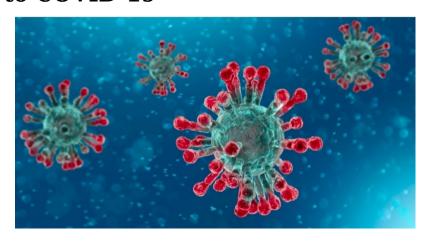




Minn. State Senator: CDC Says Unconfirmed Cause of Death Can Be Attributed to COVID-19

Minnesota State Senator Dr. Scott Jensen disclosed yesterday that the state's health department has suggested attributing deaths to COVID-19 even without a confirmed diagnosis.

The revelation from the family physician, who represents the state's 47th district just outside the Twin Cities, raises the question of just how many deaths not only in Minnesota but also the rest of the country the Asian pathogen has caused.



Data from New York State, as *The New American* reported yesterday, show that fatalities are generally older Americans with myriad health problems aside from infection with SARS-CoV-2.

Link to CDC

Speaking to Valley News Live in Fargo, North Dakota, <u>Jensen said</u> legislators had not seen data that Democrat Governor Tim Walz has used to justify the stay-at-home order he has extended until May 4.

"We wanna be good soldiers and that," the doctor told commentator Chris Berg. "But I think people are starting to say hold it now. We need to have a deeper understanding of this and we're not getting it."

But then Jensen delivered this news:

I received an email last week from the department of health coaching me how to fill out death certificates. And I've never received coaching from the vital statistics agency in terms of how to do a death certificate.

Basically, I felt like they were saying you know, you don't have to have a confirmed laboratory test for COVID 19 in order to make the death certificate COVID-19.

Jensen received a seven-page letter from the state health agency, he told Berg <u>and another reporter</u>, that linked to a document from Centers for Disease Control, "Guidance for Certifying Deaths Due to Coronavirus Disease 2019 (COVID-19)."

He posted a link to the document late Tuesday night.

Using the scenario of elderly stroke victim who dies in acute respiratory distress after contact with a virus carrier, the <u>"guidance" suggests</u> tying deaths with no confirmed cause to the Chinese Virus:

An 86-year-old female passed away at home. Her husband reported that she was nonambulatory after suffering an ischemic stroke 3 years ago. He stated that 5 days prior, she developed a high fever and severe cough after being exposed to an ill family member who subsequently was diagnosed with COVID-19. Despite his urging, she refused to go to the hospital, even when her breathing became more labored and temperature escalated. She was unresponsive that morning and her husband phoned emergency medical services (EMS). Upon EMS arrival, the patient was



Written by **R. Cort Kirkwood** on April 9, 2020



pulseless and apneic. Her husband stated that he and his wife had advanced directives and that she was not to be resuscitated. After consulting with medical command, she was pronounced dead and the coroner was notified.

Comment: Although no testing was done, the coroner determined that the likely UCOD was COVID-19 given the patient's symptoms and exposure to an infected individual. Therefore, COVID-19 was reported on the lowest line used in Part I. Her ischemic stroke was considered a factor that contributed to her death but was not a part of the direct causal sequence in Part I, so it was reported in Part II.

Jensen said that isn't quite the way it should be done. If he saw a 88-year-old nursing home patient with "a cough and a fever, and after three days, ends up passing away from pneumonia," he said, "I'm not going to put influenza on that death certificate. So I doubt that I would be inclined to put COVID-19."

Jensen worries that the government is "jazzing up the fear factor" and that people are so frightened they can't evaluate the public health measures they are asked to support.

Jenson didn't say Chinese Virus data are hopelessly compromised, although conversations with nursing home personnel suggest the numbers are inflated.

"I've talked with nursing staff who have been involved with people who have passed away that either had living wills or were on hospice care and in some of those situations," he told the station. "I've been led to believe that there may have been a COVID-19 diagnosis included on the death certificate document without having had a COVID-19 confirmed laboratory test."

New York Data

The updated data from New York showed that 82.7 percent of those who have supposedly died from COVID-19 were 60 years or older. Adding the 50-59 age cohort brings that number of 93.3 percent.

At this writing, the data show that 5,424 out of 6,268 people counted as virus fatalities, 86.5 percent, had serious comorbidities, including diabetes, cancer, dementia, hypertension, congestive heart failure, and kidney, coronary artery, and chronic obstructive pulmonary disease.

Those numbers suggest that age and other illnesses played a significant role in those deaths, and that people under 50 without underlying health problems are much less likely to die.

As for the CDC "guidance," <u>Jensen tweeted</u> this: "Make your own determination as to whether or not physicians are being encouraged to utilize COVID 19 in cause of death diagnoses."

H/T: Powerline



Image: Naeblys/iStock/Getty Images Plus

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