



Mother of COVID Hospital Protocol Victim: 'He Drove There and Left in a Body Bag'

Description

WORLD : In December 2020, life was going well for 40-year-old William Donald Judah. He was vice president of a family-owned janitorial company in Prattville, Alabama, the father of a 5-year-old son, stepfather to two other children and a softball coach.

"All the girls loved him," his mother, Donna Sue Harvell, told The Defender. "He was affectionately called 'Coach Will.'"

Harvell said she was supposed to see William right after Christmas 2020, but the plans were canceled when he tested positive for COVID-19 and began experiencing symptoms such as a loss of smell and taste.

"I would've dropped everything and run up there, but he said, 'No, there's nothing you can do,'" Harvell recalled.

In the coming days, William's symptoms worsened. On Jan. 2, 2021, he called his mother and told her he had to drive himself to Prattville Baptist Hospital. "They're going to go ahead and keep me," he said.

"He was going to the hospital to get some antibiotics, and they isolated him," Harvell said. By Jan. 8, 2021, he was dead — a victim, his mother said, of COVID-19 hospital protocols, which included the administration of remdesivir over five days.

"We miss him every day," said Harvell, who shared medical documentation with The Defender confirming her son's story and the medical treatment he received.'

Harvell said her son was initially “upbeat and cheerful” after being admitted to Prattville Baptist, explaining that a nurse was “coming in now to give me an IV,” Harvell recalled.

But when she told him that in her region of Florida, monoclonal antibodies were being administered to COVID-19 patients, he told her that nurses at his hospital told him they were administering “what they gave President Trump” — referring to remdesivir.

The hospital isolated William and prohibited his family from visiting, Harvell said. But in communications with [his mother](#), William said he was experiencing difficulties.

“I had spoken to him and they were also giving him Toradol for pain,” Harvell said. “He was in a lot of pain, and they said that he kept pulling the mask off, so they had the oxygen on too hard.”

According to Harvell, a nurse told William the oxygen was “on too hard” because he was trying to pull the mask off of his face. “She was basically blaming him,” Harvell said.

Still, William’s outlook initially looked good, based on tests conducted at the hospital.

“I received a text from his wife saying his blood tests were good,” Harvell recalled. “They had unhooked the IV, they had taken him off fluids — he didn’t need them anymore. His blood count looked good.”

Harvell said William was told “he should be doing well in a couple of days.” That was 36 hours before he died.

“By Jan. 6, he indicated that he wasn’t getting any better and he might need to be moved,” Harvell said, referring to a text message William sent his family that day.

By this point, William was diagnosed with pneumonia. But Harvell learned her son was not receiving appropriate treatment for it at the hospital. Instead, they were still giving him remdesivir.

“I asked, ‘Are they giving you an antibiotic?’ He said no, and he said, ‘They’re watching me for blood clots.’ Now, why would they [watch him for blood](#) clots with a respiratory infection?

I said, ‘Are they giving you a blood thinner? Are they giving you Plavix or aspirin?’ He said no [and that] they said, ‘There’s something might be wrong with my liver.’”

“This is a side effect of remdesivir,” Harvell said.

According to Harvell, “The next day, [the hospital] drugged him, they put him on a ventilator, and he passed.” But when she tried to find out more information from the hospital, staff initially only told her they had taken him off fluids.

She said he coded twice and they were able to bring him back. But the third time they were “busy” with other patients and just could not bring him back. “They were just too busy,” Harvell said.

“He drove there and left in a body bag, and my first words were, ‘What happened?’ That hospital failed him. We were expecting him to come home. They had just taken the IV out,” Harvell said.

It took three weeks for the hospital to release William’s death certificate, Harvell said, and the release required the assistance of the funeral home. When finally released, the death certificate listed William’s causes of death as COVID-19, pneumonia and renal failure.

“I did not know about the renal failure until I received the death certificate,” Harvell said. Other family members, including William’s wife, also were kept in the dark, according to Harvell.

Harvell said the hospital did not receive informed consent from William or his family before administering remdesivir. Instead, Harvell alleges hospital staff did not tell William he was suffering from renal failure.

She said:

“He had pneumonia. He should have been given an antibiotic for pneumonia. If they were watching him for blood clots, why wasn’t he on a blood thinner? ...

And he not once mentioned [renal failure], so I don’t even think he knew that he was in renal failure because he would’ve told me. He would’ve told his wife. He would’ve told somebody. He would’ve told his dad.”

According to Harvell, hospital staff did not offer William alternative COVID-19 treatments, such as ivermectin.

She noted that William was unvaccinated, but that likely didn’t play a role in the treatment he received at the hospital, because in early January 2021, COVID-19 vaccines were not yet being administered to his age group.

“I’ve had COVID twice. My husband is 77. He’s had COVID twice. If anything, we would be the ones to pass away. But we didn’t go to the hospital. We didn’t take remdesivir. I took ivermectin and we’re fine,” Harvell said.

“If William would’ve stayed out of the hospital, he most likely would’ve lived,” she added.

“The worst thing that could ever happen to anybody is losing a child,” Harvell said. “I feel bad because [his son] Liam has to grow up without a dad, and William was the best dad ... He was a family man. He loved his family.”

Harvell said that the pain of losing William drove her into action. She joined online COVID-19 support groups and became an activist for other victims of COVID-19 hospital protocols and vaccines.

“With the COVID grief groups, we were communicating, and it was like they knew what I was talking about. They didn’t argue with me and say, ‘Oh, it’s just part of it.’ They would say, ‘That happened to my husband too, or my daughter too, or my son too,’” she said.

“That’s how we came up with those 25 commonalities,” Harvell added, referring to a list of 25 COVID Protocol Commonalities in the treatment received by unvaccinated COVID-19 patients in hospitals.

The list was developed by the FormerFeds Group Freedom Foundation, a group advocating on behalf of COVID-19 hospital protocol victims and their families.

“The 25 commonalities are just an eye opener and have encouraged me to go out and educate other people,” Harvell said. “I have people that come in my business and almost daily, I tell them about ivermectin, I tell them about remdesivir.”

Harvell said many people she’s spoken with, at her business or in online support groups, have shared similar stories involving their family members.

“I cannot tell you how many local mothers who have lost sons have contacted me, or even when their son was in the hospital, they would contact me and say, ‘What was that drug that they gave your son?’” Harvell said.

Through her involvement with FormerFeds, Harvell is helping to raise money, through a cookbook, “Home-Cooked Memories: From Our Hearts to your Table,” containing recipes submitted by family members of COVID-19 hospital protocol victims and a stainless steel Medic-Alert bracelet that allows people to disclose they are allergic to remdesivir, fentanyl and other drugs.

FormerFeds is also involved in a class-action lawsuit against remdesivir distributor Gilead.

Harvell had some words of advice for others who may be enduring experiences similar to hers regarding the loss or injury of a family member due to the COVID-19 hospital protocols or vaccines.

“Reach out to other people,” she said. “There are groups out there, there are people out there that understand, that are supportive, that will pray for you, that will listen to you, that will not judge you,” she said.

“Being active and telling people what happened is a healing process too,” Harvell added. “It will help you heal. Your story might be somebody else’s healing path.”

By Michael Nevradakis, Ph.D.

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