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Woman Escapes COVID-19 Hospital Treatment Protocols, Says Others Not So Lucky

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15-18 minutes

Over a week after Gail Seiler's physician had given her a terminal diagnosis, her husband, Brad Seiler, wheeled her out of the back door of the hospital where she had been admitted for COVID-19 on Dec. 3, 2021.

"I'm so sorry, Mrs. Seiler, but you are going to die," she recalled her physician telling her on Dec. 5.

On Dec. 15, despite resistance from hospital staff, Brad extracted Seiler from Medical City

Plano hospital in Plano, Texas, where the couple lives.

Seiler is one of the few patients who has lived to tell her story about what she said she witnessed on the inside with COVID-19 hospital treatment protocols.

"It became clear to me that people are not dying in hospitals from COVID. They are dying from these protocols," Seiler told The Epoch Times.

Seiler went in for a monoclonal antibody infusion with the request that she be given the earlytreatment protocols prescribed through the Front Line Critical Care Alliance (FLCCC), which included the use of ivermectin and budesonide.

However, when staff discovered she was <u>unvaccinated</u>, "the whole tone changed," she said.

"I quickly lost the right to advocate for my own medical care," she said.

'I Didn't Come Here to Die'

After a 26-hour wait, she finally got a bed in the intensive care unit (ICU), but no family members were allowed to visit, she said.

This is where she met Dr. Giang Quach, the physician who told her she was going to die because she was unvaccinated, she said.

"I told him, 'I didn't come here to die," she said.

Seiler said Quach pushed her to take remdesivir, a drug known to cause kidney failure. She repeatedly asked for a different doctor, but her pleas went unanswered and Quach remained in charge of her care, she said.

In 2018, President Donald Trump signed the Right to Try Act into law, which allowed patients with life-threatening diseases who have exhausted all other options to try certain unapproved treatments.

Because Quach had given Seiler a terminal

diagnosis, she was entitled to try FLCCC protocols to treat COVID-19, but the hospital denied her those treatments, she said.

Quach also denied Seiler her right to see a priest to administer her last rites, she said.

So, Seiler made a deal with Quach, she said.

She said she would submit to a round of remdesivir if Quach let her see her priest for final sacraments.

Quach agreed, and Seiler was allowed to see her priest, she said.

"Then, we denied the remdesivir," Seiler said. "They were pretty angry about it, but honestly, I felt I was in a fight for my soul. When the priest left, I had this renewed feeling that I was going to live and not be killed."





Gail Seiler's last day at the hospital in 2021. (Courtesy of Gail Seiler)

'Every Day I Would Tell Them I'm Not a DNR'

Every day, Seiler said, she made it known that she did not want Quach in charge of her care and insisted on seeing a different provider, but Quach always returned.

Seiler's daughter had access to her online records, where she found that Seiler was classified as Do Not Resuscitate (DNR), she said.

Seiler said she was not supposed to be listed as DNR.

"The scariest part of it was every day I would tell them I'm not a DNR, but them telling me I'm a

DNR," Seiler said.

In order to be resuscitated, Seiler said, hospital staff told her she had to go on the ventilator, the final stage for many who have reported similar hospital stories that ended in death.

Each of the standard treatment protocols for COVID-19, beginning with remdesivir and ending with the ventilator, are reimbursed with <u>lucrative payoffs</u> from the Centers for Medicare and Medicaid Services (CMS), leading many to believe this is the reason hospitals continue to use these protocols while denying early treatment.

In a Sept. 7 conference titled "Remdesivir Death: Landmark Lawsuit" in Fresno, California, two attorneys announced lawsuits against three hospitals for what they allege are the hospitals using remdesivir without informed consent, leading to wrongful death.

The lawsuit addressed what the attorneys called "the remdesivir protocol," in which the patients

may be admitted to the hospital—often for problems unrelated to COVID-19—and then diagnosed with COVID-19 or COVID pneumonia.

The patients are then isolated and malnourished before being told remdesivir is their only treatment option, according to the lawsuit.

The patients are also placed on a BiPap machine, which uses pressure to push oxygen into the lungs at a high rate, the lawsuit says, with the patients' hands often tied down so they can't remove it.

The final stage of the protocol is intubation, at which point the patients die an average of nine days after being admitted, the lawsuit states.

In the end, the hospital can get up to \$500,000 in reimbursement per patient for the protocol, according to the lawsuit.

'Things Just Got Worse'

Seiler goes into more detail about <u>her story</u> on the FormerFedsGroup Freedom Foundation's COVID-19 Humanity Betrayal Memory Project.

She became the Texas chairperson for the foundation, where she gathers stories similar to hers to submit to the project's documented cases.

The foundation also offers multiple online support group meetings where others can tell their stories.

The number of people who say they've had family members die in hospitals at the hands of what they call the "death protocols" continues to surface. However, for many of them, their loved ones' deaths left them with inconceivable stories of administrative cruelty.

Patients and families are scared into accepting treatment such as remdesivir without being informed about the risks such as kidney failure.

Families have reported that physicians will tell them that the patient needs oxygen and rest,

then the oxygen is used to such a high degree that later a ventilator is required because the lungs are damaged.

When a patient tries to remove the BiPap mask, they are deemed agitated and given sedatives, leaving them at the mercy of hospital staff, many reported, while being denied access to basic nutrition, hygiene, and exercise.

For Seiler, the lack of nutrition caused hair loss, and she developed a fungal infection called thrush because no one removed her BiPap mask to clean her mouth, she said.

Seiler said the doctors and nurses wouldn't allow her to even sit up, resulting in bed sores, and she eventually lost her ability to walk.

After two days on a catheter that she said was forced on her because nurses told her they couldn't take her to the bathroom, she got another infection from the catheter.

"Things just got worse," Seiler said. "People were dying around me in other rooms. Quite frankly, it was quite scary, and I knew that time was short."

'I'm Going to Take You Out of There'

On Dec. 14, 2021, Seiler's husband, a former nurse and U.S. Army veteran, called 911 to have the Plano Police Department perform a welfare check, she said.

When the police officer arrived, Seiler said she attempted to explain to him what she had experienced.

"I told him they're going to murder me," she said. "He said, 'We don't have a protocol for this,' and he left."

Having exhausted all other options, Brad Seiler and Seiler's daughter—who had been contacting politicians for help—came up with a plan to get her out of the hospital and take her home.

Brad Seiler set up oxygen and obtained

medications with the help of a home consultation service and <u>Dr. Richard Bartlett's</u> <u>protocols</u>, which emphasize the use of budesonide, she said.

On Dec. 15, Brad called and told her, "I'm going to take you out of there."

Brad arrived with a cease-and-desist letter and two pieces of patients' rights legislation, written to allow access to at least one visitor: Texas Senate Bill 572 and Senate Bill 2211.

The state's House and Senate bills prohibit hospitals from denying visitation, including clergy visitation, during disasters such as the COVID-19 pandemic.

Seiler said Quach found a loophole in the House bill where it says the doctor can write an order for five days limiting visitation to one person, and then renew that order.

"And that's what Dr. Quach had done to keep me isolated," she said. "Still, Quach broke the premise of that bill, because I wasn't allowed

any visitors."

The Senate bill, which was written by state Sen. Bob Hall, permits a spiritual counselor, she said.

This was written to include family members, which is why Brad was brandishing the legislation—to invoke himself as the spiritual head of the family, Seiler said.



Gail Seiler's progress in getting off the mask,

2022. (Courtesy of Gail Seiler)

'I Anticipate There Will be Future Hearings'

Hall, who was involved in making calls to the hospital to petition for Seiler's care, has been outspoken against "the commandeering of medical practices by the government."

In June 2022, the Texas Senate Committee on Health and Human Services held a hearing where families testified about their loved ones' experiences with the medical system during the pandemic.

In a statement to The Epoch Times, Hall said he anticipates future hearings after the committee heard the personal testimonies.

"Patients and doctors must be empowered to make decisions on treatment protocols without fear of threats and intimidation if they differ from government-mandated procedures," Hall said. It was the persistence of Seiler's husband and daughter, Hall said, that made Seiler "one of the few hospital COVID patients to get out of the hospital in time to survive."

Echoing Seiler's earlier statement, Hall said "more people died in hospitals like Medical City Plano because of hospital policies, than died of COVID."

In a statement to The Epoch Times, a Medical City Plano spokesperson said that "like other hospitals in our area, our hospital relies on licensed, independent physicians who use their extensive training and experience to assess patients' needs and determine the course of treatment. We support our physicians by giving them information and resources, including the latest research to help them provide the best possible care to our patients."

Of the many consequences of the COVID-19 pandemic, the erosion of confidence in the medical profession's "best possible care" has

been the most damaging, Hall said.

"The circumstances triggered a number of egregious policies and practices never before seen in our modern hospitals," Hall said. "Patients were isolated from their families and loved ones, intimidated or coerced into receiving medical protocols with which they disagreed, and in some cases, outright neglected. Government-mandated protocols, which did more harm than good, added fuel and distrust to the fire."

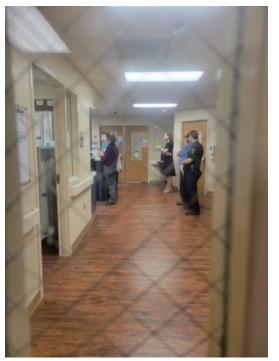
'I Know for Certain I Will Die at Your Hands'

Brad Seiler had gone beyond the stage of distrust when he entered the hospital and somehow charged his way into the ICU as security chased him, Gail Seiler said.

When told to leave, Brad told staff, "You're not going to murder my wife. She's coming home with me," Seiler said. From there, it became almost like an all-day hostage negotiation, Seiler said, with six police officers who were there not to help them, but to make Brad leave.

Hall got involved, telling Brad not to resist if officers were to arrest him, Seiler said, while one of the doctors told her that if she were to leave with Brad, she would die.

"I told her that if I died tonight, 'I'd prefer it be with Brad trying to save me rather than die at your hands because I know for certain I will die at your hands," Seiler said.



Police were present when Gail Seiler's husband

negotiated with the hospital so Gail would be allowed to leave Medical City Plano hospital in Plano, Texas, in 2021. (Courtesy of Gail Seiler)

Seiler needed a wheelchair because her legs didn't work due to a lack of physical therapy, she said.

When she was packed and ready to leave, Seiler said the floor nurse led them out through what he called "the shortcut," which turned out to be the way through the morgue where the funeral homes pick up bodies.

"I think it was to send us a message," Seiler said.

'A Medical Matrix'

Despite the physician telling Brad Seiler that his wife wouldn't make it 24 hours if she left the hospital, she lives today to tell her story.

It wasn't easy, Gail Seiler said, and her healing at home had more to do with recovering from her experience at the hospital than from the virus itself.

However, it was Bartlett's treatment that saved her life, she said.

"Everything he put in place works," she said. "I started to improve right away."

The Seilers later contacted their state representative who contacted Health and Human Services (HHS) to conduct an investigation, Gail said.

HHS assigned the investigation to the hospital, which concluded that the hospital had "done a stellar job," Gail said.

"No one contacted us, and they certainly didn't look at our medical records because—if anything—even making someone a DNR when they tell you they aren't a DNR is against the law, right?" Sieler said.

The Seilers were sure no one would believe their story, but as they continued to tell it on podcast and radio interviews, more and more people contacted them to share their own experiences.

Seiler managed to escape the hospital and recover, but she said most of the stories she hears from other people don't have happy endings, leaving those families wracked with guilt when they realize what took place.

The majority of the cases have ended in the death of the patient, Seiler said, with the family only realizing they had been gaslit after it was over.

"What we're seeing is doctors aren't being honest with the patient, and by the time you realize they're harming you, you've not only been harmed, you've also been gaslit, and you can't just leave," Seiler said. "You're on a high flow of oxygen and you're told if you leave, you'll die. If you get intubated, the only way out is to be transferred to another hospital."

Patients have generally had the right to

advocate for their own medical treatment, and even deny recommendations, but with the emergency declarations related to COVID, hospital staff have been given authority over patients they've historically not had, Seiler said.

In some cases, patients have been given remdesivir and other medications not only without informed consent but also after the patient had put in writing that they didn't want the drug, Seiler said.

Despite this overreach being exercised in hospitals, Brad and the Seiler's daughter was able to bring enough attention to the case through networking with Hall and Lt. Col. Allen West, Seiler said.

West had also been treated there and—in addition to Hall—made several calls to the hospital on the Seilers' behalf, which Seiler said she suspects is why staff had to eventually acquiesce to letting Brad remove her.

The Seilers were also helped by the legal team

of Paul M. Davis & Associates in Frisco, Texas, a firm that's representing clients who have also gone through the hospital protocols.

There have been cases in which people have just walked out, but they are rare, Seiler said.

"Once you enter the hospital, you're in this medical matrix, and the only way out is through death or if someone comes and takes you out," Seiler said.

Today, Seiler's mission is to bring awareness by sharing her story and the stories of others, she said.

"My goal is to keep people out of hospitals because this truly is a hospital holocaust."





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