

# How to Save Your Life and Those You Love When Hospitalized

I recently interviewed Laura Bartlett and Greta Crawford, who are currently helping patients receiving forced treatments for COVID-19 hospitalization.



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## STORY AT-A-GLANCE

- Laura Bartlett and Greta Crawford have founded an organization to address the forced treatments patients receive when they're hospitalized for COVID-19, but the same strategy can be used to protect yourself against other medical hazards as well
- The Caregivers and Consent document they created is an "advance decision" document. So, the moment you enter the hospital, the hospital staff know what they can and cannot do to you; they are legally required to respect your current care decisions. And unlike an Advance Directive (which only kicks in when you are incapacitated) the Caregivers and Consent document goes into effect immediately
- It's important to complete and notarize your Caregivers and Consent document BEFORE you ever need to go to the hospital
- Make sure you send the completed, signed and notarized document to the CEO of the hospital in two ways: (1) via a professional courier (one that specializes in delivering legal documents); and (2) via the Postal system with certified mail, return receipt requested. The CEO is responsible for all legal business relating to the hospital, including the medical records, so the CEO, not your attending physician, is the one whose responsibility it is to get your consent document entered into your electronic medical record

- Make at least 10 copies of the signed, notarized document and keep one copy on your person, in case you ever have an accident or acute illness requiring hospitalization. Also provide copies to the attending physician and nurse once hospitalized
- Also, should you become hospitalized (and therefore unable to personally send the document to the CEO), designate a family member or friend to send your Caregivers and Consent document on your behalf. Additional recommendations to ensure your safety are included

In this interview, Laura Bartlett and Greta Crawford detail how you can protect yourself from one of the top contributors to premature death, namely conventional hospital care. The key here is to understand what the dangers are and take proactive measures to guard yourself and your family from them.

Nearly 10 years ago, I interviewed Dr. Andrew Saul, author of “Hospitals and Health: Your Orthomolecular Guide to a Shorter, Safer Hospital Stay,” in which he details how to minimize your risk of being a victim of a medical error.

First and foremost, Saul recommended making sure you have a patient advocate, someone who can speak on your behalf if you’re incapacitated and make sure you’re receiving the correct medication and treatment. During COVID, however, family or friends were not allowed into the hospital, and patients were routinely bullied into treatments they did not want or consent to.

The good news is, Bartlett and Crawford have developed a legal document that, when served to the hospital in the proper way, can ensure that your medical wishes are honored. By eliminating any confusion about your consent (or denial of consent), this document can literally save your life.

## **Why ProtocolKills.com Was Created**

Bartlett and Crawford have founded an organization to address the lethal and, in many cases, forced treatments patients receive when they’re hospitalized for

COVID-19, but the same strategy can be used to protect yourself against other medical hazards as well. Crawford explains:

*“I created a website called [ProtocolKills.com](https://ProtocolKills.com). This came after I was in the hospital with COVID. In the process of going to the hospital, I was denied informed consent and was completely unaware of some of the things they were doing to me. I was given five rounds of remdesivir, which nearly took my life, and I did not even know that I was being poisoned at the time ...*

*During that time in the hospital, I went from thinking I was going to go home after I got oxygen to actually feeling like that I was going to die. I was almost certain I was going to die after being given just the first dose of remdesivir ...*

*[And then there was] the constant push for the vaccine in the hospital, the harassment for not getting vaxxed, and the fact that I was given medication without my knowledge at all, which led me to start the website to not only inform people about what was going on, but [as] a platform to allow other victims who were not as fortunate as me.*

*Many of them, the majority of them, did not make it out alive. So, it's a platform for them to share their story. We have over 250 stories on there about what they faced in the hospital. We really wanted to get this information out there to the public, but we also wanted to give a solution, not just to scare people. And that's where I ended up meeting Laura.”*

## **National Hospital Hostage Hotline to the Rescue**

Bartlett continues:

*“Before I met Greta at the beginning of COVID, in early 2020, I started helping my brother, Dr. Richard Bartlett, who had a protocol utilizing inhaled budesonide steroid as part of his protocol to treat COVID early. We also found*

*it very effective once people were in the hospital to help reverse [the infectious process] and also the scarring and the inflammation of the lungs.*

*There are instances where it even helped people who were on ventilators as long as 30 days come off the ventilator and go home. So, I was helping him get that message out in early 2020. I'm not a doctor. I'm not a nurse. I'm just somebody who could help get that known around the world. My background is in media PR ...*

*In the process, people who knew my brother, knew me, started reaching out to both of us with stories that they were in the hospital and they were having a hard time getting the doctor to respect their right to informed consent. It was an overwhelming number of instances where people just felt like they were being bullied or coerced, that their right to try budesonide, for instance, was just dismissed.*

*And it was almost as if informed consent didn't exist. But in fact, it never went away. Even during the COVID shielding for hospitals, informed consent between the doctor and the patient never went away. You always had the right to informed consent.*

*So that's where my work started. In the process, since there were so many people reaching out for help, I thought, 'Well, why doesn't somebody come up with a way for people to quickly access some information of what their rights are and their patient rights?'*

*So, I started a nationwide hotline, called the [Hospital Hostage Hotline](https://www.hospitalhostagehotline.com) [call or text 888-c19-emergency, or 888-219-3637]. It's still in effect. I still get calls from all over the country. And I've been able to help people who went in even for non-COVID reasons like a urinary tract infection that was [also] diagnosed as COVID, and they were being pushed towards a protocol and told they couldn't leave the hospital.*

*They needed to know they could, that they always had the right to leave AMA — Against Medical Advice — if that's what they chose. They also have the right to*

*either consent or not consent to things and it should be respected. I realized that one of the biggest tools for getting that informed consent notice to the doctor was not to just verbally say it, but to have it in writing. These aren't my original ideas.*

*I actually had a hospital insider reach out ... somebody who had been in the system and knew how to navigate the system at a high level in administration, give me some tips and tools on how to navigate the hospital system to make sure that informed consent was not only documented and delivered effectively to get into the electronic medical record, but also, what their basic patient rights were and how to advocate for them.”*

## **You Have the Right to Leave**

One drawback of signing an AMA is that insurance won't pay for your treatment. That threat will often keep patients in the hospital because they'll have to pay out of pocket. So, it can be used against you.

*“Profit has been a big factor in a lot of suffering,” Bartlett says. “Patients were afraid to leave because they were told, like in the instance of a gentleman that I was helping in New Jersey who went in for a urinary tract infection.*

*He was an elderly man. This was early 2020. They quickly tested him for COVID and started him on that road towards a ventilator. And they told him flat out, ‘If you leave, none of this will be covered by insurance.’ So that was a big factor.”*

Hospitals may also misinform you about your AMA rights, as we've seen repeatedly during COVID. More often than not, the hospital's reluctance to release a patient has to do with protecting its revenues. Bartlett offers the following story to illustrate:

*“Somebody that I was helping advocate for said the doctor actually said to them, ‘You cannot leave.’ This person was 15 or 16 days into their COVID diagnosis and they were feeling better. They were likely not COVID positive ...*

*That's where the name of the hotline came from. They actually felt like hostages. That's what they were reporting to me. 'I feel like I'm held prisoner.' But in fact, they always had the right to leave a hospital whenever they chose to. It's not up to the doctor when they can leave. They have to make that medical choice for themselves, whether or not they feel like they can leave.”*

## **A Novel Consent Document That Can Save Your Life**



Patients clearly need a way to put themselves back in the driver’s seat, and the novel medical consent document Bartlett and Crawford created, available on [OurPatientRights.com](http://OurPatientRights.com), is the most powerful way I’ve seen so far to do that. As explained by Bartlett:

*“What we learned from this whole ordeal over the last couple of years is that there was a need for a novel document that did not exist, to our knowledge, that covers your written consent. A document that documents your current consent, not an advance directive that kicks in after you're incapacitated.*

*Before you go into the hospital, write down your consent wishes so that everybody involved in your care within the hospital will have eyes on it because*

*it's put into your electronic medical record. It's notarized. It's signed before you go in. That's the key. So do it while you have full capacity.*

*It's a novel strategy. I'm so grateful to the hospital insider who saw the problem and helped us navigate the system, so that we have an insider's perspective on how to do this to keep people safe."*

As noted by Crawford, while COVID-19 may seem like a distant memory, people are still being hospitalized and diagnosed with COVID, and are being held hostage by a hostile medical system seemingly intent on milking them for all their worth, until death, if need be.

This is where filing a written medical consent form can help save your life. No doctor can override your written decision (consent) declining certain medications or treatments. Verbal communication is not enough. It must be in writing, notarized and delivered in a manner that formally serves the hospital and puts their physicians on notice.

## **General Consent Vs. Specific Consent**

As explained by Bartlett, when you enter a hospital, you must sign a general consent authorization form. This is basically a contract between you and the hospital. Since you have bodily autonomy, they need your consent before they can do anything to you.

Typically, the general consent form authorizes hospital staff to test, treat and care for you in whatever way they see fit — and when a patient signs the general consent authorization, physicians feel justified that they can implement a hospital protocol without further explaining the risks, benefits or alternatives of that protocol to the patient.

Now, if you're well enough to read the entire document, and see something in there that you don't agree with, you can strike the sentence or paragraph and initial it, to indicate that you do not consent to that specific detail. However, that still doesn't offer you much protection.

What you need is a much more specific document where you detail the types of treatments you consent to and the ones you don't. You need to carve out a niche from the general consent form that specifies exactly what you do (and do not) consent to. And you need to be clear. Fortunately, the Caregivers and Consent document carves out that niche to communicate clearly to all physicians your exact consent wishes.

*“You need a written consent document that, in addition to just the general consent, is a contract between you and the doctor, so he knows, he's put on notice, what it is that you absolutely do not consent to. For instance, a COVID injection, if that's your wishes,”* Bartlett explains.

*“They have a code of ethics, the American Medical Association guidance to physicians, per the ethics opinion 2.1.1, that when the patient surrogate has provided specific written consent, the consent form should be included in the record. This is key. Write it down. You don't need an attorney. You don't need any fancy training. You don't need to be a doctor, don't need to be a nurse.*

*You can write it down, and then, when you deliver it in our specific way — and it's very important how you deliver it — it gets put into the electronic medical record for everybody to see. Now you've got receipts, that if you do something against consent, it's intentional. OK?*

*So, here's the website you can find a template for that. It's called [OurPatientRights.com](http://OurPatientRights.com). What you'll see there are two PDF documents. [On one of the PDFs there are two pages.] One is the actual template, the other one is instructions on how to deliver it. And you can edit the document by the way. You can write your own. It's just a template. But there's also very specific instructions on how you are going to deliver this so it's not disregarded.*

*Here's what you're going to see in the document. ‘I [your name] advise all physicians, nurses, and other caregivers that this Caregivers and Consent document reflects my current wishes for my care and are carefully planned and intentional wishes.’ That's very important because it's current. It's not going to kick in when I'm incapacitated.”*



# Your Written Consent Must Be Respected

Advance medical directives don't kick in until or unless you're incapacitated, so that's another completely different kind of document reflecting current consent wishes. What Bartlett and Crawford have created is an "advance decision" document. So, the moment you enter the hospital, they know what they can and cannot do to you. And, they are legally required to respect your written directives. The following section of the document reads:

*"Receipt of this Caregivers and Consent document by the hospital serves as notice that I will report to the Medical Board any physician who violates my carefully planned and intentional wishes that are based upon my deeply held religious and spiritual beliefs and are delineated within this Caregivers and Consent document."*

This puts the doctor on notice. This isn't a threat. It's merely a factual statement that if anyone goes against your wishes, they're intentionally disregarding your consent. Once it's in your electronic medical record, they can't say they didn't know that you did not consent to a specific test, drug, vaccine or procedure. So, ignoring your written consent is then actually a criminal offense akin to assault and battery. It's also medical malpractice.

*"Let me tell you, there are good physicians and they are clamoring for something like this,"* Bartlett says. *"They are thankful there is something they can use to push back against administration and say, 'I'm not going to violate this person's written consent. I'm not going to do this to this person ...'*

*With these documents, if you are blatantly refusing to honor a patient's wishes and religious beliefs, and you're doing it against these documented legal forms, then you risk losing your license altogether as a physician and never working in medicine again ...*

*But you need it in writing ... and it needs to be served in a very specific way. You need to do this before you ever go to the hospital. Have it handy in case you*

*get yourself into a predicament, like a multi-car pileup on the highway and an ambulance transports you to the hospital. The time to have this done is before there's a problem.”*

The document also specifies that "All items in this Caregivers and Consent document shall remain in effect unless I choose to revoke in writing; no one else may alter or amend this Caregivers and Consent document." So there can be no misunderstanding. Your doctor or nurse cannot claim you gave implied consent because you mumbled something incoherent in your sleep. In other words, if you didn't change your consent wishes in writing, you didn't change your consent wishes. Period.

## **What's in the Caregivers and Consent Document Template**

As mentioned, you can customize your Caregivers and Consent document any way you like. But to give people a starting point, the template, available on [OurPatientRights.com](http://OurPatientRights.com), includes things like:

- “I do not consent to the use of medications without my being informed of each medication's risks, benefits and alternatives before they are ordered. Only after that information is communicated shall I choose to either grant consent or to not grant consent for each and every medication that is ordered.”
- “I do not consent to receiving any vaccine or booster for COVID-19 or COVID-19 variant.”
- “I do not consent to receiving the seasonal flu vaccine.”
- “I request and consent to the use of 1 mg of budesonide via nebulizer every 4 to 6 hours for COVID-19 or COVID-19 variant diagnosis with respiratory issues.”

If you want to, you could change the verbiage to state that you do not consent to ANY vaccine. If you have allergies, add that to the list. Personally, I would recommend adding the following dietary notice:

- “I do not consent to receiving ANY processed food, such as high-fructose corn syrup or seed oils. The only acceptable oil for me is butter, ghee, beef tallow or coconut oil. Acceptable forms of protein would be eggs, lamb, bison, beef or non-farmed seafood; but they must not be prepared with seed oils. If the hospital is unable to provide this food for me, my family or friends will bring it for me.
- Additionally, I do not consent to not being able to take my normal supplements while in the hospital.”

I would strongly recommend that you integrate this additional clause because it's a stealth form of abuse. These kinds of foods can only impair your effort to get well, no matter what your problem is. You may also want to add a notice saying you do not consent to receive blood donations from COVID-19 vaccinated donors, and that all blood donations must be from donors confirmed to have not received any COVID-19 vaccines.

## **Important: Follow Proper Procedure!**

As mentioned multiple times in this interview, it's crucial to follow the proper procedure. Here's a summary of the necessary steps:

1. Complete your customized and personalized Caregivers and Consent form BEFORE you ever need to go to the hospital.
2. Get the form notarized. Make sure you sign the form in front of the notary.
3. Send the completed, signed, notarized form to the CEO of the hospital in two ways: (1) via a professional courier (one that specializes in delivering legal documents); and (2) via the Postal system with certified mail, return receipt requested.

The CEO is responsible for all legal business relating to the hospital, including the medical records, so the CEO, not your attending physician, is the one whose responsibility it is to get your consent forms entered into your electronic medical record.

4. Make at least 10 copies of the signed, notarized form and keep one copy on your person or in your wallet or purse, and another in the glove compartment of your car, in case you ever have an accident. Also provide copies to family or friends. If you happen to be hospitalized before you've had the chance to send the documents, have one of them follow the delivery procedure outlined on the General Instructions form.
5. Once you're hospitalized, you or one of your contacts will give one copy to your attending physician and another to your nurse, and inform them that this document is already in your electronic medical record, or that the hospital will be served the documents shortly. Distribute additional copies to other care providers as needed.
6. Also, upon hospitalization, request to see your electronic medical record to make sure your Caregivers and Consent form has been entered. It is your right to see your electronic medical record, and it's available through an online portal, so don't let anyone tell you otherwise.

Also routinely check your medical record (or have your patient advocate do it for you) to make sure your wishes are being followed and that you're not being given something you've denied consent for.

Crawford notes:

*“What we've experienced using these documents is a complete change in the attending physician, from being aggressive and maybe trying to push you, to being very helpful and efficient. Once they receive these documents, they just do a 180. As a matter of fact, one patient's brother told me he's getting treated better than he's ever been treated at a hospital before.”*

Again, having this document in your medical record virtually guarantees that they cannot harm you by doing something you don't agree with. Of course, some psychopath might ignore your directives, but they'll have to pay a hefty price, as they're guaranteed to lose a malpractice suit and be stripped of their medical license. The legal consequences are so severe that the person doing it would have to be beyond irrational.

Keep in mind that while you can request and consent to certain treatments, such as ivermectin, for example, this document CANNOT force your doctor or hospital to use that treatment. They can still refuse to administer something you've consented to.

They cannot, however, administer something that you've declined consent for. The ace up your sleeve at that point is that you can still sign out AMA (against medical advice), get out alive, and seek desired treatment elsewhere. Getting out alive is the key goal.

## More Information

Again, here are the three resources created by Bartlett and Crawford:

- [ProtocolKills.com](http://ProtocolKills.com) — Here you can find a hospital protocol for COVID, information about remdesivir, patient rights information, alternative health care options and patient testimonies
- [OurPatientRights.com](http://OurPatientRights.com) — Here you can download the template for the Caregivers and Consent document and general instructions
- [Hospital Hostage Hotline](http://HospitalHostageHotline.com) — Call or text 888-c19-emergency, or 888-219-3637

In closing, please share this information with everyone you know. Bring it to your church, synagogue and local community groups. Everyone needs to know they can secure their patient right to informed consent and how to do it so that their wishes cannot be ignored. This is the most effective way to empower yourself when it comes to your medical care. So please, help spread the word.

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