

Fighting Back Against Hospital Tyranny: Empowering the Patient Through Proper Informed Consent

A Special Interview With Laura Bartlett and Greta Crawford

By Dr. Joseph Mercola

Dr. Joseph Mercola:

Welcome everyone. Dr. Mercola, helping you take control of your health. And today we're going to dive deep into how to protect yourself from one of the highest contributors to the likelihood of you dying prematurely, which is going into the hospital for conventional medical care. We've already been well-established. In fact, I was the person who promoted this meme in July of 2000. Not 2020, 2000 – 23 years ago, literally, that doctors are the third leading cause of death. And one of the ways they're able to do this is to – well, there's so many ways, but one of the ways is the hospital. And I mean, thank God we have hospitals. They are enormous healing centers and they have saved, no doubt in my mind, millions and millions of people's lives as a result of that. But they've also killed at least that many, I would think.

So, the key here is to understand what the dangers are and take proactive measures to guard yourself and your family, because the issue is, it's going to be your family members most likely, not even you, that is going to need to know this information. And when you're in the hospital, you're not going to be able to do squat because you're potentially in a coma. And you have to have someone understand this so they can navigate through the system and successfully rescue you from a premature terminal event. So exciting, powerful information. You definitely want to bookmark this and keep it around because you will invariably need it at some time in the future.

So, we have Laura Bartlett and Greta Crawford to provide us this information. And they're both experts in this, being they have a whole organization they put together and really compiled some amazing resources. So, they each have their own unique history and we're going to let them share what that history is and their background so you can have a better understanding of what they're doing. Okay, so whoever wants to go first.

Laura Bartlett:

Go ahead, Greta.

Greta Crawford:

Okay. Well, my name is Greta Crawford and I started a website and created a website called ProtocolKills.com. This came after I was in the hospital with COVID. My family got COVID, but unfortunately, I was the one that went to the hospital. 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 did not even know that I was being poisoned at the time. But after I got a-

Dr. Joseph Mercola:

Did you-

Greta Crawford:

I'm sorry?

Dr. Joseph Mercola:

Do you have long-term kidney damage as a result?

Greta Crawford:

I actually do not. I've done a lot of detox. Every day, I do detox and a lot of prayer. And I don't feel that I've had any type of damage. I feel okay right now. But as far as getting things checked out by a medical doctor, I have not done that yet. But right now, I'm leaning more on my faith.

So, but during the 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. Again, once I got out of the hospital, I realized what had happened to me and 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 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.

And 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, and 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. And Laura, you can take it from there.

Laura Bartlett:

Right. And so, before I met Greta at the beginning of COVID, early 2020, I started helping my brother, Dr. Richard Bartlett, who had a protocol utilizing budesonide, inhaled budesonide steroid, as part of his protocol to treat COVID early. And we also found it very effective once people were in the hospital to help reverse the COVID, and also the scarring of the lungs and the inflammation of the lungs. And even people on ventilators were able to – not all, but there are instances where it even helped people who were on ventilators long as 30 days come off the ventilator and go home. So, I was helping him get that message out 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.

And so, he asked me if I could help him and I did. And within 24 hours of him asking, we had a local story, a local affiliate in West Texas cover it. And then it just – he went viral on YouTube with one interview in Dallas. And I was just tasked with helping him get the message out. And 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. And so that's where my work back in 2020 started. And in the process, I realized that, since there were so many calls that I was receiving with 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?" And so, I started a hotline, a nationwide hotline, called the Hospital Hostage Hotline. And 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 for even non-COVID reasons like a urinary tract infection that quickly was diagnosed as COVID and they were being pushed towards a protocol and told they couldn't leave, for instance, the hospital. And 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 had the right to either consent or not consent to things and it should be respected. And 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. And these aren't my original ideas. I actually had a hospital insider reach out seeing what I was doing, 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 then served in a way that, it was delivered effectively to get into the electronic medical record, but also, what their basic patient rights were and how to advocate for them.

Dr. Joseph Mercola:

Okay.

Laura Bartlett:

So, this website that I started, Hospital Hostage Help, with lots of tips on there. And also, there is a hotline 888-219-3637, that's still in effect. And also, OurPatientRights.com that has the very novel document that we're going to share today.

Dr. Joseph Mercola:

Well, good. So, I neglected to mention in the introduction that I previously interviewed a physician, Dr. Andrew Saul, almost 10 years ago now, about a similar topic. And he wrote the book, I believe, the "Doctor Yourself." And it didn't go into as much detail as I think you two are going to today, but it was more really addressing the strategies you can implement so that you don't have to go to the hospital, initially, because if you're metabolically healthy and you're optimizing strategies that are under your control, not someone else's, you can reduce your risk of going to the hospital by tenfold. Exponentially. No doubt in my mind. Because most people are going there because of abusing their systems, most of them unintentionally, and they just don't know any better, which has been the bulk of my teaching for the last quarter-century.

And Andrew was focusing on that too. But he did have some good strategies. One of them is, never, never, never, never go to the hospital alone. You need to have someone you love there

protecting you. But Laura, you had mentioned the dreaded term, leaving the hospital AMA, against medical advice. And in my experience, that's routinely used as a threat to keep them in the hospital because if you sign out AMA, you're not going to have any insurance coverage and you're going to have to pay for this whole thing yourself, which is another tool that the system uses to, essentially, threaten you.

Laura Bartlett:

Yeah.

Dr. Joseph Mercola:

But realistic tool because the number one source of bankruptcies in the United States is the whole entire medical system. So, they're not joking about it. They definitely can sabotage you. All right. So, why don't one of you answer the question about the AMA. Or both of you. Signing out AMA. What is that threat? Is it real? What is the workaround for that?

Greta Crawford:

Well, I'll just say for the average person who doesn't know medical terminology, who is unaware of what goes on in a hospital, just the acronym itself, a three-letter acronym, it feels very threatening. You can't leave AMA. People don't even know what that means, but it's almost like FBI (Federal Bureau of Investigation) or CIA (Central Intelligence Agency). It just scares them just to hear those three letters. And they're like, "Okay, well I can't do it." And they take people for their word. And that, in itself, is just a psychological thing that people don't understand and they're unaware of. Laura, do you want to go further about that?

Laura Bartlett:

Well, yes. I'll just give you an example. 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 than 15 days before. They were likely not COVID-positive. And when they said, "We'd like to be retested." They said, "Well, we don't do that." And I said, "Well, they could probably just get a test from home and retest themselves. And if they're not COVID-positive, they'll just go home." "Oh no, they can't do that." The doctor point-blank said, "They can't leave." They just said, "They can't leave." That's where the name of the hotline came from was, they actually felt like hostages. That's what they were reporting to me. "I feel like I'm held prisoner."

These are things I heard throughout the last couple of years. "I feel like I'm a prisoner. They won't let me leave." But in fact, they always had the right, their patient 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. And I always told them, "If you want to leave, you feel like you can leave, leave. If you change your mind, you can go back to a hospital. Say something changes in your health condition that warrants going back to a hospital, you can do that. Either that hospital or another hospital. You can always get transferred to another hospital. If you don't like what's happening in this hospital, the care that you're receiving, you can transfer to a different hospital or a different level of care." But there are options. And people were coerced, lied to and manipulated during this, and they still are.

Dr. Joseph Mercola:

Usually, the ulterior motivation is to increase the hospital's bottom line revenue.

Laura Bartlett:

Right.

Dr. Joseph Mercola:

Because frequently, when you're held captive, they're earning a lot more than they would be if you were staying at a hotel room. That's for darn sure.

Laura Bartlett:

And I use that example that, "Have you ever wanted to check out after you've been in a hotel and said that, 'I'm checking out at 12 noon the next day.' And they said, 'I'm sorry, but you can't.'"

Dr. Joseph Mercola:

Yeah. "You can't. That's AHA. That's against the hotel advice."

Greta Crawford:

That's right.

Laura Bartlett:

Right.

Greta Crawford:

Exactly.

Laura Bartlett:

So yeah. The bottom line is, it seems like, in my opinion, money has been a big factor. Profit has been a big factor in a lot of suffering. 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. That was his reason for going to the hospital. He was an elderly man, didn't know why he was feeling the way he was feeling. This was early 2020 and he was treated for that. And they quickly tested him for COVID and started him on that road towards fast tracking him, in my opinion, towards a ventilator. And they told him flat out, "If you leave, none of this will be covered by insurance." Just like you said, Dr. Mercola. So, that was a big factor.

Dr. Joseph Mercola:

Is that a true statement, though, in your experience? Or is it just a fabrication to cause more fear to keep them there and prevent them from leaving? Because I'm not sure. I did have hospital privileges last century, but I have not admitted anyone to the hospital in probably 30 years. So, things have changed in that time and I'm not sure what the current status is on people leaving AMA. Does, in fact, if they leave, does the insurance companies say, "Okay, sorry. You violated the recommendations. We can't cover this." It seems that would be illegal.

Laura Bartlett:

I can't comment on that because I really didn't get into the billing part, but I would just encourage people to do whatever is best in preserving their life. You got to factor in, what is your life worth?

Greta Crawford:

Well, the dynamics of the hospital have changed completely in the last three years. They are nothing like they were before. And I've been in a hospital before. The pressure from doctors, you're constantly asked, "Are you vaccinated? Are you vaccinated?" Over and over again. You're pressured and pushed to get vaccinated. My doctor, when my kidneys started shutting down, I asked him why my hands and feet were swelling. He just looked at the floor and said, "COVID is strange. We just don't know." And-

Dr. Joseph Mercola:

This is when you were on remdesivir?

Greta Crawford:

Yes. And see, I did not even know that I was being given this poison. I didn't know what remdesivir was. They told me it was a COVID medication that I needed to take and I just thought it was a steroid because I'd heard about the steroids. I heard about the ventilators. I even confronted my doctor and said, "How can you put people on ventilators when you know for a fact that they will die on a ventilator?" She didn't deny it. What she said is, "We do what the patient requests. They're all requesting to be put on ventilators." And I said, "That's crazy." And I said, "Well, I'm requesting ivermectin and hydroxychloroquine." She said, "No, we can't do that. It's not approved."

And I actually told her, "So you'll go ahead and murder a patient with a ventilator because it's approved, but you won't give possibly life-saving treatments because it's not approved?" And she just got angry and left the room. This is unlike any hospital situation I've ever been in. Like I said, the dynamics have changed completely. And so, for me, even if they did threaten me with financial loss, what's more important, having troubles financially or being dead? You don't have to worry about finances if you're dead.

Dr. Joseph Mercola:

Yeah. And that is definitely one of the potential outcomes if you continue to listen to what they're recommending. You have to realize that going into hospital is frequently a terminal decision. That's why you want to avoid it at all costs. On the other hand though, you don't want to avoid it foolishly.

Greta Crawford:

Right.

Dr. Joseph Mercola:

There are times when you absolutely need to be there. Thank God they exist. They perform an incredibly valuable service. But the discernment is what's the key here. So, why don't we assume that they have gone to the hospital for a good reason. It was valid and they needed to be there.

Laura Bartlett:

We actually have an excuse-

Dr. Joseph Mercola:

I'm sorry?

Laura Bartlett:

I'm sorry. Dr. Mercola, we actually have an example of somebody who went into the hospital and it was for a valid reason. It was for surgery. So, this is-

Dr. Joseph Mercola:

Well, ostensibly. Most surgeries aren't valid.

Laura Bartlett:

Right.

Dr. Joseph Mercola:

If you dive into the details, like a knee orthoscopy or something.

Laura Bartlett:

Right. Or [inaudible 00:18:55]-

Dr. Joseph Mercola:

So many of them, those surgeries don't work.

Laura Bartlett:

Right.

Dr. Joseph Mercola:

And they cause nothing good.

Laura Bartlett:

But non-COVID. I guess I was going to give a non-COVID example because I think I want people to know right up front that just because COVID on the outside of a hospital appears to dwindle down and it's not an issue or not a concern, people are reaching out to me that are not going in with the chief complaint of COVID. It's other reasons. It's pancreatitis. It's a scheduled surgery and their informed consent is not-

Dr. Joseph Mercola:

Well, I think the broader stroke that needs to be painted here, and I really want everyone to understand this, is that you really need to avoid the hospital at all costs and explore every other alternative, especially if it's a chronic condition. And you just have to dismiss the belief that the hospital is some magic, healing, curing place. It is not. It is the furthest thing from there for almost every condition. But if you are feeling impending doom or you're in some life-threatening situation, absolutely get yourself to the emergency room where they can assess you initially or directly to the hospital. Usually most emergency rooms are connected to the hospital, so that's not too great.

Greta Crawford:

Yes, sir.

Dr. Joseph Mercola:

And you need to be evaluated by someone who can evaluate this quickly. But once you're assessed and they tell you if it's serious, you got to listen to them until you're really able to do the diagnostics that's required. That's one of the things that medicine is pretty good at. I don't really flaw them for most of them, although some diagnostic procedures are foolish and actually highly counterproductive. Or safeguards aren't taken like CT scans. But normally, a diagnostic workup can rule out real serious diseases and at least identify what the diagnosis is. They rarely identify the foundational cause, but your goal is to understand what is the problem, and then don't rely on them for the treatment unless it is lifesaving like you've got an obstruction in your bowel or you just got in an auto accident-

Greta Crawford:

Heart attack.

Laura Bartlett:

Yep.

Dr. Joseph Mercola:

Where you've got crushed bones, or you need abdominal surgery. Thank God they exist because you'd be dead without them. But you really need to limit it to those few scenarios and avoid it at all other costs. Especially, I don't know the surgery. I mean, most of the surgeries aren't needed. They really aren't. If you explore really carefully and take months or years to do it, unless you absolutely – I mean, something acute is a different story, but if it's a chronic condition like joint replacement or something, almost every time there's something better. A better option for you. So that gets you out of the hospital. And even then, a lot of those procedures can be done in outpatient surgical centers where you're not staying overnight. So that's going to be a lower-level threat to your life.

So anyway, I think what we want to focus on, persons in the hospital, the best example probably would be COVID where they just absolutely abused it and then people can take it from there. I mean, they feel they're dying. And in many cases, they were. They went to the hospital, which seems appropriate. Although initially, most of those people were turned away and said, "When

you're blue, come on back and then we'll do something for you." And then they could justify using the ventilator. So, assuming they're in the hospital for something like COVID and it's very, very clear, they're not cooperating. They're not doing what you want. They're threatening you with leaving AMA, that's where I think the resources and skills you developed through this pandemic are really useful. So, why don't you walk us through the process that one needs to take to rescue themselves from this scenario because it's not obvious, it's not intuitive, and most people wouldn't be able to navigate without some outside guidance. So why don't we start there?

Laura Bartlett:

Okay.

Greta Crawford:

I was just going to say real quick, I agree totally with everything that you're saying. In my situation, I did not want to go to the hospital.

Dr. Joseph Mercola:

Yeah.

Greta Crawford:

Matter of fact, I held off so much. I started coughing up a lot of blood clots. A lot. And I actually went to my doctor and didn't seem to bother them. They knew I had COVID and they told me to go home and gave me some antibiotics. And-

Dr. Joseph Mercola:

Usually that's a good indication, when there's blood involved-

Greta Crawford:

Yes.

Dr. Joseph Mercola:

That shouldn't be there, that's a sign you need some medical evaluation because that's not right. You shouldn't be coughing up blood.

Greta Crawford:

Right. Exactly. That's-

Dr. Joseph Mercola:

That almost never is a good situation.

Greta Crawford:

That's what I thought. And for the doctor not to say anything and to send me home-

Dr. Joseph Mercola:

That's just-

Greta Crawford:

I thought it was crazy. And then I still didn't go to the hospital because I knew I didn't want to go.

Dr. Joseph Mercola:

Right.

Greta Crawford:

And it wasn't until I got to 66% oxygen and was literally near death that I ended up going and the oxygen saved my life.

Dr. Joseph Mercola:

Well, let's just – you did. But this is sort of a transition area, but using this as an example, what would've been ideal is if you sought outpatient care. For someone who understood that there are very highly safe and effective treatments that truly do work, and it would've likely gotten you out of the hole with a 99%+ likelihood. But when you're feeling that way-

Greta Crawford:

Right.

Dr. Joseph Mercola:

It doesn't really give you the opportunity to go into internet searches and make phone calls and stuff. But that would've been the ideal situation-

Greta Crawford:

Yeah.

Dr. Joseph Mercola:

Is to never go there to begin.

Laura Bartlett:

So-

Dr. Joseph Mercola:

But you did the rational thing. What you did was not irresponsible at all. What they did was irresponsible.

Laura Bartlett:

Right. So, can I tell you, Dr. Mercola, we have some great news because what we learned from this whole ordeal for the last couple of years is that there was a need for a novel document that

we have that does not exist, to our knowledge, anywhere that covers your written consent – this is the key – that it's a document that documents your current consent. Not a medical directive that kicks in after you're incapacitated. This is a document that, before you go into the hospital, we urge everybody to write down your consent wishes so that everybody that's involved in your care within the hospital, every physician will have eyes on it because it's put into your electronic medical record and documented. It's notarized. It's signed before you go in. That's the key. So, do it while you have full capacity.

Dr. Joseph Mercola:

But do a list of things? I mean, the average person-

Laura Bartlett:

We'll go through it. Yeah. It's [crosstalk 00:25:38]-

Dr. Joseph Mercola:

Has no idea what they want to give consent to.

Laura Bartlett:

Yeah. Yes. So we're going to go [inaudible 00:25:42]-

Dr. Joseph Mercola:

Especially when they're struggling with a life-threatening situation.

Greta Crawford:

Exactly. So true.

Laura Bartlett:

So, we have a process. It's a strategy. It's a novel strategy. I'm so grateful to a hospital insider who saw the problem that was occurring over the last couple years and helped us navigate the system so that we have, truly, an insider's perspective on how to do this to keep people safe. And so Greta, do you want to start the-

Greta Crawford:

Yeah.

Laura Bartlett:

-the audio. Okay, go ahead.

Greta Crawford:

Yeah. We're going to play this real quick audio for you so that way people have been saying, "Well, COVID is over with. It's all over with." No, we just recently received this voicemail as early as April 2023. So, we're going to just play this real quick for you.

Audio:

[inaudible 00:26:28] Medical Center. ICU 4th floor. I need help. They have me strapped down in bed. And trying to give me medicine. [inaudible 00:26:45]. Whatever. Against my will. And I want to get up, but I need help. And they cut the lines and [inaudible 00:26:52]. Who are you calling? [inaudible 00:26:56]. Bye.

Greta Crawford:

Yeah, so that is something that's really hard to hear, but we want people to understand that it's still going on today.

Laura Bartlett:

And that was a nurse asking, "Who are you calling?" So, there's a lot of resistance to people having any kind of communication outside the hospital for help. Now we're going to go into something – this strategy was recently endorsed by Dr. Mary Talley Bowden and was tweeted out, our strategy, our documents, our process just about 48 hours ago. And it's already received a hundred, and what is it? Over 200,000 now.

Greta Crawford:

Mm-hmm. Yeah.

Laura Bartlett:

This is [crosstalk 00:27:46].

Greta Crawford:

Yeah, this was from yesterday. Mm-hmm. So yeah, it's already received that much. But yeah, she wanted to make it known that no doctor can override [a] legal document of informed consent, a written legal document of informed consent. But some of the comments on here are, "Thank you for sharing." People want this information. They just don't know about it and they don't know where to get it. And even this last one said, "When my husband was in the hospital with COVID, he was given a flu shot. No one ever asked for consent. We didn't even know until we got the bill." So, that's what's going on in hospitals is they're constantly asking about the flu vax, the COVID vaccine.

Laura Bartlett:

[inaudible 00:28:30].

Greta Crawford:

Yeah. And they're pushing it on people. And sometimes people don't even know that, they'll get it whether you want it or not.

Laura Bartlett:

And it's not enough just to say it. What we've realized is that in the last couple of years, because of this huge cultural shift in hospitals in the last three years, that your "no" is not respected as "no." So, just verbally saying "no" is being disregarded. So, there is a huge necessity to have this

novel document that puts your current consent wishes in writing.

So, here's what people don't understand. You sign a general consent. You may not remember it. Nobody ever really reads every word of the consent. But I want people to understand that you signed something. This is just an example of one in Texas. It's just kind of an example or a template, but it says, "General consent. I understand that my health condition requires inpatient or outpatient admission. I consent to authorizing testing, treatment and hospital care at this hospital," which happens to be at Texas Health Resources for the purpose of this example. "My hospital, nurses, employees and others as ordered by the physician and his/her consultants, associates and assistant or as directed pursuant to standing medical orders or protocols." And as you know, Dr. Mercola, you're going to have to sign a general consent just to be treated because they need your permission to do something to your body, right? Now, the second-

Dr. Joseph Mercola:

Couldn't you – I know it is essentially a contract.

Laura Bartlett:

Right.

Dr. Joseph Mercola:

And I've got significant experience with contracts. And typically, if you don't agree with something in there, you could put a pencil through it, put your initials on it, and sign and date and then also make an addition. So, you can-

Laura Bartlett:

Sure.

Dr. Joseph Mercola:

Essentially remove something you disagree with and then change-

Laura Bartlett:

Yeah.

Greta Crawford:

But in my situation, I was at 66% oxygen.

Dr. Joseph Mercola:

Yeah, yeah.

Greta Crawford:

[crosstalk 00:30:22] sign something.

Dr. Joseph Mercola:

It's not going to work. But, but-

Greta Crawford:

Yeah. And my husband wasn't allowed in. So.

Dr. Joseph Mercola:

Oh geez. I mean, which isn't the case now.

Greta Crawford:

Okay.

Dr. Joseph Mercola:

I think they are allowing your spouses in or relatives. So, whoever has the ability, the mental capacity to read that should be doing this.

Laura Bartlett:

Sure. So, the second point. So, this is a general consent just for permission to do anything to you. Because you have bodily autonomy. They need your permission to do something to you. So this is just a general consent that, yes, we can start treating you. Say you walk in with a heart attack for instance, right?

Okay. The second point that people don't usually know is very, very important because this whole thing in the last three years had to do with the sacred relationship between a doctor and a patient. It wasn't the sacred relationship between the hospital and the patient. It wasn't the sacred relationship between the WHO (World Health Organization) and the patient. It was between the doctor at the end of your bed and the patient. It says, "Independent physicians. I acknowledge that the physician taking part in my care for professional-" Let me see. I can't see it. "Or providing professional service to me do not work for the hospital. And that the hospital is," this is important, "Not responsible for their judgment or conduct." Okay? So really, you need a carved-out, 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. And so let's go to the next slide. So, the-

Dr. Joseph Mercola:

What could be even more broadly defined, such as any vaccine or any medication that I am not-

Laura Bartlett:

We'll get to that.

Dr. Joseph Mercola:

Told of beforehand.

Laura Bartlett:

We'll get to that. We'll get to that. Hold up, Dr. Mercola. You're going to be really pleased with our presentation. I promise you. There's a lot to cover here.

The AMA. Okay, this is what people don't understand. Maybe they do or they don't, but they have a code of ethics, the American Medical Association guidance to physicians that per the ethics opinion 2.1.1, that when the patient surrogate has provided specific written consent, written consent, that the consent form should be included in the record. This is key, that if you write it down, just as you can say something, you can write it down. Doesn'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 write it down and deliver it in our specific way, and we'll get to that. It's very important how you deliver it per a hospital insider, it gets put into the electronic medical record for everybody to see. And now you've got receipts that if you do something against consent, it's intentional. Okay?

So, here's the website, you can find a template for that. It's called OurPatientRights.com. What you'll see there are two PDF documents. One is the actual template, the other one is instructions on how to deliver it. And very carefully, you can edit the document by the way. You can write your own, but 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.

Next slide. Okay. Here's what you're going to see. You're going to see the language 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." Okay? That's very important because it's current. It's not going to kick in when I'm incapacitated. Next slide.

Greta Crawford:

Yeah. Well, and that's another issue is, a lot of people are coming up and saying, "Well, I have advanced directives." And the advanced directives are not going to kick in until you're incapacitated. In the meantime, many patients that have reported to me their loved ones in the hospital have said, "Well, they actually talked my father into getting remdesivir. They said they would check his kidneys continuously." And things like that. And people are so distressed or without oxygen or, in my case, confused because you're not getting enough oxygen. You don't know what's going on. And so, if you have these in writing, there is no way to coerce or manipulate the patient who is in distress at that point. So that-

Laura Bartlett:

Right. So, the main thing is to understand is that this is not an advanced directive. This is an advanced decision. Okay? So that means walking into a hospital, they know from that moment, the clock starts ticking. If you did not want a COVID injection, you don't want a COVID injection and it's documented. Okay?

So, here's the next piece of it is that, "This caregivers and consent document also reflects my deeply held religious and spiritual beliefs." Okay? This is important because there's already a

precedent as you know, Dr. Mercola, that Jehovah's Witnesses, they notice the hospital in writing. They have their own consent that they document that tells them that they don't want blood transfusions. It's part of their religious beliefs, a lot of them, that they don't wish to get any blood transfusions. And so they walk into the hospital with a written consent document. So there's already precedent for this in bioethics. Next slide.

Greta Crawford:

And it doesn't-

Dr. Joseph Mercola:

And I can testify to that too, as a practicing position, that I've encountered that in the past when I was taking care of hospital patients, mostly in training as a resident. But it was well-established and known and no one really disputed it. There was no hassle at all.

Greta Crawford:

Right.

Dr. Joseph Mercola:

There're Jehovah's Witness. They can't have transfusions. As simple as that. It was accepted and followed.

Greta Crawford:

Right.

Dr. Joseph Mercola:

No controversy.

Greta Crawford:

And it doesn't matter why they believe that way or if the doctor understands it or not. It's their beliefs.

Dr. Joseph Mercola:

Doesn't matter. Right.

Greta Crawford:

They must be respected.

Laura Bartlett:

So, it would be discriminatory, would you not agree? That if you had your own religious and deeply held spiritual beliefs, whatever that may be, whether it's mainstream religion or if it's something that's not commonly practiced, but it's your own belief that you don't consent to a COVID injection, that you should be respected for that. It would be discriminatory if they said, "Well, you're not the religion that we honor." So that's why that language is in there. There's

already a precedent for it. And so, Jehovah's Witness, here you can see JPAC (Joint United Kingdom Blood Transfusion and Tissue Transplantation Services Professional Advisory Committee). It's a transfusion handbook. They acknowledge that Jehovah's Witnesses frequently carry assigned and witnessed advanced decision document listing the blood products and autologous products that are or are not accepted to them. A copy of this should be placed in the medical record just as we state that once you write it down, it gets put into the medical record. Okay?

Greta Crawford:

Yes. And [inaudible 00:37:26]-

Laura Bartlett:

Let's [inaudible 00:37:27] the next point.

Greta Crawford:

I was just going to say, just two days ago before this interview, I had two Jehovah Witnesses knock on my door. Very lovely ladies. And I asked her about this. And they both confirmed everything that we're talking about. They carry documentation with them so that they are prepared in case this happens and the doctors know what to do.

Laura Bartlett:

Okay. So, the next part of our document says, "Receipt of this caregivers and consent document by the hospital serves as notice that I will report," this is important. Listen carefully. "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 the caregivers and consent document." This puts the doctor on notice. This isn't a threat. This is just a promise that if you intentionally go against my wishes, if I say that, "I do not want surgery and you cut me, that's intentionally disregarding my consent to that." That would be like saying, "No, I don't-" I'm going to tell you in a different context. If you were to have a sexual encounter with somebody and you did not consent to that, that's called rape. Okay? So, we take this very seriously that, you've been noticed. It's in the electronic medical records. You cannot say you didn't know that I [crosstalk 00:38:56] consent.

Dr. Joseph Mercola:

Exactly. Exactly. It's actually a crime. It's a criminal offense.

Laura Bartlett:

It's a crime.

Dr. Joseph Mercola:

It's assault and battery essentially.

Laura Bartlett:

And good physicians-

Dr. Joseph Mercola:

In addition to medical malpractice, it's assault and battery.

Laura Bartlett:

And good physicians, let me tell you something. There are some good physicians, and they are clamoring for something like this. They are thankful there is something they can 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. I don't care how incentivized an injection is."

Dr. Joseph Mercola:

That's a good point. That is a good point. Because many people don't realize that it's not the physician who's a nefarious criminal.

Laura Bartlett:

Well-

Dr. Joseph Mercola:

It's typically the hospital who's forcing [inaudible 00:39:40]-

Laura Bartlett:

Well, actually it is the doctor. In all due respect, Dr. Mercola, the only person who could have given that shot in your body, I don't care how much pressure there is to keep their job.

Dr. Joseph Mercola:

Yeah.

Laura Bartlett:

I don't care if somebody has a gun in my head at my place of work and says, "Shoot that person." They have a gun at my head, and I have a gun in my hand. Or whatever it is they're asking me to do, I'm not going to do it to keep my job. So really, this is the big misnomer during the last three years, that only the doctor-

Dr. Joseph Mercola:

Well, I don't know that that's a good analogy because-

Laura Bartlett:

Maybe not.

Dr. Joseph Mercola:

It's life and death.

Laura Bartlett:

Exactly. I mean, yeah.

Dr. Joseph Mercola:

Because the coercion that's being used in this case is-

Laura Bartlett:

It's financial.

Dr. Joseph Mercola:

It's financial.

Laura Bartlett:

It's financial.

Dr. Joseph Mercola:

They may lose their job. They may lose their license.

Laura Bartlett:

Yeah.

Dr. Joseph Mercola:

They lose their board affiliation, accreditation. And their ability to provide for themselves and their families. So, that's pretty powerful. And if they don't really have any strong convictions the other way, they're going to go along with it.

Laura Bartlett:

Exactly.

Dr. Joseph Mercola:

It's not like killing someone in their mind.

Laura Bartlett:

Right.

Dr. Joseph Mercola:

So.

Laura Bartlett:

Yeah. Financially incentivized-

Dr. Joseph Mercola:

So it's typically enforced by the hospital, not so much the physician, although obviously the physician's responsible. [inaudible 00:40:52].

Laura Bartlett:

The physician is squarely the one who had the responsibility to give that patient the right to the informed consent, telling them all the risks, the benefits, why they're advising or recommending a certain treatment, medication, intervention. And once that was very well-communicated to the patient, then the patient could say yes or no. And if they said no, it should have been respected. I don't care how much money, how much pressure it is to keep your standing in the community or whatever, that never went away even during the COVID shielding for hospitals. It was only the patient. It wasn't the CEO. It wasn't the administration or an elected official. It wasn't with the WHO, Fauci. It was only the guy at the end of your bed, the doctor in your room, that could make that decision whether to give you something, to violate your bodily autonomy. So-

Greta Crawford:

Up until this point-

Laura Bartlett:

[crosstalk 00:41:57].

Greta Crawford:

Up until this point, doctors have had the option to quit their job and many of them have. They've refused to give this protocol and quit their job and find work somewhere else. But 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. So, what would you rather do? Find another job or find another career altogether?

Laura Bartlett:

Right. So, this is a consequence. Finally, there's a consequence because patients have felt hopeless and helpless against a system that seems to be squarely in favor of the medical establishment and not respecting patient rights. Well, you finally are putting that doctor on notice that, "Look, you are intentionally, at that point, violating my right to consent. You are doing something against my will that I have not given you permission to do." So, what are some examples in this document that you can not consent to? You can not consent to receiving a vaccine booster or COVID-19 injection or any variant of the COVID-19 that they come up with, right? Or any flu shots or any shot, really. Any vaccine.

Dr. Joseph Mercola:

Which is the best option obviously.

Laura Bartlett:

So, if that's your wish, if that's-

Dr. Joseph Mercola:

That's the best one. It should be highlighted in yellow.

Laura Bartlett:

Right.

Dr. Joseph Mercola:

You don't need a vaccine.

Laura Bartlett:

So right. And so, what we're hearing, let me give you an example. I was helping advocate for somebody that went into the hospital for something unrelated to COVID. And she was coerced. She was a 93-year-old, and she was coerced five times to get the COVID injection. And she said clearly when she first was admitted, "Just so you know," verbally, "I do not want a COVID vaccine." And her first "no" should have been enough. But because she didn't have this document, she was asked again and again and again and again. And so, on the last day before she was going to be discharged, medically discharged by the hospital, she did not trust that they would not do something in her sleep and call it implied consent, meaning she is drifting off to sleep and she mumbled. She talked in her sleep. She didn't trust them.

And so, she started to proactively start the process of being discharged AMA, against medical advice, eight hours before she would've been medically discharged by the hospital. So, she called the nurse's call station and nobody came. Long story short, she left. She went home and she made it to her 94th birthday. She just texted me just recently. So, the point is that people are being coerced and it's a battle if you don't have it written because obviously, they didn't respect her verbal consent.

Greta Crawford:

Right.

Laura Bartlett:

And so, you need in writing. 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 pile-up on the highway and an ambulance transports you to the hospital. The time to have this done is before there's a problem.

Greta Crawford:

Right. And this form also goes on to, it has other bullet point lists-

Dr. Joseph Mercola:

Can we see the next page on this?

Greta Crawford:

Well actually, we don't have the exact next page of it. We have the third. But-

Laura Bartlett:

You can alter it. You can add to it.

Greta Crawford:

Yeah.

Laura Bartlett:

If there's something else, you don't consent to. If you have allergies, you can put it down in writing.

Greta Crawford:

Right. But it also lists things like [inaudible 00:45:53].

Dr. Joseph Mercola:

I'll tell you one that you should be in there for sure to revise this. "I specifically, I do not consent to receiving any," and any should be in all caps and highlighted, "seed oils or seed oil derivatives in any of the food I'm fed at this hospital."

Greta Crawford:

And that's something that can be added.

Laura Bartlett:

[inaudible 00:46:14] there. That could be added.

Dr. Joseph Mercola:

Yeah, I like that a lot. Because the food they give you in a hospital is for – And I would say any high-fructose corn syrup derivatives. Sugar's okay, but you can't have it be from high-fructose corn syrup.

Greta Crawford:

Right.

Dr. Joseph Mercola:

So, if you eliminate the high fructose corn syrup and the seed oils, they'll actually give you food that will get you better instead of making you worse. So ...

Greta Crawford:

And that's something you can add because we do have lines-

Dr. Joseph Mercola:

Yeah, yeah. I would encourage you to add it because people won't know that. So, you could do that.

Greta Crawford:

Right.

Dr. Joseph Mercola:

Because obviously, a lot of people are going to download this. I would definitely integrate that because it's sort of the stealth form of abuse. Obviously, giving things like remdesivir and ventilators is not a good thing. But the one that people aren't aware of, almost anyone, is that the food they're giving you is just atrocious. It's designed to get you worse. No question.

Laura Bartlett:

So, right. So, any kind of alteration or amendment, you can make. You can even have your own form. But what people need to know is, you need to have it in writing, and it needs to be served in a very specific way we're going to get to, okay?

Greta Crawford:

And there's another important point.

Laura Bartlett:

Yeah. "That all items in this caregivers and consent documents shall remain in effect unless I choose to revoke in writing. No one else may alter or amend this caregivers or consent document." Why is that important? Because let's go back to the 93-year-old that I was discussing a minute ago.

Dr. Joseph Mercola:

Did she ever get a COVID jab when she left?

Laura Bartlett:

No. No.

Dr. Joseph Mercola:

Oh, okay. Good.

Laura Bartlett:

Because she left.

Dr. Joseph Mercola:

She succeeded.

Laura Bartlett:

In my opinion, it's because she left when she did. Because let's say that she did fall asleep, right? And she mumbles something. They could possibly say, and because they have control of the electronic medical record, they could say, "Oh, she withdrew that consent." So, we've covered that. We've got your bases covered with this document. There's no misunderstanding. There's no implied withdrawal-

Dr. Joseph Mercola:

Only in writing. Only in writing.

Laura Bartlett:

It has to be in writing. Yes, sir. Next slide.

Dr. Joseph Mercola:

That's pretty clever. Pretty clever.

Laura Bartlett:

Right.

Greta Crawford:

The document is only as good as you are able to deliver it the appropriate way. So, we're going to go into that next.

Dr. Joseph Mercola:

Yeah, and then-

Laura Bartlett:

Let's talk about that.

Dr. Joseph Mercola:

But before you skip, it appears that ideally, it's notarized, which means you should do this document before you go into the hospital. Before.

Greta Crawford:

Yes.

Dr. Joseph Mercola:

Before.

Greta Crawford:

Before.

Laura Bartlett:

I'm telling everybody right now, you don't know if it's 24 hours from now or 24 years from now when you get into that catastrophic car wreck that you need to go. Or a heart attack or stroke. You should have these documents done ahead of time because they're going to take a little proactive measure on your part. Okay?

So, how do you do this? Now, I'm going to let you know that these aren't Laura Bartlett's ideas. These are not Greta Crawford's ideas. This is a nurse attorney. This is kind of a unicorn in the

universe, okay? She's a nurse, attorney and a hospital insider in administration. Former hospital administrator. Who else would know that The CEO impacts the electronic medical records. So, if he receives this document, that's why we're sending it to the CEO. We'll get to that part in a minute. But you're going to send it priority mailer, certified return receipt requested. So, you have the receipts. They got it. They know you know they got it. And from that moment on, the clock starts ticking. Right?

Dr. Joseph Mercola:

Wait, wait, wait. What's the timing on this? I'm assuming you have to send this-

Laura Bartlett:

We'll go over that.

Dr. Joseph Mercola:

Once you're admitted, right?

Laura Bartlett:

Right. So, you're going to carry some in with you. If you're so fortunate to have it on your body, you're going to have a copy, right? You're going to make 10 copies. You're going to get this document notarized.

Dr. Joseph Mercola:

Well, it should be in the glove compartment of your car.

Greta Crawford:

Right.

Laura Bartlett:

Your purse.

Dr. Joseph Mercola:

Or even your purse.

Laura Bartlett:

In your purse.

Dr. Joseph Mercola:

[inaudible 00:50:17].

Laura Bartlett:

In your wallet. Possibly right next to your driver's license. So, when they say, "Who is this Jane Doe," they see this document. Right? So, you have it somehow in your control as a patient, but you're going to make 10 copies. You're going to send one certified mail in a priority mailer so it

stands out when the personal assistant secretary for the CEO sees the mail, sees that this is important. It is flagged. "We got to open this one. This one's certified." That you also sent it professional legal document, courier service. I'm not talking about FedEx. I'm not talking about DHL. I'm talking about a professional courier that would deliver, say, legal documents. You can Google that. Practically every city has one. You're going to pay for that. It's a little expense, but it's worth it.

It's legally noticed in two ways to the hospital. But you're also going to have a couple of people on the outside that are close to you also get copies. People you trust, that you've informed that, "I've got these documents. I've made you one of my contacts." So that if, for instance, you can't mail it because you're in the hospital now, they'll do that for you. They're the ones who are going to be your foot soldiers to go to the post office and deliver that document that you've already given your friends. Okay? And so, if you're in the hospital and you have, like that 93-year-old, the mental capacity, the physical capacity to call somebody, you call those people and you say, "Remember that form I gave you with the instruction stapled to it that are on your refrigerator that I told you to put there? Mail it now. I'm in the hospital."

They do these steps. They will have every step delineated that have been given to us from that brave, anonymous hospital insider who happens to be that unicorn in the universe that knew how to do this, how to get it into the electronic medical record. So, what you're going to do is you're going to give the copy to your attending physician. You're going to give it to a nurse, the copy. You're going to let them know that if they decide they're going to crumple it up and go, "I don't want it," And throw it in the trash, let them know that your hospital's going to be served, legally, the same documents. So just so you know, it's going to be in the electronic record next business day. If it's after hours and the post office is closed, you're going to get this. Okay? And then you're going to keep some other additional copies of the caregivers and consent document for your records to distribute as needed to other care providers.

Dr. Joseph Mercola:

Okay. That is great.

Laura Bartlett:

Okay. So, have you ever heard this anywhere else? I have never heard of this strategy. But again, there's a precedent with Jehovah's Witnesses and it works. But we're expanding it so that anybody can have their own consent respected. You don't have to be just a Jehovah's Witness to do this. You can have your own consent in writing according to your own deeply held spiritual and religious beliefs. And if they're not respected, that's discrimination. So, here's the people who we've been led to believe for the last three years who matter when it comes to informed consent. The World Health Organization. No. Eh, wrong. The CDC (Centers for Disease Control and Prevention). No, that's wrong. Elected officials. Wrong again. The hospital in general. Wrong. The hospital CEO, wrong. I'll add the CNO, the nurse, the custodian, the food service director. None of that applies to informed consent.

It is only the medical doctor treating you with a medical license, which could be lost if he is intentionally violating your written consent that has been noticed legally in two different specific ways to the hospital and added to your electronic medical record. It is always that sacred

relationship, I can't stress it enough, between the doctor and the patient. All other superfluous conversations about these entities that did this and said that and had this bill and this COVID shielding for the hospital, it didn't move the needle once. In one of the advocacy instances that I've been involved in, the only thing that got people out alive was that they either left AMA or they were able to negotiate with that doctor, because he is the one who directs your care plan. He's the one who orders the drug from the pharmacy. He directs the nurse to put the needle-

Dr. Joseph Mercola:

Do you have any experiences of people who have completed this template, this contract of the informed consent, they've been able to leverage that to help the negotiation?

Laura Bartlett:

They're at Hospital Hostage Help. We have testimonials.

Dr. Joseph Mercola:

Okay, so if people have used this already, it's been in effect and people are getting success with it.

Greta Crawford:

Yes. Yes.

Dr. Joseph Mercola:

Okay.

Laura Bartlett:

Yes. You can't deny.

Dr. Joseph Mercola:

[inaudible 00:55:52].

Laura Bartlett:

If something's in writing and it was your carefully planned, intentional wishes. It's been notarized. It was signed. It was delivered two legal ways. It's now in the medical record. Why? How does it get into the electronic medical record? The CEO. Why do we send it to the CEO and not just give it to the doctor? Because the CEO is tasked in the structure of the hospital for all business for the hospital. And that means the hospital electronic record, too. So, they're going to be very interested in getting that into the electronic medical record quickly.

Dr. Joseph Mercola:

Well, I have not seen patients in the hospital this century. And when I was seeing patients, the electronic medical record (EMR) existed in my office, but it certainly wasn't in the hospital. Now it's pretty standard. So, I don't know. But when I was seeing patients, there was a physical chart that you had and it was on the nursing station. You to go [crosstalk 00:56:54]-

Laura Bartlett:

It's all EMR now. It's all EMR.

Dr. Joseph Mercola:

It's all EMR.

Laura Bartlett:

Okay. So-

Dr. Joseph Mercola:

So, you walk around with a tablet?

Laura Bartlett:

So here's what you do. I'm going to advise what I do all the people that I advocate for. [inaudible 00:57:05].

Dr. Joseph Mercola:

The point of the question though. Let me just finish. The point of the question was, we have a hard copy for the [inaudible 00:57:11]. You can actually look through it.

Laura Bartlett:

They can scan it.

Dr. Joseph Mercola:

Like a telephone book. So, should the patient be asking for their chart so they can see that this document is in the chart?

Laura Bartlett:

Good question. Good question. And that's what I just mentioned. I always tell, and these tips are on HospitalHostageHelp.com. You should immediately get into your electronic medical record. If you don't know how to do that, call the hospital, sound the alarms, make some noise until you get access into electronic medical record. It's your right.

Greta Crawford:

And if they can tell you no-

Laura Bartlett:

[crosstalk 00:57:46] online record.

Dr. Joseph Mercola:

Can you access it? Like say you bring a notebook to the hospital and you're online, you can access it through an online portal?

Laura Bartlett:

There's a portal. There's an online portal. And so, a lot of people don't really know how to navigate the whole process of being a patient. I didn't, frankly, 15 years ago when I had surgery. So, it was an, anyway, appendectomy. So, did I ask these questions? Did I know this 15 years ago? No, I didn't. Most people don't. But they should get immediately access to that electronic medical record so you can make sure that, even this document is placed in the electronic medical record, that it didn't end up under a pile of mail on the secretary's desk or a drug was given to you that you did not consent to or what the dosage, the route, the name of the medication, all that. You can see the frequency they're giving you something. You can see what the progress notes are. You need to get into that. You can see your lab work. So, you need to get into that electronic medical record.

Greta Crawford:

Do not blindly trust the doctor. Just because you've had a conversation with your doctor and the doctor said, "Okay, so you don't want fentanyl. We won't give you. I understand." That doesn't mean anything. He can be really, she can be really nice and saying it. In the end, you need to check your medical record. Because there's some instances where people have refused a certain medication and then they check their online portal and there they are being given that medication every hour, 30 minutes. They don't know until they check.

Dr. Joseph Mercola:

Yeah. Well, this has been useful. I didn't realize it was that easy for a person to access their medical record.

Laura Bartlett:

It is.

Dr. Joseph Mercola:

That would've been really difficult last century. I mean, you would've had to go to the nurse's station and get the darn thing. And I don't think they hardly ever allowed a patient to look at their medical record. I mean, they may have, but I don't think so. But now, that is really empowering. I didn't realize that was an option.

Laura Bartlett:

Yeah. We're all about empowering people. Look, like I said, let me say it again. I'm not a nurse. I'm not a doctor. Your rights weren't just for doctors and nurses to understand. It was for all of us. We all had the right to informed consent. And it didn't go away just because there were COVID legal shieldings for hospitals. That doctor still had a duty and obligation per biomedical ethics opinion 2.1.1 to respect your informed consent, telling you all the risk and benefits, explaining it all, and then waiting till you've assessed it, and you make a determination whether or not that's a yes or a no. And then respect that yes or a no as yes and no. Your yes means yes. Your no means no. And the only way that we can make sure that there's no ambiguity about this, no misunderstanding, is to have it in writing, documented, that it will go into your electronic medical record.

Dr. Joseph Mercola:

So, what are you calling this document? It's not an advanced directive. You gave it another term.

Laura Bartlett:

It's an advanced decision. It's a current-

Dr. Joseph Mercola:

Advanced decision. Advanced decision document.

Laura Bartlett:

It's a current.

Greta Crawford:

Current. It's a current care form.

Laura Bartlett:

It's a current consent.

Dr. Joseph Mercola:

Current consent. Current consent form would be another way.

Laura Bartlett:

It is a current consent decision document.

Dr. Joseph Mercola:

Current consent. Okay. Advanced decision. Current consent form.

Laura Bartlett:

The only one that we know of that's similar like this is the Jehovah's Witness. I have-

Dr. Joseph Mercola:

Yeah, yeah, yeah. Did you model it after that? Did you model it after that?

Laura Bartlett:

The idea for it came from the – I wouldn't have known this – was from that hospital insider who will remain anonymous for this individual's safety and security. I think you can understand why. That's important because it allows us to get this information out. There would be a lot of, maybe, possible resistance to people knowing this.

Dr. Joseph Mercola:

Well, there will be. There's no question. So, I am going to take your document and revise it, include two new lines that people need to have. One, as I mentioned earlier, is on the food. And I'll make the language really, really clear so people can choose to mark that on their document.

And the other is the generic one. I mean, I really like that you put down all vaccines, essentially converting them to an anti-vaxxer for most people, which is an option. But I think the same should be for all medications with the caveat or the caution that I cannot be given any medication unless I am told what it is.

Laura Bartlett:

That's on there.

Dr. Joseph Mercola:

What the risk and the benefit-

Laura Bartlett:

That's already there.

Dr. Joseph Mercola:

Oh, it's on there? Okay.

Laura Bartlett:

Dr. Mercola, no treatment, no intervention, no medication. There's actually-

Dr. Joseph Mercola:

Okay, good. Yeah. Because it's got to be there. It's got to be there.

Laura Bartlett:

It's there. It's already there.

Greta Crawford:

It's actually, it's the one you can check off. So.

Dr. Joseph Mercola:

Okay. Perfect. Perfect.

Greta Crawford:

It's definitely there.

Dr. Joseph Mercola:

You just got to include the food now.

Greta Crawford:

Right.

Dr. Joseph Mercola:

Food is key.

Laura Bartlett:

You can revise it any way you want. Doctor. We are so, so grateful. We're so grateful to you.

Dr. Joseph Mercola:

Well, yeah.

Laura Bartlett:

Thank you.

Dr. Joseph Mercola:

I appreciate that. But everyone watching this should be grateful for you because this is one of those rare things. Many times, I interview guests that have some great products, but they're conflicted because they're selling something. You are not selling one thing.

Laura Bartlett:

Thank you for saying that.

Dr. Joseph Mercola:

This is a freedom. This is a gift. This is a gift.

Laura Bartlett:

For three years, I've put my life on hold. This isn't to say anything about me. I'm just wanting you to know full transparency that I have nothing to sell. I have no affiliate links. I don't have a product. I don't sell this service as advocacy. It's 24/7. If somebody calls me at 2 o'clock in the morning, I answer the phone. Greta is the same. She has not monetized any of this.

Greta Crawford:

No.

Dr. Joseph Mercola:

Yeah. Well, that's the ultimate, isn't it?

Laura Bartlett:

We just want people safe. We just want people safe. And we've heard too many heartbreaking stories. And I'll tell you the reason to add that phrase, that there are consequences to the doctor was I was walking around on the leaves in Texas when I got a call from – I was advocating for somebody and the doctor deliberately, willfully disregarded this person's wishes for consent and their husband died. And I was consoling the family afterwards, just hours afterwards. And I said, "I promise you, Nancy, that I'm revising the way I do things going forward. I'm going to put that doctor on notice. There will be consequences to that doctor."

Dr. Joseph Mercola:

So, did she sign the advanced decision?

Laura Bartlett:

No, she didn't have that. They did not have that at the time.

Dr. Joseph Mercola:

Oh, okay.

Laura Bartlett:

So, I'm saying that-

Dr. Joseph Mercola:

That was the motivation for it.

Laura Bartlett:

That was the motivation was that there seemed to be no consequence. There was no recourse for any of this.

Dr. Joseph Mercola:

Wow.

Laura Bartlett:

Because they had been told that the CARES (Coronavirus Aid, Relief, and Economic Security) Act covered hospitals and the doctors were going along to get along. And-

Dr. Joseph Mercola:

The PREP (Public Readiness and Emergency Preparedness) Act.

Laura Bartlett:

Yeah.

Greta Crawford:

Right.

Laura Bartlett:

Yeah.

Greta Crawford:

Essentially, it was the doctor's word against the patient and the family's word.

Laura Bartlett:

Right.

Greta Crawford:

And that's all that you had. But now when you have documentation that's legally delivered and you have a signature that they've received it, you have the receipt. So, denying something like that when you have all this documentation, I think it's a great motivator for them to do the right thing if they wouldn't choose to do it on their own.

Laura Bartlett:

Right. Because for some reason-

Dr. Joseph Mercola:

I couldn't agree more.

Laura Bartlett:

Just moral obligation or professional obligation to uphold your duty to respect informed consent didn't seem to be a big motivator for a lot of doctors, unfortunately. I'm sad to report that. But now there will be consequences. Just like if you were to go into a store, a clothing store, and you see the notice that says, "Shoplifters will be prosecuted to the fullest extent of the law." Why did they put that there? Why did they notice that in writing?

Dr. Joseph Mercola:

Because it works.

Laura Bartlett:

It works. Obviously, there's a precedent that it works. You trespass, if you see a sign that says, "No trespassing. Violators will be prosecuted to the fullest extent of the law. And this property is surveilled by video camera." Why do they that?

Greta Crawford:

It's a deterrent.

Laura Bartlett:

It's a deterrent. It puts them on notice that, "I know my rights and I'm going to let you know that I know and that these are the consequences." Maybe [crosstalk 01:06:14] some things different. Would 1.1 million people in America need to die if maybe the doctor said, "Hm." Even bad doctors, say that they're just Dr. Evil, would they maybe stop and think, "I might lose my job, but this one, I'm going to let this one go. Maybe the other ones that don't fight back, the ones who just passively go through the system and let me do whatever I want to because of that general consent they signed that gave them implied consent for everything else, this one sent me notice. It's in the electronic record. I'll let this one go. I'm not going to do it to this one." What if 1.1 million people had done this?

Dr. Joseph Mercola:

Okay, so you have a [crosstalk 01:06:59]-

Laura Bartlett:

I don't want anything in the future to occur like this.

Dr. Joseph Mercola:

You have a large number of people who signed this document, examples that you said. And I'm wondering if anyone has used this when the physician has violated their consent and they've been prosecuted. It went up to the medical board or had their license removed.

Laura Bartlett:

Not yet. No, this is novel. This is new. But I'm telling you that this definitely puts them on notice.

Dr. Joseph Mercola:

Exactly.

Laura Bartlett:

I've heard this, Dr. Mercola. I've heard people ask, "Well, worst-case scenario, what's going to stop somebody from just doing whatever they want? Even if you did put them on notice." And I have to say-

Dr. Joseph Mercola:

Oh, it's the law.

Laura Bartlett:

Can I guarantee that people that are hell-bent on doing something to harm somebody, violating their rights, can I guarantee that they won't do that? No. Because there are people, even if you don't want somebody to kick in your back door while you're-

Dr. Joseph Mercola:

They'll do it. Yeah.

Greta Crawford:

They're going to do it.

Laura Bartlett:

There are those people, but it sure is a big deterrent to have a lock on your door, to have a notice [inaudible 01:08:03]-

Dr. Joseph Mercola:

But for every physician, there's the other component is called malpractice. And most physicians have malpractice insurance. If they violate a specific, clearly documented and delivered-

Laura Bartlett:

It's intentional.

Dr. Joseph Mercola:

Legally delivered document, intentionally.

Laura Bartlett:

Intentionally.

Dr. Joseph Mercola:

And there's harm, you are looking at seven- to eight-figure judgments. And it almost doesn't go to trial, it's that quick. I mean, it's just-

Laura Bartlett:

It's a slam dunk.

Dr. Joseph Mercola:

There's just no way. You are a 100% lost. No way around that. All they have to do is document that you did it and violated it. You're dead in the water.

Laura Bartlett:

That's why [crosstalk 01:08:38]-

Greta Crawford:

What we've experienced [crosstalk 01:08:39]-

Laura Bartlett:

The Jehovah's Witness work. Why would the Jehovah's Witness consent document work for them?

Greta Crawford:

Right.

Laura Bartlett:

Because it works. It works.

Greta Crawford:

What we've experienced using these documents is that a complete change in the attending physician from being aggressive and maybe trying to push you to-

Dr. Joseph Mercola:

Arrogant, authoritative and tyrannical.

Greta Crawford:

Right. To being very helpful and efficient. And once they receive these documents, they just have a 180 [degrees].

Dr. Joseph Mercola:

Wow.

Greta Crawford:

And 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.

Dr. Joseph Mercola:

Nice. Nice.

Laura Bartlett:

And this is a patient that had security called on him.

Greta Crawford:

Yes.

Laura Bartlett:

When he was admitted. He had security for his advocate to be taken out of the hospital. So, this document, within minutes of that occurring, they got the document, got it signed, changed everything. So, I-

Greta Crawford:

And apologized.

Dr. Joseph Mercola:

Wow. Wow.

Greta Crawford:

Apologized.

Laura Bartlett:

And [inaudible 01:09:40] it was a prior version of this. This is the 3.0 version. This is-

Dr. Joseph Mercola:

Well, the 4.0 is putting, including the food.

Greta Crawford:

Yes.

Laura Bartlett:

So, the thing that everybody needs to-

Dr. Joseph Mercola:

Can you imagine that? You come out of the hospital healthier than when you went in?

Greta Crawford:

That would be awesome.

Laura Bartlett:

Love that. We want people to be safe. We want them to know that they need to do this before there's a problem. You wear your seatbelt before you get in a wreck. You need to have things in order. You're going to need to get involved in your own health care. Just like you were saying, Dr. Mercola, do everything you can to prevent yourself from even having to go.

Dr. Joseph Mercola:

Yeah. That's the first one.

Laura Bartlett:

That's number one.

Dr. Joseph Mercola:

You don't want to be in the hospital.

Laura Bartlett:

But there are those cases, and I know regardless of whether or not I would like everybody to do the right thing, I know that there are people going to the hospital, regardless. There are thousands of people in hospitals right now. There will be thousands more.

Dr. Joseph Mercola:

No, no, no, no, no. There's tens of thousands or maybe hundreds of thousands.

Laura Bartlett:

But we need them protected.

Greta Crawford:

Right.

Dr. Joseph Mercola:

In the hospitals.

Laura Bartlett:

Exactly. In any particular hospital. We need people to know this because it takes a while to change trajectory of the Titanic. Right? So, what can we get [crosstalk 01:10:47] now?

Greta Crawford:

And share this information, not just to share it so others have the knowledge, but share it with those specific individuals that are going to be helping you out in a situation in case you have an emergency. You all need to be on the same page. You all need to be knowing what's going on.

Dr. Joseph Mercola:

Well, I would recommend for those who have a regular spiritual practice and involved in a spiritual community and go to church-

Greta Crawford:

Yes.

Dr. Joseph Mercola:

-synagogue, that they share this with that community.

Greta Crawford:

Exactly.

Dr. Joseph Mercola:

Because everyone in that community needs this information. This needs to spread like wildfire. There's no question.

Greta Crawford:

Exactly.

Dr. Joseph Mercola:

There's no cost. Why would there be a reluctance to do this? And this is a simple strategy. It's virtually free. Just takes a few minutes of your time that could save your life.

Greta Crawford:

Exactly.

Dr. Joseph Mercola:

Crazy.

Laura Bartlett:

Perfect. Perfectly stated.

Dr. Joseph Mercola:

All right. Well, this has been phenomenal. I thought it would be great. It is exponentially better than Andrew Saul's approach that I interviewed 10 years ago. I mean, he hit the foundations right, but he didn't have the practical legal implementation that essentially-

Laura Bartlett:

It came from the [crosstalk 01:11:47].

Dr. Joseph Mercola:

Almost guarantees that they can't harm you. It literally guarantees it. Now, they still can legally, but the consequences, the legal consequences are so severe that the person doing it would have to be highly irrational.

Greta Crawford:

Because the hospital can't-

Dr. Joseph Mercola:

Or on drugs or both. Because it wouldn't make any sense to violate this. The risks are too serious.

Laura Bartlett:

What people need to understand is, the hospital will not indemnify the physician.

Greta Crawford:

Right.

Laura Bartlett:

They will not have your back. The doctor-

Dr. Joseph Mercola:

The insurance company sure won't.

Greta Crawford:

And the thing is, a hospital cannot function without those groups of doctors. So, if all those doctors refuse to put their license on the line, then you don't have a hospital.

Dr. Joseph Mercola:

Yeah, yeah.

Greta Crawford:

So, something is going to have to change.

Dr. Joseph Mercola:

Well, yeah. This is an interesting strategy because what many of us are concerned about is the World Health Organization getting the ability, the legal authority, to declare a pandemic and declare pandemic recommendations, which obviously get implemented globally and then in all the hospitals. But it appears to be happening at some point in the future, whether it's a year, two years, three years from now. It likely will happen as far as I can discern. But even if that does happen and you've got this legal protection, even if you implemented this in COVID, I mean, you could have circumvented this with simple things that they cannot violate.

Greta Crawford:

Yes. They cannot violate your religious beliefs.

Laura Bartlett:

[inaudible 01:13:11].

Dr. Joseph Mercola:

Well, again, you could. But you cannot violate without serious legal consequences.

Laura Bartlett:

Jehovah's Witness faith has made a precedent for this.

Dr. Joseph Mercola:

And COVID-19, they didn't change the course and give Jehovah Witnesses blood transfusion. They did not do that.

Greta Crawford:

Right.

Dr. Joseph Mercola:

So-

Laura Bartlett:

That's the secret sauce there.

Dr. Joseph Mercola:

It is.

Laura Bartlett:

Is that even with the pandemic, even future, because there's so much fear porn, Dr. Mercola, out there. There's so much fear. There's so much where it's almost paralyzing people and they do nothing. Hear this, that the Jehovah's Witness had this document throughout the pandemic.

Greta Crawford:

Mm-hmm. And yeah. For decades before.

Laura Bartlett:

So, case in point, it is the smoking gun as far as receipts, that I had my written notice. They had their written notice. They said they didn't want blood transfusions, pandemic 1.0, 2.0, 3.0. That's the document. That's the process. That's the strategy.

Dr. Joseph Mercola:

Yeah.

Laura Bartlett:

And that's what we're going to use going forward because it works.

Dr. Joseph Mercola:

It would've worked for Greta. She wouldn't have got that remdesivir, that's for sure.

Greta Crawford:

Yes. I wish I had known then what I know now.

Laura Bartlett:

[crosstalk 01:14:23] didn't know me at the time.

Greta Crawford:

I did not know her at all. Yeah.

Dr. Joseph Mercola:

Yeah. So, we learned by, it was a very expensive tuition you had to pay to learn that lesson.

Greta Crawford:

Almost my life.

Dr. Joseph Mercola:

Yeah.

Greta Crawford:

Yeah.

Dr. Joseph Mercola:

So, now you can pay it forward to others.

Greta Crawford:

Yes.

Dr. Joseph Mercola:

And the others don't have to make the same mistake you did. And it really wasn't a mistake. It was suffer the consequences because we didn't have the knowledge.

Laura Bartlett:

Lack of knowledge.

Greta Crawford:

It was my lack of knowledge.

Dr. Joseph Mercola:

How to do this. Yeah. That's what it was. And it's not ignorance. It's just naivete.

Greta Crawford:

Yeah.

Dr. Joseph Mercola:

It just wasn't [crosstalk 01:14:59].

Laura Bartlett:

You would have to be an insider.

Dr. Joseph Mercola:

Yeah.

Greta Crawford:

[inaudible 01:14:59].

Laura Bartlett:

In all fairness, you would have to be that unicorn I spoke of.

Greta Crawford:

Yeah, yeah.

Laura Bartlett:

Somebody who's a nurse, a registered nurse, an attorney, and somebody who worked within the system at such a high level in the administration to understand the relationship between the administrative side of the hospital and the medical staff services side, which is the doctor.

Greta Crawford:

Right.

Laura Bartlett:

You'd have to know that relationship and how to exploit that relationship, for lack of better way of explaining it, to know that the doctors will have something to push back and say, "I know you said this is the protocol for X, Y, Z, variant X, Y, Z, but I'm not doing it. I'm not doing it."

Dr. Joseph Mercola:

Yeah, yeah. This is great.

Laura Bartlett:

And to know that that relationship is so fragile that they want to retain those doctors, they'll say, "Okay, okay."

Dr. Joseph Mercola:

Yeah. But even with this, I mean, it'll protect you from the damages they're seeking to do. But what it will not do, and make it clearly, this can't force them to give you something you want. You couldn't sign a document that says, "I want ivermectin," or, "I want-"

Laura Bartlett:

It does not work-

Dr. Joseph Mercola:

"-Hydroxychloroquine." It's not going to work for this.

Greta Crawford:

No.

Laura Bartlett:

No.

Dr. Joseph Mercola:

That's okay. You got your other ace up the sleeve, which is you could sign out AMA.

Greta Crawford:

Yes, you can get out alive.

Dr. Joseph Mercola:

Which may [[crosstalk 01:16:16](#)] financially, but-

Laura Bartlett:

Yes, sir.

Dr. Joseph Mercola:

You can get out alive and then find someone who can.

Laura Bartlett:

Perfect.

Dr. Joseph Mercola:

So, we can't force them to do something that they don't want to do because they have their own-

Laura Bartlett:

That's right.

Dr. Joseph Mercola:

Freedoms too.

Greta Crawford:

Right.

Dr. Joseph Mercola:

But you can force them to avoid doing anything you don't want to do.

Laura Bartlett:

That's absolutely right.

Greta Crawford:

Exactly.

Laura Bartlett:

And let me tell you, in the last three years, that was the problem. Overwhelmingly-

Dr. Joseph Mercola:

This is a really great solution.

Laura Bartlett:

Thank you.

Dr. Joseph Mercola:

This is probably the best outcomes I've seen from this pandemic. There are a few silver linings of what's happened. One of the best is the vaccine adoption rate dropped 44%. Not just to COVID jabs.

Laura Bartlett:

Right. Right.

Dr. Joseph Mercola:

Just all vaccines in general. To me, that's something I've been fighting for, for almost 30 years. So that's a huge silver lining.

Laura Bartlett:

I know. We appreciate your work.

Dr. Joseph Mercola:

But that's another one. This is a very powerful-

Greta Crawford:

It makes you question-

Dr. Joseph Mercola:

-strategy that – yeah.

Greta Crawford:

Everything.

Dr. Joseph Mercola:

Yeah, yeah. Absolutely.

Greta Crawford:

It makes you question every vaccine from now on past. Mm-hmm.

Dr. Joseph Mercola:

Yeah. So, I thank you both for doing this and doing it out of the kindness of your heart and doing it without any compensation. I would encourage everyone watching this, you've got to be irrational or seriously time-deprived or both, not to implement this immediately. But what I would plead for you to do is to share this interview because people are going to want to know the details of it. But once they do, it's just so obvious what the next step is. You've got to share it with as many people as you can. And this means large communities. It's okay if you feel shy or diffident. Maybe you have friends who aren't.

But go into your churches and your synagogues, your local communities. Hundreds of people need to hear this at once. And this is going to go out to a significant percentage of a million people. So, I would strongly recommend that you share this. And if half of you do that, 500,000 times a – I mean, we can get this to tens of millions of people. This needs to be seen by everyone. Everyone needs to know this. We need to empower the patient. And this tool, I've never seen anything like this that will empower the hospital patient. I mean, this is a

transformational step. So, great kudos and appreciations to all your hard work and effort for providing it for everyone.

Laura Bartlett:

Yeah.

Greta Crawford:

Thank you so much for having us.

Laura Bartlett:

Well, when it's safe for that insider to come forward, I cannot wait for this person to finally get the credit due. I have never heard enough-

Dr. Joseph Mercola:

No. Yeah, we're grateful for the whistleblower/insider. But-

Laura Bartlett:

Yes.

Dr. Joseph Mercola:

You need to acknowledge your hard work and efforts to put this thing together and your commitment-

Laura Bartlett:

Thank you.

Dr. Joseph Mercola:

Dedication and service, because it would've never happened. That whistleblower said, "Yeah, you can just tell you." But most of the time, it would fall on deaf ears are just used personally, and that was the end of it. You recognized the potential for saving literally hundreds of thousands of millions of lives with this strategy. So, thank you for listening to that voice and following through with it.

Laura Bartlett:

We're so honored that you were willing to have us on and to share this, Dr. Mercola. We really respect everything you've done for decades. Thank you.

Dr. Joseph Mercola:

Yeah. Well, it's totally aligned with the mission that I've had for this site for the longest time-

Laura Bartlett:

I know.

Dr. Joseph Mercola:

-is to bring this valuable type of information, preferably free has been my goal. A lot of these strategies can't be free and there's some cost to it, but this one is 100% free and literally could save your life. That is anything but hyperbole. That is anti-hyperbole. That is just simple fact. So, it's good.

Greta Crawford:

Thank you so much.

Dr. Joseph Mercola:

You're welcome.