

Leaked Docs Reveal NHS Medics Had Kill Order On 'Covid' Patients

Description

WORLD : Explosive leaked documents have emerged that show medical staff were ordered to euthanize patients who had been admitted to hospital and tested positive for COVID-19. The official documents were leaked from the UK's state-funded National Health Service (NHS).

The docs further confirm the previous reporting from Slay News that revealed patients were euthanized in order to boost the numbers for "Covid deaths."

As Slay News reported, smoking gun evidence revealed that tens of thousands of elderly people were murdered to boost the mortality rates. The data produced for the report indicated that people were being euthanized using a fatal injection of Midazolam.

"The Widespread And Persistent Use Of Midazolam In UK Suggests A Possible Policy Of Systemic Euthanasia."

The cause of their deaths was then listed as "Covid," indicating that the virus was killing far more elderly people than it was. The explosive data from the report was made public by Australian politician Craig Kelly, the national director of the United Australia Party.

The report obtained official UK government data on death rates and causes. According to Kelly, the patients were euthanized in order to boost "Covid deaths" and ramp up public fear to garner support for lockdowns and vaccines.

"These deaths were then falsely blamed on Covid, which was the basis of the public fear campaigns used to justify the lockdowns and mass-mandated injections of the public (including children) with an experimental medical intervention that had zero long-term safety data," Kelly said in a post on X alongside copies of the data.

"Along the way, a small group pushing the need for mass-mandated injections made billions.

"This paper shows that the UK spike in deaths, wrongly attributed to COVID-19 in April 2020, was not

due to SARS-CoV-2 virus, which was largely absent, but was due to the widespread use of Midazolam injections which were statistically very highly correlated (coefficient over 90 percent) with excess deaths in all regions of England during 2020.

Now further evidence has emerged to confirm that medical staff were ordered to inject patients with deadly Midazolam as part of this disturbing agenda.

Midazolam can cause serious or life-threatening breathing problems. The issues include shallow, slowed, or temporarily stopped breathing. This can lead to permanent brain injury or death.

In the UK, regulators state that you should only receive Midazolam in a hospital or doctor's office that has the equipment that is needed to monitor your heart and lungs and to provide life-saving medical treatment quickly if your breathing slows or stops.

However, the drug is criminally used in palliative care in the United Kingdom.

Midazolam does not appear on the World Health Organization's (WHO) list of essential palliative care medicines and it should also be used with extreme caution in elderly patients.

Nevertheless, health officials ordered billions of dollars worth of Midazolam in March 2020 in response to the outbreak of the pandemic.

At the time, the elderly and vulnerable were denied treatment by the NHS.

Instead, they were put on end-of-life care which involved withdrawing their medication, depriving them of food and water, and pumping them full of Midazolam and morphine until they died of starvation and dehydration. Their deaths were then recorded as being caused by "Covid."

Evidence suggests that Midazolam was used to prematurely end the lives of tens of thousands of people in the UK. However, the public was told that these people died of Covid.

This can be clearly seen from the data on out-of-hospital prescribing for Midazolam coinciding with the waves of all-cause deaths and COVID-19 deaths in the UK.

The Amnesty and CQC reports also found the blanket use of "Do Not Resuscitate" orders being used in care homes without informing the victims or their families.

Serious illness in Covid presents pneumonia and accompanying respiratory insufficiency. Therefore, typical symptoms include breathlessness, cough, weakness, and fever.

We're also told that people who suffer deteriorating respiratory failure and who do not receive intensive care, develop acute respiratory distress syndrome with severe breathlessness.

Despite this, NHS staff were told in "clinical guidance for symptom control for patients with Covid-19" that excessive doses of morphine and Midazolam should be given to ease the symptoms of Covid-19.

The drug label information for Midazolam in the US National Library of Medicine clearly states: "Midazolam hydrochloride must never be used without individualization of dosage.

"The initial intravenous dose for sedation in adult patients may be as little as 1 mg, but should not exceed 2.5 mg in a normal healthy adult.

"Lower doses are necessary for older (over 60 years) or debilitated patients"

Nonetheless, NHS staff were told to up the dosage of Midazolam in all Covid patients if they were suffering "persistent anxiety or agitation."

At no point were they instructed to individualize doses based on the age or frailty of the patient.

The warning label states that due to the "danger of hypoventilation, airway obstruction, or apnoea is greater in elderly patients and those with chronic disease states or decreased pulmonary reserve, and because the peak effect may take longer in these patients, increments should be smaller and the rate of injection slower."

Perhaps NHS staff also knew this, but they were told within the clinical guidance provided to them that their concerns were "inappropriate."

Leaked confidential NHS documents clearly show that the elderly and vulnerable were to be denied treatment and put on the end-of-life pathway in response to a pandemic.

by Frank Bergman

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