

Issued a prescription by our Doctor many of us do not consider or know whether this drug will be compatible with our own bodies chemistry or whether it might cause an allergic reaction. It is important to research the drug as to its possible reactions. Always as an awareness we should know and realize that the third Leading Cause of Death in the U.S. is when hospitals and doctors fail in their duty to protect their patients, the results can be disastrous. According to recent research by the John Hopkins School of Medicine, **medical malpractice** is the third leading cause of death in the United States, right behind heart disease and cancer. But it is our responsibility to know our own bodies and our own responsibility to play a devil's advocate with our healthcare provider as we are ultimately the one responsible for our healthcare and our doctor plays an equal role with us in advising and discussing all procedures and medicines with us.

I was set up for an outpatient procedure in a hospital surgery center but had to cancel the procedure due to an allergic reaction to the premedication provided for the exploratory procedure three days earlier. I was in the hospital emergency room for seven hours, where to my count nine different tests were conducted. In those tests I was given prednisone and Benadryl IV treatments followed by oral medicines for the next five days. After taking two doses of six total prescribed of sulfamethoxazole, a sulfa drug, I had sores in my mouth and could not clearly see with my prescription vision to read and write unless I increased print to 18 fonts. My body turned pink nearly all over with itching and red burn marks on my legs and chest. My mouth and tongue swelled up to where it was painful to swallow. Likewise, my eyes swelled up and shut to where it was painful to open to see. Nothing helped in recovery except "time" which took twelve days for all symptoms to pass. Although I had never taken a sulfa drug in the past, I realized that it was a sulfa drug that caused my wife great harm during the transfer of the donor stem cells to her on May 26, 2009. The stem cells were packed in a frozen sulfa solution for transfer from Munich, Germany to MD Anderson in Houston, Texas. Washing of the stem cells before an IV transfer to Linda had not removed all of the sulfa and near the end of the transfer one-third of her lungs collapsed as she could not breath, and with a room full of medical personnel, she was brought back from suffocation by administering Benadryl and oxygen. There were consequences as she dealt with coughing the rest of her ten years of life and died with a fatal lung disease called COP, Cryptogenic Organizing Pneumonia. So, the point of allergic reactions from prescribed drugs is that they can have lasting consequences.

The sad part of this story is Linda and her fight for so many years and plainly in some medical websites on the internet I recently found that elderly, 65 years and older, may be more susceptible to the side effects of sulfamethoxazole – rarely, severe, sometimes fatal reactions have been reported with the use of this drug. Side effects of sulfamethoxazole (Bactrim a common similar drug) may include skin rash, itching, headache, dizziness, diarrhea, tiredness, nausea, pale skin, joint pain, and sensitivity to light. Lessons are unfortunately learned the hard way. The reaction of the doctor administering the drug to me was that you should not believe everything you read on the internet. I hope this can help others in understanding the potential danger of being prescribed drugs that need to be viewed carefully for potential side effects.

The continuing saga of my preparation for outpatient surgery in the local hospital is another story of ridiculousness and violation of individual rights given to us by the Constitution and Bill of Rights. I had been scheduled for a pre-op examination the day after my emergency room visit for the allergic reaction to the sulfa given for the pre-op surgery procedure. When told I would have to submit to a PCR NP test I objected as this is a test that makes a deep penetration into the nasal passages. I had advised the hospital that I would only consent to having a PCR OP oral test in my mouth that is also approved by the CDC. The

hospital ignored my petition, but in this go-round, it did not matter as the surgery was canceled due to the on-going reaction of the sulfa drug. After the allergic reaction was behind me, I again met with the doctor to reschedule the pre-op exam and outpatient surgery. But this time I delivered to my doctor for surgery, the hospital surgery center, and my family doctor notarized petitions that I would only submit to a PCR OP test which was approved by the CDC. The other petition was requesting a waiver of any COVID intended procedures based on religious rights. The doctor agreed but the hospital said they would only agree to a special nasal PCR test that had to be ordered with a delay of about a week. I cancelled all surgery intentions in a letter to my doctor, the hospital, and family doctor on the basis of violation of my rights. At this point I am disgusted that my rights can be violated by Healthcare and our National Government. Following is a notice documented at least by the secondary news services that the CDC is withdrawing the requirement for PCR tests by year end. They have finally noticed what real doctors have been saying that PCR tests cause a false indication of COVID19, which is what the inventor said way back in 2019, that the PCR tests error on the positive side that COVID is present. Now you have to wonder that millions of people were quarantined or treated for COVID19 that never had the virus!

CDC withdraws fraudulent PCR testing protocol that was used to falsify covid “positives” to push the plandemic

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(Natural News) After more than a year of committing scientific fraud to push false “positives” via PCR testing, the CDC has announced it is withdrawing the RT-PCR Diagnostic Panel on December 31st of this year:

After December 31, 2021, CDC will withdraw the request to the U.S. Food and Drug Administration (FDA) for Emergency Use Authorization (EUA) of the CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel, the assay first introduced in February 2020 for detection of SARS-CoV-2 only. CDC is providing this advance notice for clinical laboratories to have adequate time to select and implement one of the many FDA-authorized alternatives.

The use of PCR tests for covid illness diagnosis is a global scientific fraud, since **no PCR instrument can produce quantitative results that might indicate a specific viral load**. Yet this CDC-approved testing protocol was relied on to fabricate the “casedemic” illusion which pretended that hundreds of millions of people around the world were infected with COVID. The entire thing was an elaborate quack science hoax, and anyone familiar with PCR technology (see below) has known this from the very start.

The PCR testing approved by the CDC to diagnose COVID was fraudulent from the very first day:

PCR instruments are not quantitative instruments. They cannot tell you *how much* of something is present in a given sample. Every lab scientist familiar with PCR instruments knows this. Yet they continue to go along with the global fraud of diagnosing “positive” cases via PCR testing. **The entire COVID “plandemic” has been based on fraudulent PCR testing**, and now the CDC is announcing it is pulling the most frequently used test, perhaps in an effort to replace the test with yet another fraudulent protocol that can be

controlled by health authorities to worsen the “pandemic” on demand (or, perhaps, claim COVID has been eliminated and declare victory). From the very start, the entire pandemic has been nothing but a globally coordinated PCR testing fraud. As Thermo-Fischer sales representatives told me in face-to-face meetings, PCR instruments cannot determine quantitative results. They do not use quantitative instrument calibration curves or quantitative external covid standards. This means PCR instruments have no legitimate role in diagnosing any person with illness or COVID infections. The mere presence of a single viral fragment, multiplied trillions of times through PCR cycling, does not indicate anything of scientific or diagnostic value.

A Portuguese appeals court has ruled that PCR tests are unreliable and that it is unlawful to quarantine people based solely on a PCR test. The court stated, the test’s reliability depends on the number of cycles used and the viral load present. Citing Jaafar et al. 2020, the court concludes that: “if someone is tested by PCR as positive when a threshold of 35 cycles or higher is used (as is the rule in most laboratories in Europe and the US), the probability that said person is infected is less than 3%, and the probability that said result is a false positive is 97%.” Similarly, the Austrian court has ruled that PCR tests are not suitable for COVID-19 diagnosis and that lockdowns has no legal or scientific basis. The court pointed out that “a PCR test is not suitable for diagnosis and therefore does not in itself say anything about the disease or infection of a person”.

PCR analysts and lab science technicians are complicit in the global COVID testing fraud

The entire covid pandemic is a farce, and it was all based on fraudulent PCR testing. Amazingly, **even the PCR technicians and analysts all know this**. They are taking part in a global scheme to destroy human lives and crush global economies, and they are fully aware that the limitations of their own instruments mean diagnoses of “positive” COVID status based on PCR are meaningless.

I run multiple mass spec instruments in my private lab, including QQQ and ICP-MS instruments. I am the co-developer of two quantitative methods that were painstakingly developed for quantitating glyphosate molecules in food, and for cannabinoid concentrations in hemp extracts. I am intimately familiar with instrument calibration, external standards, curve fit equations and quantitative analysis. **PCR instruments are not capable of any of this**. They are useless for diagnosing infectious disease, as they cannot produce viral load concentration results from a given sample. If you want to know how much of something is present in a given sample, you have to use far more complex instruments such as mass spec triple quad instruments (which is what I use to test foods for glyphosate contamination, among other things). **As Zero Hedge reports**, even Dr. Fauci admits PCR testing is essentially a fraud when it comes to diagnosing covid illness:

Dr. Fauci, mid-November 2020: “What is now sort of evolving into a bit of a standard... if you get a cycle threshold of 35 or more ... the chances of it being replication-confident are minuscule... It’s very frustrating for the patients as well as for the physicians, somebody comes in, and they repeat their PCR, and it’s like [a] 37 cycle threshold, but you almost never can culture virus from a 37-threshold cycle. ...So, I think if somebody does come in with 37, 38, even 36, you got to say, you know, it’s just dead nucleotides, period.” Just as doctors, nurses and pharmacists are taking part in the global criminal covid con, PCR lab technicians and owners are gleefully participating in the same fraud, likely because they are earning huge profits from

running fraudulent PCR tests that would never pass the scrutiny of any legitimate scientific test for accuracy or precision. In fact, **PCR tests are neither accurate nor precise**. The concept of “precision” — which is of utmost importance in quantitative lab analysis involving pesticides, heavy metals, and so on — does not exist in PCR equipment. There is no such thing as precision when you’re multiplying genetic material in the sample itself. This process, by definition, destroys any meaningful knowledge of the mass or concentration in the original sample. If the same approach were used in breathalyzer tests for possible drunk drivers, every living person would be arrested for a DUI, since there is at least one molecule of alcohol circulating in the blood of everyone.

The CDC is withdrawing this PCR method most likely because they know the test cannot withstand reasonable scientific scrutiny. They’re trying to cover their tracks and memory hole the fraudulent test that was used to drive the fake covid plandemic in the first place. But we already know the CDC is a criminal front for the vaccine industry, and that the CDC has no scientific credibility or authority whatsoever when it comes to legitimate infectious disease testing. The CDC, just like the PCR test, is a complete fraud.

The Rights of Citizens of the United States have been severely abused.