

# Patient Advocacy

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## **Patient advocacy: Knowing your rights and protecting your loved ones**

For many of us who advocate for natural healthcare involving a healthy lifestyle and abstinence from unnecessary drugs and medical interventions, emergency situations do arise in which we are forced into confrontations with mainstream medicine. Confrontations between naturopathically-oriented patients and mainstream medicine may arise during hospital births, unexpected trips to the hospital to set broken limbs, or even crisis care for acute and chronic illnesses that were not properly handled using naturopathic principles.

A recent experience with an elderly family member showed me just how vulnerable patients can be once they find themselves in a medical facility completely dependent upon the nursing staff to care for them. It is not only a humbling experience but can also be extremely disempowering, putting the patient into a child-like state of mind. After all, the patient may be wearing diapers after surgery and dependent upon staff for food, water and bathing needs.

## **Patient rights**

What rights do patients have when hospital or medical facility staff are determined to make sure the patient takes dangerous, doctor-prescribed drugs and synthetic vitamins even if the patient is opposed to taking such harmful pharmaceutical products?

According to federal and state law, patients have the right to "refuse treatment within the confines of the law and to be

informed of the consequences of his or her action.”

In other words, if the patient is of sound mind, he has the right to refuse any treatment he deems may be harmful to his well-being. Although the medical staffers will do their best to “inform the patient of the consequences of refusing treatment” such as drugs and other dangerous pharmaceuticals, the patient still has the right to refuse such treatment.

But what happens when the patient does not have an advocate to support his decision to refrain from “drug therapy?” The patient then feels alone, without a “voice” and is easily badgered into complying with those who who claim to be “informing the patient of the consequences of his actions.”

## **Advocacy**

A key solution is in preparation. Early in life most begin realizing that death (of our physical body), at some point, is certain. It is frightening for most, but a fact we do learn to accept. In preparing for this inevitability, there are approaches we can take to communicate our wishes to friends and family. All too often the thought of losing a loved one is terrifying and therefore not spoken of. This has been—and continues to be—the course of action (which is “non-action”) that most people take until the need arises.

But what happens when a family member or friend is in a life or death situation and does not want to die?

Families have an opportunity and a responsibility to learn what options are available. In some cases, a life-threatening event takes place and family-members-turned-patients are rendered incapable of voicing their own concerns and methods of treatment.

An example of this was when a friend of mine had a stroke. He

had no family members to care for him or to oversee his treatment. Fortunately, he did have a good friend that had cared for him for many years. When he had his stroke he was taken to a local Veterans Hospital, admitted and was given the prognosis that the damage done was not reversible and he was to be taken off life support. At the time, he was not on any sort of mechanical or assisting devices to keep him alive. This man was deaf from his years in WWII and wore glasses to see. In the hospital, these deficiencies were not taken into consideration. At the attending physician's request the staff removed all food and water from him as they considered these essential elements to be "life support."

He remained in an inhumane and tortuous condition without water for 11 days and without food for 21 days. He was at their mercy and, because of the stroke, he was partially paralyzed and could not speak. The friend and caregiver continued to notify hospital staff that she, in fact, could communicate with him and that he did not want to die.

Through her love, determination for his rights and desperation, she was able to physically lift him from his hospital bed, put him in a wheel chair and actually wheeled him into a hospital administration meeting that just happened to be in progress. At this time, she bent over her dear friend and screamed in his best ear "ED...you have to say my name. Say my name, Ed, or they are going to KILL YOU."

With this said, Ed mustered up enough energy to speak her name. "Pat" is all he said and this was enough. Then hospital staff immediately began preparation to insert a feeding tube into his stomach. Ed recovered over the next couple of weeks to the point he was released back into his friend and lifesaver's care.

**Power of attorney**

It is imperative that, while we can, we give medical power of attorney to someone we trust; one who can be that voice for us in those times when we may not be able to communicate our wishes. It does happen, and we must face those inevitable times when we cannot help ourselves.

In Ed's case, he had thought ahead and had done what he thought would prevent needless pain and suffering. In fact he DID have a Durable Power of Attorney in place and Pat was that legal power of attorney. However, the document did not specifically state "medical" power of attorney and this little omission nearly cost him his life.

Medical personnel, most of whom have the best of intentions, are trained to follow the doctor's orders and parrot the pharmaceutical party line that assumes our bodies have drug deficiencies rather than nutritional deficiencies.

Most of us have known someone who is suffering from an illness deemed "incurable" by the medical mainstream. These ailments are most often treated with drug therapy to mask symptoms rather than address the real cause: Nutritional deficiencies coupled with an accumulation of toxins. However, when there is a crisis, the prognosis of "incurable" by the medical mainstream is the "last word" for millions even though, from a naturopathic standpoint, there are no incurable diseases.

That is why it is so important to make sure a trusted family member or friend is given medical power of attorney.

### **Three healthcare options**

Though there are many health care modalities available to us, they can be generalized into three categories: 1. The medical mainstream, driven and educated by the petrochemical and pharmaceutical companies; 2. Alternative forms of health care, offering a variety of solutions without major side effects and

risks and; 3. The scientific health community, teaching us how our bodies actually work and how to replenish depleted stores of natural vitamins and minerals needed by the cells for regeneration, rebuilding and the removal of toxins.

Many doctors and scientists are now stating that the scientific health community holds the solution to the ongoing health care crisis now affecting nearly every household in this nation.

Of course, the solution is in prevention. However, prevention is a bit late in coming for millions of Americans who are experiencing medical crises. This is one reason we encourage people to learn how their bodies work and do preventive maintenance such as colon cleansing and liver flushes. Getting a few of the resources listed on our [Resource page](#) [hotlink to our page]– books and newsletters – is very helpful in furthering your knowledge base. Knowing this basic information and applying it to your lifestyle can save you a lot of money and spare you, your friends and family members much needless pain and suffering.

## **Plan ahead**

But even with the best of planning and prevention, having a mouthful of mercury amalgams deteriorating in your mouth when you are in your 80s can affect calcium and mineral assimilation while contributing to many other chronic health problems—and leading to a hospital stay.

Being bombarded with intense microwave radiation by living next to a cell tower continually keeps the body stressed and over-acidic—potentially triggering a health crisis—and a trip to the hospital.

One can unexpectedly fall or be in a traffic accident, be rendered unconscious with internal injuries—and awaken to find

oneself hospitalized.

These are just three examples of issues we face today that can put us into the situation where we may need help from a friend or family member during a health crisis.

Unfortunately, many of us have loved ones who end up in the hospital emergency room for one reason or another. When you find out that a relative or close friend is in this situation, it is important to make this person's predicament a top priority in your life. This is quite literally an emergency that involves life and death since you cannot trust the competence of medical professionals or their intent to have the patient's best interests in mind.

Whether a patient has good health insurance or not doesn't matter. The game seems to be keeping the bill as high as possible, piling on service, equipment and drug charges, even if they are delaying or jeopardizing the body's own natural healing processes.

Without an advocate protecting the patient's interests, the doctor in charge can order unnecessary, invasive, and frequently dangerous procedures (such as a spinal tap) and administer pharmaceutical drugs that can wreak havoc in an already stressed-out body.

### **Choosing an advocate**

Who will speak for your parents? Who will speak for your spouse? Who will speak for your children?

Who will be the family back-up person and speak for you?

We suggest that each family have a point person who is willing to research, learn and take action in a time of crisis. Being able to research medical procedures, learning how prescribed drugs work, their contraindications and adverse side effects—

while learning ahead of time as much about naturopathy and orthomolecular nutrition as possible—must be a prerequisite for a successful patient advocate. Having an advocate to speak for us when the moment arises and we are not capable could save lives and prevents needless pain and suffering.

Although people are more stressed out today with time constraints than ever before, when an emergency does arise, having preparations in place makes the emergency much easier to address.

### **What to do as an advocate**

Get to the facility as soon as possible. Be prepared to intervene with questions regarding a particular procedure or drug being administered. Look your friend/relative in the eyes if conscious and ask if they need your support while they are there. If they say “yes,” you are vitally necessary as their advocate.

Naturally, it is important to assess the seriousness of the situation and the condition of the patient’s overall health. A serious car accident that requires trauma care is quite different than a woman in labor or a friend who may have broken his leg. In general, it is important to find out who the supervising doctor is and introduce yourself to him/her. Be respectful and ask pertinent questions. Although every situation is different, it is paramount to be prayerful in an intimidating and fear-driven hospital atmosphere.

In the case of a hospital birth, it is important to have two advocates so that the baby and mother are always in the presence of a family member. Having a birth plan in writing goes a long way in alerting the hospital board, doctors and nursing staff of your educated choices regarding refusal of standard invasive newborn screening procedures (examples of birth plan letters are posted at [VaccineTruth.net](http://VaccineTruth.net)).

After the birth, be willing to intervene anytime a nurse attempts to separate the baby from the mother prematurely. A healthy vaginally-birthed baby should be placed on the mother's tummy right after birth for at least an hour. There should be no need to cut the birth cord for a full 30 minutes after birth or until the cord is completely gray.

We have found that advocating for the patient in writing creates a legal document that can be used in court, making the doctors and nursing staff much more compliant to the patient and advocate's wishes. Below is the one I recently used for our family, making nine copies so that the patient was able to hand one to each staff member who kept insisting he take Coumadin, a known rat poison that works to thin blood by interfering with vitamin K metabolism.

To All Nursing Staff –

Due to my sensitivity to all pharmaceutical drugs and synthetic vitamins, I, \_\_\_\_\_, will not be taking the drugs and vitamins offered to me here. This is my fundamental right: To choose my own method of treatment. Furthermore, I would appreciate no longer being offered or billed for these drugs/vitamins so that the meager resources I have can be spent on supplements and foods more akin to my biochemical uniqueness so my healing here can be maximized. Please do not badger me over my decision. Instead, feel free to consult with the following people who will be assisting me while I am at this facility.

[Advocate(s) name and advocate contact info]

The more people who support your "drug-free" stance that can be listed along with their phone numbers, the better. In today's medical facilities, your chances of success increase by the number of people you have willing to help and support your medical decisions.