



# Rights of the Patient Under Fire in Wisconsin's Supreme Court

## John Zingsheim's Fight for Life

John Zingsheim walked into a Wisconsin hospital in the Aurora Health Care system. He was not life-flighted or on a stretcher, but *walked* in, and tested positive for Covid. Within 10 minutes, the doctor told him, "Mr. Zingsheim, you're going to die," and placed him into the CMS (Medicare/Medicaid) hospital Covid protocol (aka "NIH protocol"). Without John's knowledge or permission, they gave him remdesivir for two days before he called his family, "I think I'm in trouble, can you help me?"



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This protocol for John included unproven Emergency Use Authorization (EUA) drugs baricitinib (causes blood clots and Sepsis, and says *not* to give it for upper respiratory infections) and remdesivir (which is toxic to the liver and kidneys).

John's Power of Attorney (POA), his nephew Allen Gahl, demanded he be taken off the injurious drugs. Nevertheless, another effort at giving remdesivir to him was attempted, but according to my interview with the Gahls, they caught it on his charts and were able to stop it in time. John and his POA requested life-saving treatments ivermectin and high dose IV Vitamin C, but the hospital refused. The Gahls informed me, "On the Statutory HCPOA [Healthcare Power of Attorney] Form used by hospitals, which comes from Statute 155, it also requires the hospital to give 'necessary treatments' requested by the POA, but these were denied John."

Under the the hospital's protocol treatment, John's kidneys failed, he was on dialysis, he had had Sepsis multiple times, and he was dying on the ventilator.

The hospital sent a hospice team to each family member trying to convince them to "pull the plug" on John, stating there was nothing more they could do at that point since they were claiming he had Multiple Organ System Failure, including his kidneys, and his lungs were scarred. They told them he would never be able to return to a livable quality of life. The family sought help from the legal system, and refused to end John's life. And the hospital refused to give him ivermectin, even though he was dying.

Aurora argued that when a medical treatment falls beneath their standard of care for patient safety, then the court *has no right to intervene for the patient*.

The Waukesha Circuit Court was of a different opinion and granted the request of the family to have their Power of Attorney Statute upheld, and approved an outside doctor going into the hospital to administer the ivermectin to him.

The family rejoiced and they signed away any liability to the hospital for him receiving ivermectin, and the outside doctor was made ready. While the willing doctor was getting in the car to go to John to



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administer the ivermectin, the Appeals Court paused the order and took the case. So in effect, the outside doctor was barred admittance to administer the POA-requested Ivermectin.

Eventually the Appeals Court ruled that the Waukesha Circuit Court erred in their decision (to honor the POA and give this dying man the ivermectin in an attempt to save his life).

Beginning in October of 2021, people across Wisconsin protested for John's life in front of the Aurora hospital in Oconomowoc. Christians across America prayed. Through a series of miraculous events, John Zingsheim [shared](#), he was secretly given ivermectin, and with all the prayers going up on his behalf, beat the odds and survived the CMS protocol and the hospital's "treatment" for over 10 months, more than 100 of those days on the ventilator.

Since many people have sadly died on the ventilator within 10 days, it is beyond astounding that John survived over 100 days on it. Today John is breathing on his own with a little help from supplemental oxygen, and his kidneys have both healed and come back to full function.

Having protested for him, prayed for him, cried for him, wrote about him, asked others to pray for him, it was such an honor to recently meet him, and surreal to talk with him, to converse with someone God fought for.

### **The Supreme Court of Wisconsin**

On Tuesday, January 17, 2023, John Zingsheim's [court case](#), *Allen Gahl v Aurora Health Care Inc.*, came before the Supreme Court of Wisconsin. Attorney Karen L. Mueller, founder of the [Amos Center for Justice and Liberty](#), presented oral arguments on his behalf.

The courtroom was very full, including people in attendance whose loved ones had tragically died within Wisconsin hospitals, and who firmly believe their loved ones' deaths were the result of the CMS protocol they were placed on.

These were Attorney Karen Mueller's opening remarks:

This Court need not decide which form of treatment for Covid is best. Rather it is simply called upon to ensure that the Wisconsin Healthcare Power of Attorney Statute is properly interpreted so that the rights it proclaims are not merely suggestions that hospitals can ignore at their pleasure.

We ask this Court to reverse the Appeals Court Decision that changed the intention of the Legislature and effectively gutted the rights of patients protected by the WI Healthcare Power of Attorney, Wisconsin Statute 155. This statute declares that patients have the right to refuse treatments preferred by their hospital and receive medical treatments withheld by the hospital, even though they are necessary. These rights can be transferred to the Principal's Healthcare agent, if the Principal becomes unable to make the medical decisions himself.

The plain meaning analysis of this statute under this Court's settled precedents, is that these rights are not mere suggestions, but convey and protect *actual* rights....

Even though Mueller had correctly stated at the beginning that this case was not a discussion on the proper treatment for Covid, nevertheless, a discussion on ivermectin commenced. Justice Jill J. Karofsky engaged in a line of questioning that coincides with the mainstream narrative that ivermectin is unsafe



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per the CDC and FDA for the treatment of Covid, that anecdotal stories to the contrary cannot be trusted, and that it is a drug for parasites. Justice Rebecca Bradley said, “Perhaps to expedite this line of questioning, there is in fact a study, Appendix B of the Amicus File by the Veterans of Liberty Law Firm ‘Review of Emerging Evidence Demonstrating the Efficacy of Ivermectin in the Prophylaxis and Treatment of Covid-19.’”

(It’s also worth noting that the [Association of American Physicians and Surgeons](#) [AAPS] and the [Front Line COVID-19 Critical Care Alliance](#) [FLCCC] both submitted an Amicus Brief on behalf of Allen Gahl and the Standard of Care and included the efficacy and safety of ivermectin. In October of 2021, on the second day of the Waukesha trial court case *Allen Gahl v Aurora*, FLCCC co-founder Dr. Pierre Kory was there, prepared to testify.)

On January 17 of this year, in the Wisconsin Supreme Court, Justice Patience Roggensack weighed in on the ongoing ivermectin discussion, stating that she has read that Africa has had a very low Covid rate, and most of their people are on ivermectin prophylactically for parasites, and the article “suggested that was another reason we should look more carefully at using ivermectin.”

Attorney Mueller noted and read from the NIH (National Institute of Health) chart 2E, pages 333-334, which lists remdesivir as the first treatment for Covid-19 and states that its safety concerns are renal [kidney] and liver toxicity; and lists ivermectin as the second treatment for Covid-19 and describes its safety concerns as “generally well-tolerated.”

A day later, Vicki McKenna of WISN Radio [interviewed Attorney Karen Mueller](#). Vicki McKenna asks (starting at the 43-minute mark),

Does that make sense to anybody? To deny access to a completely safe drug — we’re talking end of life risk here - completely safe, and instead you want to toxify his kidneys so that he has a harder time surviving ventilation?... Ivermectin is very safe, The National Institute of Health says it’s very safe....

Why don’t you explain to us, like we’re 5, why it’s better to give the guy the thing that’s going to shoot his kidneys rather than give him a drug that *at worst*, won’t help him?

Attorney Karen Mueller answered,

It makes no sense. The whole thing is nonsensical, unless you understand there is something going on here... That there are Covid-19 protocols that are coming out of the Federal government, and they’re coming out through Medicare and Medicaid, and so these are policies that are being set in the federal government, and basically the hospital makes deals with them ... that if you’re going to get your Medicare reimbursement, then you will follow these Covid policies. And I have a number of witnesses, not necessarily in that hospital, but other hospitals, that have said the doctors have told the family on the sly that they will lose their job if they give the ivermectin.

Back in courtroom, Justice Rebecca F. Dallet questioned how can a court be expected to get between the doctor and the patient? And Attorney Mueller pointed out that in reality the federal government has stepped between the doctor and the patient with this CMS protocol.

Although she was not able to continue due to being asked another question in another vein, paramount



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to this case is the Inherent power of the court to intervene for the life of a patient, which is a fundamental right protected under our Wisconsin Constitution.

## **Power of Attorney**

Attorney Mueller stood firmly on the fact that the Healthcare POA is central to this case, because Mr. Gahl is the POA, and the one who brought the lawsuit.

Justice Ann Walsh Bradley asked Mueller questions about 155.30 first paragraph, on the second page of the POA. She pointed out that the section didn't say "request" or "demand" another treatment but only words that would stop a treatment, to which Mueller answered that we should not skip the *first page* of the POA, because it is crucial in requesting "necessary" treatment. In fact, Attorney Mueller clearly explained that even if she customized a personalized POA for a client, she would still be required by WI Stat. 155.30 (2) to give the *first page* of statutory rights or sign off that she told the client all of his or her rights (from the first page). *Only* the first page.

The first page of the Statutory Form on [POA 155.30\(1\)](#) states:

### **Notice to Person making this Document**

You have the right to make decisions about your health care.

No health care may be given to you over your objection,  
and necessary health care may not be stopped or withheld if you object.

## **Right to Try**

During his allotted time, Aurora's Attorney, Jason J. Franckowiak, talked about Right to Try, even though the case wasn't based on it. He stated that Right to Try "would have no bearing on this case," that it has very narrow restrictions, and that ivermectin would not fall under its parameters. The clear message he conveyed was that even if the court wanted to use it, it wouldn't apply in this case.

Although no Justice brought this up, my thoughts ran along this vein while Franckowiak was speaking:

Of course, Ivermectin would not be placed in the experimental drug category of a Right to Try, as it has been FDA approved for 36 years, used safely in babies, pregnant women, handicapped, immunocompromised, the elderly, and those in between. Because of ivermectin's widespread success, the two scientists who discovered it were [awarded the Nobel Prize](#) in 2015. "Forty percent of drugs used in hospitals are used off-label. Dr. [Peter] McCullough uses off-label drugs every single day in his career. That's fine if you're treating heart disease, but suddenly, if it's Coronavirus? The FDA, the CDC, the NIH do not want you to use an off-label drug because it would compete with Big Pharma," according to FLCCC co-founder Dr. Paul Marik.

Justice Brian Hagedorn asked Attorney Mueller if she is relying on the Right to Try. She replied that they were related to the extent that it reveals the Legislature's Intent to prolong and protect life, but it does not directly apply here. (It does not apply to an approved, albeit off-label drug).

## **Personal Note From Attorney Mueller**

One of the points of the case that the Aurora Attorney and some of the justices drilled down on was the credibility of the outside doctor (who was to administer the ivermectin) asking a plethora of quick



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questions in succession that appeared to be the weak point of the case. As soon as Mueller was done answering the exact questions, she said, “Your Honor —,” so she could highlight and literally show the court the physical order that proved the doctor she was just questioned about was no longer the prescription-writing doctor, but she immediately was asked another question in a different vein that she needed to answer.

So in my interview with Attorney Karen Mueller on January 18th, she said she would like our readers to know the following.

The consent order for the ivermectin from the hospital took away all of the arguments that two of the Justices were making about the original doctor, because *he was no longer involved*. The [Waukesha] Circuit Court modified the Ivermectin order and then both parties agreed to it. Aurora had *already started credentialing the new doctor*. There was a new doctor agreed to, in order to examine the patient, have access to his medical records, and determine and adjust the Ivermectin dosage that was needed. It [would have] changed everything they had said [in the Supreme Court] about the original doctor [who was changed during the original trial court timeframe], who was out of the picture when the Appeals Court came in.

The proposed order that we were waiting for the judge to sign is in evidence. So they did have it, even though it was never signed because the Appellate Court stayed it.

Towards the end of Mueller’s five-minute rebuttal, the following exchange took place.

Justice Hagedorn: “You did not argue the Right to Try Statute before us at all, it wasn’t one of the three grounds that you raised, you’re not relying on that, correct?”

Mueller: “The Right to Try matters regarding the spirit, and that comes down to Legislative Intent, primarily of 155.30 (2), because we’re talking about the Legislature wanting to make sure that patients had the ability to ask for and to receive treatment, that may not be preferred by the hospitals, if it was necessary —”

Justice Karofsky: “How do we know that from the language in the Statute?...We’re supposed to read the Statute, then we’re supposed to read the words in the Statute, and interpret the Statute based on the words in the Statute, and you’re asking us take a leap from what the words in the Statute say to what you are telling us the Intent of the Legislature was.”

Mueller: “The Appeals Court *did* make that leap and they made a determination that those words were only informative and instructive, when in fact they were directly part of the Legislative Intent. That first page of the Statutory form is *required*, when any hospital or any other healthcare agency hands them out to people, so that The People, the people of Wisconsin know what they can expect if they are ever in a situation where they need a healthcare agent to make the decisions for them, and this Statute informs them they have those rights. And —”

Justice Dallet: “Has this argument been successful in any Appellate Court in the Country?”

Mueller: “It has not been. And what I would say to that, Your Honor, respectfully, is that we don’t live in Texas. Or Pennsylvania. Or any other state. This is a Statute that was formed by the Legislature in Wisconsin, and the people of Wisconsin would ask that you clarify what





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the meaning is here so that they understand if they have any ability to ask for care when they go to the Hospital.”

The People of Wisconsin say Amen!

Aurora’s Attorney Franckowiak and some of the Justices were more concerned that the statute wasn’t specifically cited by the original circuit (trial) court, rather than discussing the weightier matter of whether the rights in the WI Healthcare Statute of POA were being upheld. Because Allen Gahl was Power of Attorney, it gave him *standing* to knock on the door of the court, and the judge had recognized that in the first trial, the circuit court.

### **Basis in the Law**

Exchanges between the Hospital’s Attorney Franckowiak and Justice Rebecca Bradley several minutes before the end of the court case are *extraordinary*.

Justice Rebecca Bradley asked Attorney Franckowiak:

Counsel, is there anything in the law that requires the Trial Court Judge to identify the particular law, because in the transcript, and I’m going to quote from it, the Circuit Court says, ‘This Court has a significant respect for an individual’s right to choose, and choose their treatment.’ And of course this is expressed [in] *Martins v Richards*, which was cited by the Dissent...that case identified the right for them to make their own healthcare decisions for patients, the right to informed consent, which means that physicians must disclose what a reasonable person in the patient’s position would want to know, and finally, the right to request and receive medically viable alternative treatments and have that choice respected by her or his doctor. Of course, there was a great debate among the experts presented to the Circuit Court in this case about whether the proposed treatment was medically viable, but there was testimony to the effect that the treatment was medically viable.

So is it enough that the Circuit Court said “This Court has a significant respect for an individual’s right to choose, and choose their treatment, which has a basis in the Law?”

Franckowiak responded by saying:

Your Honor, I would note that my time is up.

He seemed relieved he wouldn’t have to answer and then flustered when he was asked to answer the question. He said:

In this particular case, it would be the contention of the hospital that the Trial Court erroneously exercised its discretion to the extent that it did consider any of the affidavits submitted by Mr. \_\_\_\_ [microphone fails here]. Not properly submitted, they did not have any patient-specific documentation in them, therefore reliance upon those affidavits to establish that this [ivermectin] was a potentially medically viable treatment, to which there *was* a reasonable choice [note: the “reasonable choice” offered by the hospital was the ventilator or hospice], would not be an appropriate exercise of discretion by the Trial Court in the first instance.

**“Status Quo”**

Justice Rebecca Bradley asked Aurora’s Attorney Franckowiak:

Since you’re talking about the status quo, it’s important to define what is the status quo? I’m seeing two different perspectives from the parties...the doctors at the hospital basically said, “There’s nothing more we can do, we’ll keep him on a ventilator and provide palliative care to keep him comfortable.” There was nothing offered to him, the other side is saying, “Look he has a right to try,” that’s a law that was invoked by the Appellate Court Dissent. So what is the status quo from your perspective?

Franckowiak replied:

We would take the position that the status quo at the time of the petition was that Mr. Zingsheim was being treated by a team of four different specialties including critical care, including pulmonary medicine, 24 hrs per day, supported by the nursing staff, under a protocol that the treatment team had decided, based upon the evidence, and based upon the medical condition and his current clinical condition. They were treating under that treatment plan, and that treatment plan did not include ivermectin. That was the status quo at the time, so when the judge actually made his decision in this case and initially granted the injunction, he was actually not *preserving* the status quo, he was actually, *actively upsetting* the status quo.... The treatment team was now being required to administer ivermectin, and a change in the treatment plan —

Justice Rebecca Bradley interjected:

That’s disrupting the status quo for *Aurora*, but it’s not disrupting the status quo for *Mr. Zingsheim*, who is trying to *live*, right? The status quo for him was he was alive, and they were trying to keep him alive.

Sweet Nectar from the Throne Room of Heaven. Other things recede into the background, including whether the trial court cited everything that led to its decisions, or whether the efficacy of ivermectin is even an issue here. It all fades, as the essence of the spirit of our Founding Fathers’ Declaration whispers through the centuries and permeates the courtroom that Life, Liberty, and the Pursuit of Happiness must be defended. All of these God-given, constitutionally protected rights are on the line in the Supreme Court of Wisconsin, not just for John Zingsheim, but for every Wisconsinite. I would ask you to join me in prayer that the Wisconsin Supreme Court justices decide to uphold our liberties, because if we can’t make our own healthcare decisions, and if we can’t fight for those we love, then individual liberty is swallowed alive into the tomb of the collective.

***Dominique Uhl*** is a wife and mother who is passionate her children not only grow up free, but that her future descendants are born free. She is dedicated to preserving our Constitution & rights as the Founders intended. In a culture teeming with lies and danger, she writes to share truth, preserve freedom, and save lives.



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