

I am here today on behalf of my son, Chase Hayles. If he were alive today, I know with certainty that he would have come to tell his story himself.

Chase was a childhood cancer survivor. He was 33 and otherwise healthy when he was admitted to a West Houston Hospital for breathing problems on Nov. 14, 2021. He passed away this year on Feb. 18, after a five-year fight to receive a kidney transplant following what I believe was unauthorized and unnecessary Remdesivir treatment in November 2021.

Chase had kidney damage from his childhood cancer treatment and antiviral medication. The hospital was aware of his impaired kidney function. About 10 months earlier, he had been treated for COVID-19 at a different Hospital in West Houston with plasma antibodies and recovered quickly.

I was out of town when Chase was admitted into the hospital on Nov 14th. I now know he was intubated and put into isolation on Nov 15 and I was told I could not see him when I arrived on the 16th. I camped out in the ICU waiting room and repeatedly asked doctors and nurses about his condition.

I was told his nasal swab tests did not show COVID-19 and that repeated tests remained negative. I asked whether they would use monoclonal antibodies if they found COVID-19. One of the doctors told me that their policy was to use only steroids and Remdesivir.

I repeatedly told his caregivers not to give him antiviral medications or Remdesivir because of his impaired kidney function. I specifically warned them that it could damage his kidneys.

Without my knowledge, they performed a bronchial biopsy and told me they found COVID-19. I asked whether that meant Chase had an active infection. An ICU doctor and nurse separately told me that he did not — that the COVID-19 cells were dead cells left over from his previous infection. I was told they were treating him with steroids and antibiotics. I again told them not to give him Remdesivir. The doctor told me not to worry because Chase did not have COVID-19.

On Dec. 2, 2021, Chase was transferred to a Continuing Care Facility. During intake, a nurse told Chase that the hospital had already given him all the Remdesivir that could be given for COVID-19. Because Chase was intubated, he could not have consented to the treatment.

I was livid. I had repeatedly told the doctors and nurses not to give Chase Remdesivir because of his kidney damage, yet no one told me they had given it to him.

I immediately went back to the Hospital to speak with the patient advocate. I told her they had killed my son's kidneys, that they had given him Remdesivir despite my repeated warnings, and that his life was now in danger.

Hospital records indicate Chase was diagnosed with COVID-19 based on a finding in one lobe of his bronchial tubes. This was the same finding the doctor and nurse had told me did not indicate an active infection. The test was a positive PCR, which can detect fragments of dead or inactive

virus from a previous infection. Other COVID-19 tests did not show an active infection, while tests did show rhinovirus.

On Nov 19, 2021, three days after the bronchoscope, Chase began a prescribed five-day course of Remdesivir. After two days, an infectious disease doctor discontinued the treatment. But it was too late for his kidneys. He began dialysis on Nov 21. Just three days earlier, on Nov 18, his nephrologist had documented that Chase's kidneys were functioning adequately.

Nothing will bring my son back. But those responsible and the institutions involved should be held accountable.

Thank you for listening to my son's story.