ANOTHER Dr Annie Bukacek EXPLAINS COVID DEATH MANIPULATION (video 17:35 min) (dated April 9) with Transcript 4.13.20

https://www.youtube.com/watch?v=a7ZGPDW4gGE&feature=youtu.be

Transcript
00:00
dr. Andy Booga check is a
00:02
board-certified internal medicine
00:04
physician and sole proprietor of her
00:07
medical practice in Kalispell named
00:10
Hosanna healthcare she's been practicing
00:12
medicine for over 30 years most of those
00:15
years in Montana she got her medical
00:19
degree degree from the University of
00:21
Illinois in Chicago
00:22
did her internship and residency of
00:26
internal medicine at Oregon Health
00:28
Sciences University dr. annie is a
00:31
council member and fellow of the
00:33
American College of Physicians Montana
00:36
chapter and in 2019 won the ACP laureate
00:41
award for commitment to excellence in
00:43
medical care as well as service to their
00:47
community and the ACP she is a member of
00:51
the Montana Medical Association
legislative committee she was voted best
family physician in Flathead County 2012
and 2019 and she is a member of the
Flathead County Board of Health dr.
anne has been a president of Montana
pro-life coalition since 2008 and is a
member of the board of directors of the
Montana shooting sports association MSSA
she is a mother of five and a
grandmother of 12 you're going to come
and help her with her her podium please
welcome to the podium dr. annie bucha
check
[Applause]
thank you and thank you for the
introduction at a time we're telling the
truth is considered a threat to national
security we're very blessed to have a
pastor who tells us the truth we are
blessed beyond measure so I'm gonna read
this so that I make sure I don't give
excessive commentary so I'm gonna talk
about death certificates today the decision for unprecedented government mandated lock downs has been based on the alleged death rate of koban 19 is this death rate based on truth I posted the following question on Facebook yesterday this is the question know anybody personally with baseline good health who has been hospitalized for Cova 19 alone or allegedly died from kovat 19 that was my question I asked the question this way because if you know someone personally you may know their baseline health status and some details of the case and being tested positive for Cova 19 does not mean you have the disease even asking the question this specifically I still got some people saying their spouse knows a friend of a friend who's of a nephew in New York and some who answered yes but didn't give the details even though I
asked them could you please submit some
more details I got over 350 comments and
received dozens of no answers if not
scores last I counted there were three
or four who answered yes and said their
case fit the criteria and they gave me
some details but even those three orour giving them the benefit of the
doubt that they were answering honestly
to the best of their knowledge does that
mean the person they described was
actually stricken with kovat 19
inquiring minds want to know are the
reported deaths from kovat 19 truly
deaths from Cova 19 to address this
question we need to discuss death
certificates since death certificates
are the basic source of information
about mortality the discussion of death
certificates is not a fun one we have
all grieved so many losses in our
lifetimes still we need to talk about it
because they are the basis of the
so-called death rate of kovat 19 history
decisions are being made due to these
figures despite the fact that they are
flat-out wrong based on data that is
insufficient and often inaccurate few
people know how much individual power
and leeway is given to the physician
coroner or medical examiner signing the
death certificate how do I know this
I've been filling out death certificates
for over 30 years
more often than we want to admit we
don't know with certainty the cause of
default when we fill out death
certificates that is just life we are
doctors not God autopsies are rarely
performed and even when an autopsy is
done the actual cause of death is not
always clear physicians make their best
guesstimate and fill out the form then
that listed cause of death whatever we list is entered into a vital records databank to use for statistical analysis which then gives out inaccurate numbers as you can imagine those inaccurate numbers then become accepted as factual information even though much of it is false so even before before we heard of kovat 19 death certificates were based on assumptions and educated guesses that go unquestioned when it comes to kovat 19 there is the additional data skewer that is get this there is no Universal definition of kovat 19 death the Center for Disease Control updated from yesterday April 4th still states that mortality quote-unquote data includes both confirmed and presumptive positive cases of Kovach 19 that's from their website translation the CDC counts both trucco vat19 cases and speculative guesses of kovat 19 the same they call
it death by Coppa 19 they automatically overestimate the real death numbers by their own admission prior to Cova 19 people were more likely to get an accurate cause of death written on their deaths if search difficult if they died in the hospital why more accurate when a patient dies in the hospital because hospital staff has physical exam findings labs radiologic studies etc to make a good educated guess it has estimated that 60% of people died in the hospital but even those in hospital deaths the cause of death is not always clear especially in someone with multiple health conditions each of which could cause the death clear-cut causes of death might include traumatic brain injury say from a car accident intractable seizures or asthma sepsis from overwhelming infection respiratory arrest from a COPD
07:00 exacerbation ruptured aneurysm
07:03 metastatic cancer massive acute heart attack stroke or pulmonary embolism
07:08 will talk more in a little bit in a little bit about why in accuracy and the cause of death has declined for Hospital deaths with the introduction of covin 19 testing there are also unclear causes of death in ambulances that's a reality an example would be someone with multiple deadly conditions who get short of breath and dies before evaluation can be done was it the patient's underlying lung disease or heart disease that caused the shortness of breath that call caused them to call the ambulance or was there a concomitant pneumonia or other problem we don't know because the patient died before the incident could be evaluated so an estimated 60% of people died in the hospital as to the other 40% it is estimated
about 20% of people died at home and 20%
in nursing homes in this country the
true cause of death in these situations usually remains unknown the death certificate is filled out with the best educated guess unknown causes of death include elderly people or younger people with known heart disease who died peacefully in their sleep it is not acceptable to list old age as a cause of death even though that may be more accurate then the death cause of death we often list on the death certificate we are allowed to state as a cause of death a thorough Scott cardiovascular disease and that may be our best guess in a lot of these cases but is it truly the cause who knows only God in heaven knows Amen so allow me to give a real-world example one of my patients father's died about 17 years ago he was
old and in the final days of terminal cancer he also had heart disease but was too old and too sick to get heart bypass surgery as he got near the end of his life he came down with what appeared to be pneumonia as my patient this man's son stood by his father's sick bed at home the man died no one else was there the mortician was called and removed the body at about 2:00 in the morning the next day the funeral home called and asked my patient the son of this man what time did he die and what was the cause the death certificate listed the man's son's best guess the cause of death made by the deceased man's son was made official he was cremated so there was no second opinion this man didn't even have any medical training that gave the diagnosis to the mortician this happens all the time especially in poor urban areas casual
country towns and rural areas in the case of my patients father did an accurate cause of death matter not really but today when governments are taking making massive changes that affect our constitutional rights and those changes are based on inaccurate statistics it does matter there's a u.s. standard for death certificates that includes a line for immediate cause of death followed by two to three lines of antecedent causes giving rise to the immediate cause then one to two lines of other significant conditions contributing to the death but not causally related to the immediate cause for an example immediate cause of death sepsis antecedent cause pneumococcal pneumonia other significant conditions COPD okay let's combine the information I've
given you so far about the guesswork involved in filling out death certificates and apply it to Cova 19 the analysis the follows requires the presupposition that in today's medical climate many if not most patients sick enough to be hospitalized will be checked for Co vat19 it also requires an understanding of what we know at this point that most people who test positive for Cova 19 have mild or no symptoms therefore testing positive for kovat 19 does not mean a person is sick with it or if the person died that they died from it to drive this home we need to understand how the CDC and National Vital Statistics system are instructing physicians to fill out death certificates related to kovat 19 brace yourselves and please pay attention and let what
I'm about to tell you sink in the assumption of kovat 19 death can be made even without testing based on assumption alone the death can be reported to the public as another kovat 19 casualty the March 24th 2020 National Vital Statistics system memo states and I quote the rules for coding and selection of the underlying cause of death are expected to result in kovat 19 being the underlying cause more often than not and a quote the CDC report of cases in the u.s. memo from yesterday states the death numbers are preliminary quoted and have not been confirmed so quote the results are preliminary and have not been confirmed end of quote it's from the CDC website here's a quote even more laden with meaning Stephen Schwartz national director of the division of vital statistics
12:56 says an answer to the question is stated
13:00 in the organization's kovat 19 alert
13:03 quote should Cova 19 be reported on the
13:07 death certificate only with a confirmed
13:10 test check out his answer and I quote
13:13 from this memo of which I have a copy
13:15 quote Kovach 19 should be reported on
13:19 the death certificate for all decedent's
13:22 where the disease caused or is assumed
13:25 to have caused or contributed to death
13:29 certifiers should include as much detail
13:32 as possible based on their knowledge of
13:34 the case medical records laboratory
13:37 testing etc and a boat I'm sure you'll
13:43 all feel so reassured the government is
13:45 asking doctors to provide their very
13:48 best guesswork not fact quote Cova 19
13:56 cause death and a quote and quote assume
13:59 death bykova 19 and a quote are not the
14:01 same thing and for those who died from
14:05 something else and had an incidental
14:07 finding of Kovac 19 positivity dying
with Cova 19 is not the same as dying
from Kovac 19 I'm almost done but want to clarify the process with another patient example this is something that could happen commonly it's not a specific patient I'm thinking of let's say it's a sick patient who goes into respiratory arrest at home he is intubated at home by EMTs they put a tube down his throat to help him breathe he's taken to the hospital by ambulance put on a ventilator in the ICU put on antibiotics for presume sepsis given IV fluids because his blood pressure has bottomed out the bacteria pneumococcus is found in the blood and sputum cultures pneumonia is seen on the chest x-ray despite the staffs best efforts he dies two days after admission like I said this is not an uncommon scenario the patient was found to be kovat 19
positive
doctor has the option of listing
on the death certificate that kovat 19
is the immediate or antecedent cause
because the doctor theorizes that kovat
19 contributed either way it goes into
the databank is caused by Cova 19 to
reiterate if a patient test positive for
Cova 19 and dies from another cause such
as pneumococcal sepsis it may be
considered accurate to say that person
died with kovat 19 not from kovat 19 yet
the CDC guidelines list is one more they
list this case as one more Cova 19 death
and they go to the next question will
dead they label that as Co phat 19 and
it goes on and on you could see how
these statistics have been made to look
really scary when it is so easy to add
false numbers to the official database
those false numbers are sanctioned by
the CDC as of their memo yesterday April
16:15
4th I have made physical copies of those
16:18
memos in case more people start looking
16:20
at their website and they decide it's
16:22
too much truth for us I hope I was able
16:26
to make my point the real number of Cova
16:29
19 deaths are not what most people are
16:32
told and what they then think how many
16:37
people have actually died from kovat 19
16:40
is anyone's guess again god only knows
16:45
but based on how death certificates are
16:48
being filled out you can be certain the
16:51
number is substantially lower than what
16:55
we are being told based on inaccurate
16:58
incomplete data people are being
17:01
terrorized by fear mongers into
17:04
relinquishing cherished freedoms thank
17:07
you oh and I had I have a little bit I
17:12
have a little PS forgot about you can't
17:16
have a true case fatality rate without
17:19
testing massive numbers of people but
17:21
that is another topic
17:23
what is that old saying something along
the line figures don't lie but Liars
sure can't figure thank you