

FOR THE RECORD

My name is Nicole Riggs. I submit this testimony regarding the hospitalization and death of my father, Ralph Marxen Jr., at Abbott Northwestern Hospital in September 2021.

My father was 70 years old. He was a devoted husband of 50 years, a loving father of two children, grandfather of six, and great-grandfather of seven. Two of those great-grandchildren were born after his death, and another is expected this month. His death left a void that can never be filled, and we continue to grieve the years our family lost with him.

During his 16-day hospitalization, my father received 56 medications. Our family requested Ivermectin and Hydroxychloroquine, but those requests were denied. We also requested Vitamin D and were told it was “not appropriate during this admission.” Hospital staff advised that refusing a COVID-19 PCR test would mean certain treatments might not be available without a positive result. After testing positive, he was started on Remdesivir despite previously refusing experimental or investigative treatments.

This experience raised serious concerns about informed consent and patient autonomy. My father clearly expressed his wishes regarding experimental treatments, yet those wishes were not honored. We ask whether current policies adequately protect a competent patient's legal and ethical right to refuse medical treatment, particularly during public health emergencies.

As his condition deteriorated, he was transferred to the intensive care unit. According to his medical records, he had gone five days without eating and two days without sleeping before agreeing to mechanical ventilation. The records state he consented because he was “so tired and hungry.” Our family believes that decision reflected desperation rather than meaningful informed consent.

His final Explanation of Benefits for his 16-day hospital stay totaled \$1,284,878.36.

The hospital's visitation policies caused profound emotional distress. For 16 days we were denied access to my father and were unable to participate in meaningful in person discussions surrounding his care while critical medical decisions were being made. Communication was controlled through the hospital, and despite repeated efforts to advocate for him, we felt excluded from decisions affecting his life.

We were finally permitted to visit only after staff believed he would likely die and expected us to authorize withdrawal of life support. We wore extensive protective equipment that made communication difficult. We prayed with him, read Scripture, comforted his sedated and paralyzed body, assured him of our love, and reminded him he would soon have a heavenly body free from pain and suffering.

Before entering the hospital, my father took no daily prescription medications other than occasional medication for acid reflux. Yet within two weeks he developed multiple organ failure, including renal failure, sepsis, acute respiratory distress syndrome, tachycardia, hypertension,

hyperkalemia, and endocarditis, developed MRSA bacteremia, Haemophilus influenzae, and GMB infections.

Our family retained a Legal Nurse Consultant to independently review my father's complete hospital records. According to that review, failure to adequately identify and treat his infections led to sepsis, which the consultant concluded was the likely cause of his death.

I recognize the challenges healthcare professionals faced during the COVID-19. At the same time, those circumstances should never diminish the importance of informed consent, patient rights, transparency, family involvement, and accountability. I respectfully ask this committee to examine these issues carefully, determine whether existing safeguards were sufficient, and consider reforms that better protect patients and families. My father deserved compassionate, patient-centered care that respected both his wishes and his dignity. It is my hope that sharing his story will help bring meaningful changes so other families do not experience the same loss and unanswered questions our family continues to carry.

Respectfully submitted,

Nicole Marxen Riggs