

My name is Kimberly Overton, I am a registered nurse, patient advocate, founder of Remnant Healthcare and Nurse Freedom Network. I am submitting this statement in response to the request for testimony regarding the hospital protocols implemented during the COVID-19 pandemic.

While I am not submitting testimony regarding one singular patient case, I believe my perspective as a critical care nurse who worked directly at the bedside during this period is important to the public record. What I witnessed inside the ICU was not isolated. It was systemic. It was protocol-driven. And in many cases, it felt less like individualized patient care and more like an assembly line of suffering and death.

I watched as policies changed constantly, often with little transparency, consistency, or scientific rationale. Experienced clinicians who questioned the protocols were ignored, silenced, or threatened. Critical thinking seemed to disappear in favor of blind compliance. Nurses and physicians were pressured to follow rapidly evolving mandates without meaningful discussion regarding risks, outcomes, or alternatives. I witnessed the widespread use of Remdesivir despite growing concerns among bedside clinicians regarding kidney injury, liver failure, and poor patient outcomes. I watched patients decline rapidly after initiation of treatment, yet concerns raised by nurses were frequently dismissed. Families were often unaware of the known risks associated with these medications and had little opportunity to advocate due to strict visitation restrictions.

Perhaps one of the most heartbreaking aspects of this era was the isolation. Patients were separated from loved ones during the most vulnerable moments of their lives. Family members were often prohibited from visiting, even when patients were critically ill or dying. Nurses became the sole witnesses to immense suffering, holding phones and tablets so families could say goodbye through screens. Human connection, touch, advocacy, and dignity were stripped away in the name of “safety.” I also witnessed what appeared to be unnecessary or premature intubations and aggressive ventilator management strategies that, in many cases, seemed to worsen outcomes rather than improve them. Fear dominated decision-making. Patients who may have benefited from early interventions, mobility, nutritional support, nebulized therapies, or individualized care often instead found themselves rapidly escalated toward sedation, mechanical ventilation, and prolonged decline.

There was very little focus on prevention, immune support, metabolic health, early outpatient treatment, or mitigation of downstream damage. Instead of empowering patients and clinicians with options, there appeared to be a rigid adherence to narrow treatment pathways while alternative approaches and repurposed medications were dismissed outright, regardless of emerging data or physician experience.

As nurses, many of us experienced profound moral injury. We entered healthcare to advocate for patients, preserve dignity, and provide compassionate care. Yet during this period, many bedside clinicians felt powerless to question protocols, advocate for individualized treatment plans, or

speak openly about what we were witnessing. The emotional and psychological toll on healthcare workers has been immense and continues to this day. I understand the gravity of the claims being discussed publicly regarding COVID-19 hospital protocols. I do not make these statements lightly. However, I believe the American people deserve a transparent investigation into what occurred inside hospitals during this time, including the influence of federal guidance, financial incentives, pharmaceutical interests, administrative pressure, and the suppression of dissenting medical opinions.

I would be honored to provide further testimony, participate in interviews or hearings, and answer questions regarding the protocol mindset and bedside realities many of us witnessed during the pandemic. My experience at the bedside is also highlighted in the book, *What The Nurses Saw*. For additional background and personal reflections regarding my experience as an ICU nurse during this time, I invite you to review my Substack article: “When I Began Questioning Everything”

<https://open.substack.com/pub/nursefreedomnetwork/p/when-i-began-to-question-everything>

Respectfully,

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Founder

Nurse Freedom Network and Remnant Healthcare