

More VC Nurses Blow Whistle on ‘Overwhelming’ Numbers of Heart Attacks, Clotting, Strokes

By [Joel Kilpatrick](#) December 14, 2021 [Story source: The Conejo Guardian](#)



After the Conejo Guardian’s report on [alarming trends in Ventura County hospitals](#), [more nurses have come forward to affirm the rise in unexplained heart problems, strokes and blood clotting in local vaccinated patient populations](#). They also say [doctors refuse to consider that these could be adverse reactions to Covid shots](#).

Sam, a critical care nurse at an ICU in a Ventura County hospital, came forward because, “I’m tired of all the B.S. that’s going on,” he told the

Guardian. “It’s crazy how nobody questions anything anymore.”

“None [of the doctors] question whether the vaccine causes myocarditis, pericarditis and the strokes that are coming in. [If they don’t toe the line, they could lose their medical license.](#)”

He has witnessed a [surge in numbers of young people experiencing severe health problems after receiving Covid shots](#).

“We’ve been having a lot of younger people come in,” Sam says. “We’re seeing a lot of strokes, a lot of heart attacks.”

One 38-year-old-woman came in with occlusions (blockages of blood flow) in her brain.

“They [doctors] were searching for everything under the sun and documenting this in the chart, but nowhere do you see if she was vaccinated or not,” Sam says. [“One thing the vaccine causes is thrombosis, clotting. Here you have a 38-year-old woman who was double-vaccinated and she’s having strokes they can’t explain.](#)” None of the doctors relates it to the vaccine. It’s garbage. It’s absolute garbage.”

Another woman, age 63, came in the day she took the Moderna Covid shot. With no previous cardiac history, she suffered a heart attack. Tests revealed her coronary arteries were clean.

[“One doctor actually questioned the vaccine, but they didn’t mention it in the chart because you can’t prove it,” Sam says.](#)

While hospitals are seeing more myocarditis, an associated side effect of the Covid shots, “Everyone wants to downplay it — ‘It’s rare, it’s rare,’” Sam says. “Doctors don’t want to question it. We have these mass vaccinations happening and we’re seeing myocarditis more frequently and nobody wants to raise the red flag. When we discuss the case, they don’t even discuss it. They don’t mention it. They act like they don’t have a reason, that it’s spontaneous.”

‘Survival mode’

“I feel like our hospital is ... barely able to function right now. That’s how bad it is.”

Dana, another ICU nurse, says the number of sick, critically ill people in her Ventura County hospital has become “overwhelming,” pushing her facility’s patient census to the highest levels she has ever seen.

“It has never been this busy, and none of it is Covid-19,” Dana says. “We don’t normally see this amount of strokes, aneurysms and heart attacks all happening at once. . . . Normally we’ll see six to ten aortic dissections a year. We’ve seen six in the last month. It’s crazy. Those have very high rates of mortality.”

But doctors almost never bring up the possibility of adverse reactions due to Covid vaccinations.

“Doctors are like, ‘It’s probably the holidays,’” Dana says. “I don’t understand how you can look at what’s going on and come up with just, ‘Yeah, it’s the holidays.’ There’s been a big change in everybody’s life, and it’s the vaccine.”

Covid infection numbers remain small, and most patients who come in with Covid have already been vaccinated, she says. Rather, an unprecedented number of patients are “on pressers to keep their blood pressure up, people on ventilators, clotting issues, so we have a lot of Heparin drips to make sure they don’t stroke out,” Dana says.

Meanwhile, “Everybody’s in survival mode because of staffing.”

Nurse shortages, caused by people fleeing California and the health care profession, have local hospitals scrambling to provide care. Dana has been “out of ratio” for the last three shifts, based on the State of California’s maximum allowable nurse-to-patient ratio for safely delivering care. That is leading to serious lapses.

“Because we’re short-staffed, they are hiring new nurses and I’m seeing mistakes in the hospital that are not even funny — medical errors,” Dana says. “[Hospitals] are trying to fill these spots and are getting any warm body to do the bare minimum. I think it’s terrible what’s happening.”

Recently, Dana took care of a patient who was mistakenly given massive amounts of a certain hormone by a different nurse.

“Now their brain is fried,” she says. “The patient is screwed.”

Unfortunately, most newly-hired nurses “are not capable of safely managing patients,” and yet are being thrust early into this environment, she says.

“The hospital is like, ‘We need to fill these spots. We’re getting killed.’ So they release all these people who’ve been training for two to three months. Normally you train four to six months,” Dana says. “To be honest, I feel like our hospital is on the brink of — we’re barely able to function right now. That’s how bad it is.”

Even the physical space is taxed by the influx of patients with life-threatening health conditions. Dana’s **hospital is so packed that they are putting patients in staging areas of operating rooms.**

As a result of crowding, equipment is not always where it should be and “when someone takes a dump on you and goes into cardiovascular collapse, you don’t know where your stuff is — and time is tissue,” she says. “Their blood pressure starts dropping, their respiratory rate goes up, and because we’re having to shuffle patients and staff around, equipment is in different spots.

Sometimes you need to respond in minutes, and if a nurse doesn't know where stuff is and is not used to dealing with the numbers of people and the types of critical problems — every second of delay in therapeutic treatment causes more tissue to get damaged and die, whether it's heart tissue, brain tissue, muscle tissue. Every second counts.”

Green nurses managing more patients, with more serious problems, is forcing unpleasant choices.

“It's setting up the patients for failure,” Dana says. “How can you manage four to five critically ill patients effectively? You have to pick winners and losers.”

Pressuring the ‘unvaccinated’

Meanwhile, doctors seem obsessed with getting people to take Covid shots.

Sam took the first two Covid shots while working in Los Angeles during the pandemic, but is shocked at how medical professionals and political leaders are demanding universal acceptance of what he says is “not really a vaccine. It's experimental.”

“They shouldn't be forcing it on everyone,” he continues. “There isn't a lot of data. There are risks associated with it and you should be able to turn it down. Now if you don't take the vaccine, people shun you.”

Hostility toward those who don't go along runs high among medical co-workers.

“You're not allowed to say you don't want it,” Sam says. “Coworkers will talk [trash] about you, they're so adamant about it. It's frustrating. ... You always hear the conversations behind their backs. ‘She's not vaccinated, blah blah blah.’ I'm like, who gives a [care]? It's none of your business. It's their choice. Before, medical information was really private. Now it's like, ‘What's your Covid status?’”

Even patients coming into his hospital who have not taken the Covid shots are flagged and treated with disdain, he says.

“The first thing [nurses] say in the history and physical is, ‘He's not vaccinated. He's got Covid,’” he says. Meanwhile, “The Covid numbers in ICU are zero.”

As for the Vaccine Adverse Event Reporting System (VAERS), it may as well not exist. In his hospital, “There's no protocol [for reporting to VAERS]. Nobody ever talks about that,” he says.

Even those who have strong natural immunity after overcoming the virus naturally are being pressured to take Covid shots.

“If this is about science, why on earth are we pushing people to get the vaccine?” Sam says. “We have rights, but they've taken that away. If you don't get the shot, you lose your job.”

Informed consent also seems to have gone by the wayside.

“When you give someone informed consent, you are supposed to give them all the risks and benefits, and all options,” he says. “I feel like with the vaccine, they don't give you the risks. They say, ‘Take this vaccine. It's for the good of the community.’ They won't be honest about it because it will drive down vaccination numbers. Every other medical product we give, we

inform them fully. I don't understand what it is about the Covid vaccine. They are so adamant about giving it."

'No boosters'

"I don't want to keep injecting myself with something every six months when I don't have data."

Sam is most disappointed with doctors and nurses.

"The doctors don't question anymore," he says. "None question whether the vaccine causes myocarditis, pericarditis and the strokes that are coming in. If they don't toe the line, they could lose their medical license. They do what they do because they have bills to pay. I'm disappointed because you have a handful of doctors who will question the narrative, but the rest go along."

The level of propaganda, in his view, is "out of control."

"Propaganda creates doubt," he says. "Half the country buys it and the other half distrusts the system. They [doctors] are smart people but they don't think for themselves anymore. It's the propaganda, the repetition of the lie. It's very effective."

For his part, Sam has decided not to take any boosters.

"I don't want to keep getting this thing. What if I clot off and get a heart attack?" he says.

"Health care professionals are evidence-based people — or we used to be — and there's just no evidence what this thing's going to do in 10 years. We have no evidence what it does to the immune system and clotting system. I don't want to keep injecting myself with something every six months when I don't have data."

He and his wife have decided they will leave the state if they can't afford to homeschool their child, when the child reaches school age.

"My [child] will never get the vaccine. We will leave," Sam says. "They are out of their minds to vaccinate these children. Their immune systems are immature. They are growing. I'm not willing to take the risk. No way. Me and my wife feel the same way."

Florida, which is maintaining medical freedom and privacy, is also their preferred destination if and when he loses his job once governments change the definition of "vaccinated" — leaving him in the same category as those who never took Covid shots in the first place.

"I may end up getting a lawyer if they change the definition of 'vaccinated' and you need a third shot," he says. "California law allows for religious exemptions and hospitals are denying them. That's discrimination."

Like all the nurses interviewed by the Guardian, he says he is "sick and tired of the coercion."

"If you're vaccinated and I'm not, what the heck are you worried about? It's my choice, right?" he says. "If I get sick and die, that's the price of freedom. That's what we're built on. In America, we don't force people to take injections and medical products against their will."