

Thank you Senator Johnson for allowing us to put people and faces to the statistics that are generally what everyone sees. Thank you to the health professionals and advocates that have come today to support the families of the victims of the hospital response to Covid-19.

My husband of 45 years, Steven Martin, Sr., entered the hospital with low oxygen on 9/16/21, 24 days of constant battle later, he was gone.

I advocated for Dr. Marik's IV Vitamin C protocol for sepsis, also Vitamin D3, zinc, Ivermectin, as well as every study from across the world that my eldest son found that showed promise. I learned later my sons sent food and refreshments to the nurses repeatedly. The contempt from doctors, when I met them was palpable. Denied the Right to Try, that's only for experimental drugs.

9/16/21, Steven refused to go to the ICU until he saw me. I met the doctor, who said he was going to use remdesivir. I said no, it would kill his kidneys and liver. He ignored me. His death certificate listed Acute Kidney Injury. That day he began receiving Lorazepam, a respiratory depressing sedative. 27 doses between 9/16/21 and 9/23/21. NO breathing treatments.

9/21/21, 12:28 am, Precedex started. In addition to Lorazepam. At 1:20 am the call came, Steven must be intubated. We were allowed to say our "I love yous" by phone. 20 minutes later the ventilator was canceled. Precedex can cause Acute Respiratory Distress in 24 hours. Steven received 16 doses across 74 hours and 45 minutes.

9/23/21, A successful lawsuit for another patient gave me visitation. Steven didn't know me at first, he was sleepy and slurring his words. I did NOT know he was on 2 sedatives.

9/24/21, The pulmonologist summoned me because Steven had agreed to go on the ventilator. We agreed on NO ventilator before he went to the hospital. Unaware of the sedatives on board, I felt I had to agree. The classic definition of "no informed consent". The records show he received vecuronium, midazolam, fentanyl, nimbox, propofol and a growing list of blood thinners, insulin, steroids, pressors, finally nutrition and breathing treatments.

9/25/21, Informed Steven's kidneys are stressed.

9/27/21, Hemodialysis started. Steven was moved to another room, with a roommate. It felt intrusive, so I stood next to Steven, farthest from the other patient, but where I could see him clearly. He was also on a ventilator. However his hands were tied to the bed rails. Every 5 or 10 minutes he would pull himself upright, with his head thrown back, appearing to gag on the tube in his throat. It was all totally silent. Occasionally a nurse would appear to take that man's vitals. I left the hospital thinking that they were psychologically attacking me, as a warning that Steven might go through that.

10/4/21, X-ray shows a halo around Steven's heart. Fluid in the chest cavity, squeezing the organs. A bacterial infection in the lungs is found, antibiotics begin after identification.

10/5/21, Summoned to the hospital, the pulmonologist ordered the removal of hemodialysis, withdrawing ALL treatment for kidney failure. He stated Steven had hours to days to live. I asked for the nephrologist. She told me the doctor refused to allow her to change to CRRT dialysis, I ordered it.

10/10/21, Records show Vecuronium was given around the time I arrived. Death row cocktail in some states? Midazolam, potassium chloride and vecuronium. ALL were on board, plus the list above. Steven passed at 1:36 pm. Around 9 pm the funeral home called me for a status update. An approximate 6 hour delay to get Steven's body released? I had to argue with an organ donor program to allow the funeral home to pick his body up.