

May 19, 2026

Mr. Chairman and distinguished members of the committee:

My name is Tammy Vandermillen, and I am writing to share the story of my husband, Daniel Vandermillen, whom I lost during the COVID-19 pandemic. Daniel was 55 years old, physically fit, and active before he became ill. He was admitted to MercyOne Hospital in Dubuque, Iowa, on November 28, 2021, for treatment of pneumonia. He remained hospitalized for 34 days and passed away on December 28, 2021.

More than four years have passed, yet the grief, unanswered questions, and desire for accountability remain with me every day. I respectfully ask for the opportunity to speak with you and your team regarding Daniel's hospitalization and the concerns our family continues to have about the treatment he received.

One of the most difficult aspects of Daniel's hospitalization was the isolation policy. For the first 23 days of his 31-day stay, I was not allowed to see my husband. During this same period, our son, Charlie, was only 19 years old and attending college at St. Norbert College. Our family endured weeks of fear and uncertainty while being largely separated from Daniel during the most critical time of his illness.

According to Daniel's medical records, he received six doses of Remdesivir between November 29 and December 3, 2021. Physician notes indicated abnormal liver function tests that were believed to be related to the medication. During his hospitalization, he was frequently placed on BiPAP support and underwent approximately 46 documented uses of the device. Medical records indicate that he later developed pneumomediastinum, a condition involving air leakage into the chest cavity, which was associated with the high oxygen flow requirements he experienced.

Daniel also faced numerous additional complications during his hospital stay. These included hypovolemia, steroid-induced hyperglycemia, supraventricular tachycardia with heart rates ranging from 132 to 168 beats per minute, and a pulmonary embolism despite receiving Enoxaparin. His records further note concerns regarding possible heparin-induced thrombocytopenia, which scored 4 out of 6 on the HIT assessment scale.

Another troubling issue for our family was Daniel's nutritional status. Records indicate multiple days during his hospitalization when he received no food, including eleven separate dates throughout December 2021. We continue to question how this may have affected his strength and ability to recover during such a prolonged illness.

Daniel was also administered numerous medications for pain and anxiety management, including Toradol, Morphine, Ativan, Remeron, Prozac, and Zoloft. Additionally, according to the records we reviewed, antibiotics were not initiated until December 14, more than two weeks after his admission.

The final day of Daniel's life remains deeply painful for me. I vividly remember a physician telling me, face to-face, that my husband "needs to go." Those words have stayed with me ever since and continue to raise questions about the decisions made during his care.

I recognize that healthcare workers faced extraordinary challenges during the pandemic. However, I believe families who experienced outcomes like ours deserve to be heard. I am seeking transparency, accountability, and a thorough examination of the policies and treatment

protocols that were used during that time. My goal is not only to honor Daniel's memory but also to help ensure that other families do not endure the same suffering and unanswered questions.

I would be grateful for the opportunity to speak with you and your staff and to share Daniel's medical records and our family's experience in greater detail.

Thank you for your time, consideration, and willingness to listen.

Sincerely, Tammy Vandermillen

Widow of Daniel Vandermillen