher Ross, a mother of three, and the person who advocated for Jason throughout his hospitalization. I hold two Bachelor of Science degrees from Georgia State University and have spent my life learning, teaching, and helping others. I am not a medical professional, but I am a dedicated researcher and advocate who worked to understand Jason's care and communicate effectively with his medical team.

Jason was not a statistic. He was my healthy, 36-year-old husband, our children's father, and a United States Marine Veteran, who served as a Corporal from 2003 to 2009, including service during the Iraq War. Jason was a kind man who wanted to help others. He was the type of person who would give the shirt off his back to someone in need. He loved being a husband and father, and our family was incredibly close. We built a life together, blended our family, bought a home, and welcomed our daughter, America.

Before and throughout Jason's hospitalization, I worked to be an informed and respectful advocate. I spent years learning about health and wellness, and months researching C19 treatment options, before Jason became critically ill. I approached his medical team calmly and respectfully, asking questions and seeking understanding. My goal was to work together, not against them. *However, my requests to discuss alternative treatment options were repeatedly denied, and I was told the hospital followed a standard protocol.*

October 7, 2021: Jason was admitted to Piedmont Fayette Hospital with COVID-19 viral pneumonia, shortness of breath, and low oxygen saturation. The emergency room physician documented concerns regarding Jason's kidney function, and she noted he was *not considered a candidate for remdesivir*, due to acute kidney injury. *Despite this warning*, after transfer to the ICU, *remdesivir was initiated*. Due to COVID-19 restrictions, I was not allowed to be with Jason after admission.

October 8–9, 2021: Jason remained on high-flow oxygen. Emergency intubation was recommended. On October 9, when I was briefly allowed to be present, I personally observed his *oxygen levels decline after Remdesivir administration*.

October 10–11, 2021: I received text messages from Jason asking for water, food, and other basic care. He told me he felt neglected by staff. His vital signs declined further when sedatives were administered. For days, he begged to go home, but I was threatened with police, and Jason was told he would die if he left. *The hospital would not let him leave with an AMA.*

October 12–14, 2021: Jason, under constant pressure from staff, reluctantly agreed to intubation/mechanical ventilation because he was too weak to advocate for himself. He was started on fentanyl, cisatracurium, midazolam, and propofol. *On October 13, medical records document that propofol was discontinued after causing severe bradycardia requiring atropine.* Jason later began weaning from sedatives and appeared to improve. He was also being weaned from the ventilator to be extubated.

October 15–20, 2021: Jason developed severe sepsis and received antibiotics. *Pseudomonas aeruginosa* infection was confirmed, and the treating physician documented it as a *hospital-acquired infection*. After an aspiration event, sedation and mechanical ventilation were restarted. *Propofol* was restarted despite the prior documented bradycardia event, followed by another *critical decline* requiring emergency intervention called “Code Blue”.

October 21–25, 2021: Jason's oxygen levels continued to decline, despite showing improvement on the x-rays . Medical records reflected significant concerns regarding his respiratory suppression associated with the sedative medications. On October 25, during a dialysis procedure, Jason suffered cardiopulmonary arrest and died.

*After Jason's death, an autopsy toxicology report identified a fentanyl concentration classified as an overdose level and documented a level eight times higher than the stated overdose level referenced in the report.*

I respectfully ask the Senate to examine protections surrounding informed consent, family communication, patient advocacy, transparency in treatment decisions, and accountability during medical emergencies.

Thank you for hearing Jason's story.