Know Before You Go

What patients and families need to know before going to hospital

The procession of events from the onset of flu-like symptoms to COVID diagnosis to hospital ventilator can unfold exceedingly quickly for some people. This can be a confusing and frightening experience and, as with so many things in life, it’s better to be well-prepared ahead of time.

Many of the calls and emails we receive at FLCCC have to do with a loved one being hospitalized for COVID. One of the best things you can do is to put together an at-home COVID kit and familiarize yourself with FLCCC’s early treatment protocol, so if you or anyone in your family gets sick you can treat right away. Early treatment is the best way of stopping the disease from progressing to the stage where hospitalization may be needed.

Oxygen at home

The FLCCC, through clinical observation and experience, feels that the incidence of the hypoxic pulmonary phase has plummeted. We do not recommend buying oxygen concentrators without a prescription as oxygen, although a gas, is also a medication and is prescribed individually for a patient by a healthcare provider. Each patient receives a dosage appropriate for the patient, their history, and their needs. A person without medical knowledge should not be administering oxygen to themselves or
others. Too much oxygen can cause harm and oxygen is best given humidified to protect the mucous membranes of the airway.

Oxygen concentrators are expensive, while portable units are more affordable and readily available on the internet, can be purchased by individuals. This equipment needed for oxygen concentrators also requires knowledge of how the equipment operates and how the equipment should be maintained—especially for long term use. The machine parts can become contaminated and harbor bacteria and viruses if not cleaned and disinfected properly. Appropriate cleaning agents should also be used to maintain the machines since some cleaners can be toxic to the airway.

Learn more about home oxygen [here](#).

If hospitalization seems likely, ask about the hospital’s COVID protocol, admissions, and discharge processes before you or your loved ones agree to be admitted. Is the COVID protocol based on remdesivir and the ventilator? If so, you may want to review the literature on those two treatments before you agree.

“Hospitals are not the same places you and I were born in a generation ago. Realize what you’re walking into,” attorney Andrew Schlafly, general counsel for the [Association of American Physicians & Surgeons](#), said during a recent FLCCC webinar.

Depending on the laws and policies governing hospital visitation where you live, you or your loved one could be isolated, shut-off or even sequestered on a COVID ward, disallowed visitors and maybe even made to believe you cannot leave. In this high-stress situation, most patients have no idea of their rights or even how to respond.

One of the most trying aspects of COVID treatment is that, while having to focus on a life-or-death health issue, critical decisions are often rushed, or made with little or no knowledge. Even with knowledge, it can be a losing battle to try to convince healthcare professionals to consider alternative treatment options, including [FLCCC protocols](#).

“You can ask for effective treatment of COVID after you or a loved one is checked into a hospital,” Schlafly said, “but you will not receive it there at the hospital, nor will you be informed that you can leave at any time.”
Remember:

You have the option to leave the hospital at any time.

[Diagram of a person leaving a hospital and going home]
When can I leave hospital?

This may be one of the most important things to realize.

“Everybody has a right to leave a hospital,” Schlafly advised. While the hospital may try to interfere – warning that your insurance won’t pay for your stay if you leave ‘against medical advice’ — that is simply not true. This article from the American Patient Rights Association has more information about making the choice to leave a hospital.

Calling hospitals “little islands of petty tyranny,” Schlafly said the best solution is to be as aware and as informed as possible. “There may be times you have to [go to the hospital] … I’m not saying that we all have to avoid hospitals. But know what you’re dealing with.”

More helpful tips

Jeff Childers, an attorney, founder of the Hospital-Help website, and author of Coffee & COVID, has some more practical advice in this blog post:

- If you have been admitted to hospital for a non-COVID related reason, consider discharging yourself the instant your primary issue has been stabilized.

- If you test positive for COVID while in hospital for surgery, make it clear in WRITTEN INSTRUCTIONS provided to the hospital IN ADVANCE of your surgery if you don’t want remdesivir or ventilation. These instructions need to be part of your medical record.

- If the option exists, consider whether your surgery would be better handled in a facility where they don’t also provide COVID treatment.

- If you or a loved one are in hospital with a COVID diagnosis and remain conscious, state in writing if you do not want remdesivir and give the written instructions to your doctors. Post a copy above the head of your hospital bed and next to the scanner. Do the same if you do not want to be placed on a ventilator.

Forms and paperwork

Some other suggestions come from Truth for Health Foundation, a physician-led non-profit organization.

- Prepare a COVID-specific Healthcare Power of Attorney (HCPOA) for each family member. Make it effective immediately when the patient is ill, not just if the patient is incapacitated. For example, decide whether to allow use of remdesivir or whether to allow intubation/ventilator. Check your state law ‘rights of family’ if there is no HCPOA.

- Demand access to patient medical records and the hospital's COVID treatment protocol. You, a family member or your HCPOA will need to sign a HIPAA form to access the patient portal for medical records. Make sure to obtain log-in information.
• **NOTE:** if the hospital refuses to provide electronic access or release records, review HIPAA, which defers to state law regarding rights to access medical records. Engage an attorney, if needed, to send a demand letter and seek court order to force access to medical records.

• Demand **access to the patient** for a family member or HCPOA. An attorney or law enforcement may be needed if the hospital resists.

---

**When being admitted to hospital, ask for forms to be printed out rather than signing an electronic signature pad.**

**On the printed forms, cross out anything you don’t agree to.**

---

Lastly, when being admitted to hospital, ask for forms to be printed out rather than signing an electronic signature pad. On the printed forms, cross out anything you or the patient do not agree to. There have been reports that some hospital admission forms give the hospital the right to ‘vaccinate’ you, and some release healthcare decisions and power of attorney over to the hospital.

Consider adding a note to each page stating: "I do not agree to any form of VACCINATION. I also do not agree to any injection that has nothing to do with treating my present ailment. My healthcare surrogate and I want to be notified of all treatments because we want informed consent PRIOR to ALL treatments, including time to discuss such treatments with my personal doctor."