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HOSPITALS ENDORSE NATIONAL MANDATE TO EXTERMINATE SPECIAL NEEDS PEOPLE

Patients worth more dead than alive

APPLETON, WISCONSIN, March 7, 2022 — When Grace Schara, a 19-year-old Down Syndrome girl, died in St. Elizabeth's (Ascension) Hospital in Appleton, Wisc., the hospital received a \$13,000 death bonus, far less than the national average of a \$100,000 bonus received for patients who have been ventilated and died.

Had the Schara family allowed Grace to be ventilated, St. Elizabeth's would have received a \$39,000 bonus, in addition to a purported \$13,000 Covid-19 diagnosis bonus, plus the \$13,000 death bonus. Scott Schara, Grace's father, believes their refusal to allow a ventilator precipitated the hospital's use of a cocktail of contraindicated drugs to kill his daughter because she was worth more dead than alive, and because medical staff treated her like a "useless eater," similar to how Nazi Germany treated disabled people – showing little to no respect, nor compassion. Their ultimate disregard for Grace's life came when Dr. Gavin Shokar, M.D., wrote his own "Do Not Resuscitate (DNR) order" for her without family knowledge or approval. More than 100 doctors and medical professionals have called her death murder.

Scott estimates the Ascension health system, comprised of 142 Catholic hospitals nationwide, received \$8.3 billion from the Federal government for Covid-19 patients in 2021 alone. Patients who walk out of the hospital are far less lucrative to a hospital, especially if they refuse a ventilator. Those who acquiesce to ventilator demands have an 84.9 percent chance of death, if ventilated for 96 hours or more.

Grace, who was admitted to St. Elizabeth's for a respiratory issue due to Covid-19, was not in distress prior to the first of three drugs, Precedex, being administered. Her decline began thereafter, with medical staff proceeding to give her Lorazepam and finally, a Morphine push. Seventy-five minutes later, Grace was dead; and the hospital was set to receive its death bonus.

One doctor, who reviewed the complete records provided by the hospital, wrote to the Schara family: "Precedex is a medicine used for anesthesia to put people to sleep for surgery and procedures. Depending on the dose, it can induce a coma-level sleep. Each of these meds (Precedex, Lorazepam, and Morphine), on their own, have an increased risk of serious or life-threatening breathing problems and cardiac arrest, and there's an additive effect when used in combination. To use them like they did in a person with a diagnosis of *acute respiratory distress* is beyond believable as to intention."

Scott Schara wonders if the fact the hospital was making only \$1680 per day on Grace's care led them to free up a bed through her death, for perhaps a better paying patient in order to receive greater financial benefits.

"Is the medical profession submitting to the U.S. 'rationed care' program with its death bonuses, immunity from liability and shroud of secrecy resulting from the lack of patient advocacy?" he asked. "When euthanasia by medical dictate is the norm, our loved ones in hospitals are in trouble."

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