

# Do MD's Need FDA Approval to Prescribe COVID-19 Treatments Like Hydroxychloroquine?



By: Devvy

Before I delve into that legal question, I feel it's imperative to get this newly released information out there having to do with the death of George Floyd. This latest round of rioting started over Floyd's death and by design, moved on to the agenda of domestic terrorists like BLM and ANTIFA as well as the insanity, Defund the Police.

We all know what happened that day – or think we do. Floyd was put on the ground. Officer Chauvin kned his neck. Floyd was yelling he can't breathe many times. At the time MPD allowed the use of neck restraint for individuals resisting arrest. Only cops can tell you what a nightmare and how dangerous it is trying to deal with either a drunk or someone full of drugs. Floyd was 6'7".

George Floyd was a repeat criminal offender, an ex-con who went to prison for holding a loaded gun up against the stomach of a pregnant woman with the intent to rob. He was also a serious, hard core drug addict. That is **not** an excuse to kill any individual being questioned by police officers. Everyone in this country is entitled to due process.

A few days ago, the transcript of Officer Thomas Lane's body camera was finally released. It tells the story in real time of exactly what actually happened before Floyd was kned on

the ground.

George Floyd was resisting arrest, make no mistake about that. Even Floyd's friend in the car they came to the store in yelled at George to stop resisting. The officers repeatedly tried to get him into the police car while Floyd had a running narrative about how he's not that kind of man, he loves his mother over and over. He keeps telling the officers not to shoot him and their response was they were not going to shoot him. All they wanted was his cooperation.

George did not want to get in the police car and made that perfectly clear. Early on, Officer Kueng said Floyd was acting erratic. This is consistent with what store employees where the alleged counterfeit bill was presented by Floyd recounted for the police.

This is the exchange on pg 7:

Officer Kueng: Stand up, stop falling down! Stand up! Stay on your feet and face the car door!

George Floyd: I'm claustrophobic man, please man, please.

Pg 9: Officer Lane tells Floyd he will open the window in the police car after Floyd gets in, no problem. On pg 10, Floyd tells the officer he's just gotten over COVID-19 and "doesn't want to go there again".

Pg 11:

George Floyd: Can I talk to you please?

Kueng: if you get in this car, we can talk!

George Floyd: I'm claustrophobic.

Kueng: I'm hearing you, but you're not working with me!

George Floyd: God, I'm claustrophobic.

Lane: Plant your butt over here, I'm going to pull you in.

Kueng: Get in the car!

George Floyd: Can I get in the front, please?

Kueng: No, you're not getting in the front.

Pg 12:

George Floyd: My wrist, my wrist man. Okay, okay. I want to lay on the ground. I want to lay on the ground. I want to lay on the ground!

Lane: your getting in the squad.

George Floyd: want to lay on the ground! I'm going down, I'm-going down, I'm going down.

Kueng: Take a squat.

George Floyd: I'm going down.

Speaker 9: Bro, you about to have a heart attack and shit man, get in the car!

It would appear at this point Floyd was possibly experiencing a cardiopulmonary arrest or just hallucinating. The autopsy report shows he was loaded on fentanyl, norfentanyl, meth and cocaine; his urine drug screen showed high levels of cannabinoids. He was also having trouble breathing at that time.

"Fentanyl is a synthetic opioid that is **50 times** more potent than heroin and **100 times** more potent than morphine."

Pg 14:

Lane:320 Can we get EMS code 2, for one bleeding from the mouth.

It appears at that point officers saw Floyd bleeding from the

mouth and called paramedics.

Continuing on pg 14:

George Floyd: My face is gone. I can't breathe man. Please! Please, let me stand. Please, man can't breathe.

Lane: Can you get up on the sidewalk please, one side or the other please?

George Floyd: My face is getting it bad.

Lane: Here, should we get his legs up, or is this good?

As I read it, this is pre-Officer Chauvin putting his knee on Floyd's neck. It's obvious from Floyd's own words about his face being gone and other dialogue he was certainly experiencing some sort of psychological episode, no doubt from the horrific amount of drugs in his system.

Pg 15:

(Officer) Thao: he high on something?

Lane: I'm assuming so.

Kueng: I believe so, we found a pipe.

Continuing on Pg 15:

George Floyd: Please, I can't breathe. Please, man. Please man.

Thao: Do you have EMS coming code 3?

Lane: Ah code 2, we can probably step it up then. You got it?

Pg 16:

Lane: We found a weed pipe on him, there might be something else, there might be like PCP or something. Is that the shaking of the eyes right is PCP?

George Floyd: My knee, my neck.

It sounds like now he's on the ground with Chauvin's knee on his neck; the transcript time can be coordinated with videos.

Lane: Where their eyes like shake back and forth really fast?

Lane: Okay. I just worry about the excited delirium or whatever.

Chauvin: Well that's why we got the ambulance coming.

[You can read the full 25 pgs here](#). To sharpen the text, move the zoom bar. For plain text, hit that box.

George Floyd should have had his day in court. He didn't. His body was so overloaded with heavy duty drugs combined with his medical history was a tragedy waiting to happen: Arteriosclerotic heart disease, multifocal, severe. Hypertensive heart disease, clinical history hypertension. If he was having a heart attack from his own actions, did that contribute to his death?

Remember Floyd's friend yelling at him to get in the squad car or he might have a heart attack? The coroner's report said cause of death was cardiopulmonary arrest complicated by actions of the police officers. The jury will see all the videos and will read the transcripts.

### **Do MD's Need FDA Approval to Prescribe COVID-19 Treatments Like Hydroxychloroquine ?**

There are so many videos and articles out there featuring doctors who were told and still told to this day they cannot prescribe Hydroxchloroquine and other treatments that have had great success for their patients. They have been told they need FDA approval.

[This video interview of Dr. Richard Bartlett's Silver Bullet for COVID 19](#) is welcome news. He practices in Midland, TX 40

miles from where I live. **I highly recommend you watch it.** Bartlett's credentials are quite impressive.

He says at the beginning there's a doctor/patient relationship in the U.S. that shouldn't be touched but it is now – by government bureaucrats. It looks like Dr. Bartlett's treatment can, like Hydroxychloroquine, be a game changer. Mustn't let this get out to the general public. It might help alleviate some of the fear gripping people.

### [FDA Must Approve Hydroxychloroquine Now](#)

### [Fauci knew about HCQ in 2005 – nobody needed to die](#)

“The [Virology Journal](#) – the official publication of Dr. Fauci's National Institutes of Health – published what is now [a blockbuster article](#) on August 22, 2005, under the heading – get ready for this – **“Chloroquine is a potent inhibitor of SARS coronavirus infection and spread.”** (Emphasis mine throughout.) Write the researchers, “We report...that chloroquine has strong antiviral effects on SARS-CoV infection of primate cells. These inhibitory effects are observed when the cells are treated with the drug **either before or after exposure to the virus, suggesting both prophylactic and therapeutic advantage.**”

“This means, of course, that Dr. Fauci (*pictured at right*) has known for 15 years that chloroquine and it's even milder derivative hydroxychloroquine (HCQ) will not only treat a current case of coronavirus (“therapeutic”) but prevent future cases (“prophylactic”). So **HCQ functions as both a cure and a vaccine.** In other words, it's a wonder drug for coronavirus. Said Dr. Fauci's NIH in 2005, “concentrations of 10µM **completely abolished** SARS-CoV infection.” Fauci's researchers add, “chloroquine can effectively **reduce the establishment of infection and spread** of SARS-CoV.”

The only treatment Fauci wants for patients is Remdesivir. Cost: \$520 per vial, or \$3,120 for a six-vial treatment

It's all about the money: [After destroying low-cost hydroxychloroquine, Big Pharma and the complicit left-wing media are promoting Gilead's new \\$3,000 drug](#)

"Hydroxychloroquine is very inexpensive to make and, not patented, can be used **for less than \$20/dose**. But instead of getting people the help they need, Big Pharma tried to cash in on the crisis. During the covid-19 panic, pharmaceutical companies capitalized on public health emergency orders, and secured billions of dollars in funding for new drugs and vaccines.

"Some of these new taxpayer-funded investments are being pushed into the market, with a steep price tag and a propaganda campaign to go along with it. Now Big Pharma and the complicit left-wing media are promoting Gilead's new \$3,120 treatment – a five-dose course of remdesivir, a formerly shelved Ebola drug."

The thoroughly discredited Dr. Anthony Fauci doesn't want patients to receive Hydroxychloroquine or any other treatment that is now found to be *highly effective* stopping many deaths at far less cost compared to Fauci's Remdesivir. But then again, it's all about money. [CNN Admits Hydroxychloroquine Works...After Countless Needless Deaths](#) – "May their shame be eternal."

Does the FDA, an agency of the federal government have the right to deny a patient a drug or treatment his/her doctor prescribes for them? I am not a lawyer, but look at these cases decided by the U.S. Supreme Court:

[Linder v. United States, 268 U.S. 5, 18, 45 S. Ct. 446](#) (1925): "Obviously, direct control of medical practice in the states is beyond the power of the federal government."

Medical practice includes a doctor prescribing certain medicines and treatments for his/her patient. The FDA is part of the federal government.

*Lambert v. Yellowly*, 272 U.S. 581, 598, 47 S.Ct. 210 (1926):  
“It is important also to bear in mind that ‘direct control of medical practice in the States is beyond the power of the Federal Government.’ *Linder v. United States*, 268 U.S. 5, 18. **Congress, therefore, cannot directly restrict the professional judgment of the physician or interfere with its free exercise in the treatment of disease.** Whatever power exists in that respect belongs to the states exclusively.” (Emphasis mine.)

Congress breathed life into the FDA. (Federal Death Administration)

[\*Conant v. Walters\*, 309 F.3d 629, 639](#) (9th Cir. 2002) (quoting *Linder*).

Lower circuit: *United States v. Anthony et al.*, 15 F. Supp. 553 (S.D.Cal. 1936) (June 23 1936)

Nos. 12069-12072. United States District Court, S.D. California, Central Division

“I am referring to these facts in order to indicate that we must bear in mind the purpose of the act – that the act is a borderline statute which must be interpreted in such a manner as to bring it within the constitutional power. And if we depart from it and interpret it either as attempting to regulate the disposition and sale of narcotics **or attempting the regulation of medicine**, we extend the act to the realm which the Supreme Court has repeatedly said the federal government cannot enter, under the penalty of unconstitutionality.

“The *Linder* Case (*Linder v. United States* [1925] 268 U.S. 5, 45 S.Ct. 446, 449, 69 L.Ed. 819, 39 A.L.R. 229) is very important. We all seem to agree, whether we read it alike or not, that it determines this case, so far as the law is concerned. I wish to refer to it for the present only for the purpose of pointing out that the moment we assume that this act regulates the sale within the state of narcotics and that



it aims **to regulate the practice of medicine**, we must hold it unconstitutional.”

I believe doctors who’ve either been refused by a pharmacy to honor a prescription or told they cannot prescribe Hydroxychloroquine or any other medication without the FDA’s approval should band together and file lawsuits. They have the U.S. Supreme Court on their side.

Convenient timing wouldn’t you say? Six months before the pandemic, [Bill Gates negotiated a \\$100 million contact tracing deal with a democratic congressman](#), July 8, 2020

“At the meeting, they discussed the rollout of wide scale contact tracing and negotiated which companies would get to cash in on the plan. They discussed how to contact trace all Americans, how to force them to submit to medical tests and accept vaccination passports in order to go about their lives.”

Our governor, Greg Abbott [R] is a damn fool. He’s now scaring Texans all over again by threatening to lockdown down the state – again. Many of us wrote and told him: You will see a ‘second wave’ **which would happen because you locked down the state.**

This is what should have been done months ago in all the states that shut down. [Texas Republicans sue Gov. Abbott over ongoing coronavirus restrictions amid minuscule death rate](#), July 11, 2020

“The suits come as critics of Abbott’s actions note that despite major increases in the number of coronavirus positives across the state, the vast majority of them involve patients who are asymptomatic or suffering mild conditions. They also note that the coronavirus death rate in Texas is remarkably low...

“Today a mask, tomorrow a hazmat suit – where does it stop?

Everyday GA-29 is in effect, the government tramples on the liberties of Texans,” he said in challenging Abbott’s face mask mandate. “Abbott’s order took effect a week ago. He also extended his previous emergency order shutting or limiting businesses another 30 days as of July 10.

“The suit claims that despite “approximately 180,000 deaths in Texas, caused by multiple diseases and accidents,” deaths from coronavirus have “been a trivial cause of disease and death in Texas.”

“In a column for Red State, Blankley notes that the coronavirus death rate in Texas is .01, and that out of a population of some 29 million people, 2.6 million have tested positive for the virus.

“Among them, 230,346 positive cases have been reported, or .79 percent of the population. Roughly 8.85 percent of those who have been tested have tested positive for the virus. And only those who are presenting symptoms are tested, so the number is slightly skewed,” she continued.”

*“Nature gave man two ends – one to sit on and one to think with. Ever since then, man’s success or failure has been dependent on the one he used most.”* George R. Kirkpatrick (1867-1937) Lecturer. I believe this applies to the poster boy for stupidity below:

[Head of Emergency Management Says Texans Should Wear Masks Inside Their Own Homes](#) – Health authorities to patrol behavior on private property?

Proving the point of herd immunity: [Wealthy white NYC neighborhoods could be hit harder than working class](#) areas during virus second wave because they stayed in lockdown and did not get antibodies. Poorer communities may have reached herd immunity.”

Those folks regardless of economic status worked through the

lockdown. The healthy stupidly quarantined are newly exposed.

Mega cities like Houston, Dallas, Austin and San Antonio are being hit hard with new cases. But, once again, just because someone tests positive **does not** mean positive = hospital = death. The age range is 18-35 years old.

People need to remember that when states partially re-opened, individuals who needed surgery for hip replacement or other surgeries started getting those surgeries. They are occupying hospital beds. Some stay a day or two, some a few more days. That's put the squeeze on beds for this new, predicted surge.

Hey, governor Abbott: Call President Trump and ask him to dispatch the Army Corps of Engineers. Have them come in and do what was done in NYC. Move the recovering non virus patients into those mobile hospitals units and make room for the virus patients. I read the possibility of using one of the sports stadiums. That would work for Corps setting up those hospital beds and required staff. Some of whom might come from out of state.

### [Senior Executive at Texas ER Chain Reveals Real Reason For Spike in Coronavirus Cases](#)

- The hospital ICUs are filled with really sick people with NON-COVID issues. They didn't come in earlier because they were scared and now they are SUPER SICK.
- From multiple sources at different hospitals: They have plenty of capacity and no shortage of acute care beds.
- All patients are tested for COVID: "You have some percentage of patients listed as COVID patients who are non COVID symptomatic and that the hospitalization rate is somewhat driven by hospitals taking in their normal patients with other medical issues."

(And Texas, NY, CA) [Data suggest Florida's record-breaking coronavirus days may have been inflated by as much as 30%.](#)  
"The state appears to be posting backlogged cases as if they

occurred on the days in question.”

[HUGE: The Coronavirus Tracking Project's Numbers are Suspect After They Are Caught Tacking On Previous Deaths to Current Totals](#), July 11, 2020

If one looks at a large number of the cases in California, Arizona and Texas –they are in counties closest to the U.S. – Mexico border. That’s where big spikes are; then go look at the border towns in Mexico and you see the same thing. International border crossings like the one in Laredo I visited years ago for an investigation, should be closed down. We don’t need it imported and the same applies on the Mexico side. I don’t want their people to get it, either. Many of those towns are dirt poor with no modern personal hygiene habits or facilities.

**All this cheating to keep our people in bondage while continuing to bankrupt millions, permanently shutter more than 100,000 small businesses and denying countless numbers their right to go to work.**

As I’ve covered in so many columns, **those loop masks (and even worse for you, cloth masks) don’t protect you or anyone else from the virus.** The draconian mandatory mask edict has caused this type of SICKENING hysteria all over the place.

[This is a two-minute video of some female making an ass out of herself](#) because a man isn’t wearing a mask; totally brainwashed.3.3 million views already. Americans attacking Americans out of fear hammered into their heads a hundred times a day by “conservative” as well as MSM and politicians too stupid or lazy to do a little research.

[Colorado town threatens a year in jail for residents who refuse to wear masks](#) – Been there many times. A suburb of Denver; high density population of PC, ‘woke’ brain dead liberals.

“The city of Englewood, Colorado, just south of Denver, is requiring all of its residents to wear face masks amid a spike in coronavirus cases – and violators could face up to a year behind bars, coupled with a hefty fine. The emergency order, issued by City Manager J. Shawn Lewis and approved by the city council Monday, went into effect Thursday.

“It states that everyone over the age of 6 will be required to wear a mask while outside their homes. Face masks must be worn inside any retail or commercial business, governmental office, or health care facility, including veterinary offices, officials say.”

The discussion about re-opening schools is the hot topic right now. It's my understanding that up in Arlington (a suburb of Dallas), those fools want to force children into cubicle like areas for the nonsense called 'social distancing' in the classroom. This, I believe will have a profound and *negative* impact on kids K- about jr. high.

My personal belief, being someone who refuses to harm my health by wearing a mask, is that forcing children to wear a mask is child abuse. Kids burn oxygen like a missile launching from Kennedy Space Center. **They need lots of oxygen, not less.**

**Children are the least vulnerable and their chances of getting COVID-19 are extremely low.** From all I could find on data, very sadly six children have died from that virus; no information on pre-existing medical conditions. It all comes back to herd immunity. When enough of the population, 80% or higher, is exposed to the virus, it burns itself out for now.

[Ignored by American Media and the CDC: Children are SEVEN TIMES More Likely to Die from Seasonal Flu than the Coronavirus!](#)

In closing I implore you to [watch this 17:37 minute video](#); 433, 860 views which means You Tube should pull it anytime

now. [If they do you can also view it here](#). I've seen a lot of videos over the months but Dr. Kelly Victory meticulously gives a real education on this nightmare in a short period of time.

That video needs to be seen by the tens of millions – **especially educators** and that's YOUR job. Contact the head of your school district and ask for an appt. Try to make it several people at one time. Or, write a letter and provide the name and link to her video. *I do this all the time.*

SPEAK OUT NOW SO WE CAN STOP THE DESTRUCTION OF OUR REPUBLIC AND TRY TO PICK UP THE PIECES OF LIVES SHATTERED BY DICTATORS IN PUBLIC OFFICE.

Children are God's gift to us. We don't want to put them at risk but unless tens of millions of Americans turn off the propaganda machine called TV and get real facts, parents across the country are going to continue to be scared to death their child will get the virus at school.

Both Dr. Bartlett (featured earlier in this column and who by the way, received an award from the State of Texas) and Dr. Victory have been excoriated, defamed and treated like conspiracy nuts by the media. Called quacks and worse. They should have Dr. Victory's credentials.(Below)

Please get this column out to your Facebook or other social media. Every person knows ten people who know ten people who know ten people and before you know it, a million people have networked.

For a thorough, comprehensive education on the Fed, the income tax, education, Medicare, SS, the critical, fraudulent ratification of the Seventeenth Amendment and more, be sure to order my book by calling 800-955-0116 or click the link, ["Taking Politics Out of Solutions"](#). 400 pages of facts and solutions.

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Dr. Kelly Victory is a board-certified trauma & emergency medicine specialist with over 15 years of clinical experience. She served as CMO for Whole Health Man., delivering on-site healthcare for Fortune 500 companies. She is an expert in disaster preparedness and the medical management of mass casualties.

Dr. Victory is a member of the Nat'l Preparedness Leadership Initiative, a combined effort of Harvard School of Public Health and Kennedy School of Gov't to develop "meta-leaders" for national disaster preparedness & response. Dr. Victory has been a guest lecturer at the HBS Healthcare Conference, and is a member of the Leadership Council at Harvard School of Public Health.

Dr. Victory teaches "Active Shooter Rapid Response & Evacuation" and "Leadership in Times of Crisis" for first responders, community leaders and organizations, aimed at limiting casualties and enhancing resiliency. Dr. Victory makes frequent radio/TV appearances to discuss issues critical to healthcare reform, disaster and public health. She holds a BS from Duke Univ. and her MD from the U. of North Carolina.

She's a quack?