

Cynthia Schrock and I was a wife and am a mother, grandmother and kidney transplant recipient living in Florida. In August 2021, COVID-19 devastated her family of eight. Seven contracted the virus, five were hospitalized, and two passed away. Her pregnant daughter was the only one spared. Cynthia's household went from five people to two in a matter of weeks.

Eric Schrock, Cynthia's husband, was 56 years old. He had no known comorbidities and a clean physical the prior year. He worked as a real estate broker and property manager. Chronology of Illness and Treatment of Eric

Symptoms began August 15. On August 20, Eric went to the ER at Doctors Hospital, received only an inhaler and prednisone, and no chest X-ray was performed. That same day, Cynthia received monoclonal antibodies at Tampa General.

On August 24—his mother's 89th birthday—Eric was admitted to Sarasota Memorial Hospital with severe shortness of breath and chest pressure. That evening, Cynthia called two ambulances for his elderly parents, who also tested positive.

A cardiologist noted heart issues on August 25. On August 26, Eric was refused monoclonal antibodies despite the heart condition qualifying him; the hospital had a monoclonal clinic on site but cited protocols. The cardiologist advised focusing on COVID recovery first.

Eric received Remdesivir, a drug associated in some reports with potential kidney and heart effects. Family milestones occurred amid isolation: his mother passed on August 30 after Eric was informed by staff in the ICU on high-flow oxygen and told to notify siblings himself. His father turned 90 in the hospital, Eric turned 57 on September 1, and their first granddaughter was born floors below. Protocols barred visits.

On September 2, Eric became a grandfather via FaceTime, crying as he heard his granddaughter's cries and texted his desire to hold her and return home. On September 4, he endured a rough night with breathing struggles, neck swelling from air leak, and an EKG after staff suspected another heart event.

On September 7 at 2:24 p.m., Eric texted that he had been moved to a step-down unit as he was improving. Several hours later, at 9:30 p.m., the hospital called for intubation permission. Cynthia's last words with him: he said, "I'm fighting, and I love you."

He was intubated that night. On September 12, while being flipped, his tube dislodged, causing cardiac arrest; he was revived and re-intubated. The family was never notified.

On September 13, staff pushed for dialysis; Cynthia's kidney specialist intervened, determining it unnecessary after medication adjustments.

On September 14 at 7:00 a.m., Cynthia received the call: "Cynthia, this is Dr. H. We lost Eric." No prior warning.

Medical records (5,462 pages) revealed an untreated heart attack on admission: troponin 323 then 363 (normal <60), NSTEMI, ejection fraction 25%. Cardiac care was deferred. Monoclonal antibodies and ivermectin requests were denied. Eric endured a 22-day

untreated heart attack. Cynthia spoke to a doctor only twice during his hospitalization and never saw him after dropping him off August 24.