

My name is Brian C. Procter MD, and I have been a Board-Certified Family Physician in McKinney, Texas for 20 years. It is my understanding that some are trying to get to the truth about Covid-19, and there is a lot of misleading information out there. If patients get sick enough to be admitted to the hospital, effective treatment is limited, and the complication rate is high. But what happens when we treat patients 3-6 weeks earlier, when they first develop symptoms? I have been treating COVID-19 patients in the outpatient trenches for over 3 months now. I am using Hydroxychloroquine, Azithromycin, Losartan, Aspirin, and Zinc, all available for less than \$50 cash from most pharmacies, saving individual and/or insurance company healthcare dollars best spent elsewhere. We have identified, diagnosed, and successfully treated these patients at a relatively early point in the course of the disease. It is these statistics that are amazing. I have treated over **100** patients without a single ER visit or need for hospitalization with advanced care. I know one colleague who has treated over **400** patients with the same success. Although there have been no unexpected side effects, including no cardiovascular problems related to Hydroxychloroquine, one should remember it is possible for any drug to have undesirable side effects as evidenced by various TV commercials. We are two community docs using EARLY AGGRESSIVE OUTPATIENT TREATMENT to handle the disease with a 100% success rate (ZERO Admissions) and no cardiovascular side effects using meds that have been around for decades.

Therefore, if we can treat patients EARLY for \$50, we seem to be successful at preventing hospitalizations, ICUs, and death not to mention saving 10's of thousands of dollars per sick patient. My local ICU doctors have pleaded with me to keep doing what I am doing. The answer seems to be EARLY AGGRESSIVE OUTPATIENT TREATMENT and NOT contact tracing, quarantine (destroys millions of lives financially, physically, and emotionally), wearing masks (may be beneficial indoors or in large crowds, but it is not a practical long term solution for the general public, and, to date, there are no studies to support continuous mask use by the general public), a vaccine (we won't have it until next year—SARS and MERS died out so this likely will too), social distancing (which won't sustain our GDP with 25% or even 75% occupancy), testing (ALL tests have a high false negative rate up of at least 20%), or watchful waiting (a tactic that has contributed to over 100,000 deaths). We could also place all nursing home patients and health care personnel on HCQ prophylaxis for 180 days on a voluntary basis of course. This could theoretically prevent thousands of needless hospitalizations and deaths and the spread of the virus.

In conclusion, if we treat COVID-19 like similar flus, pneumonia, hypertension, diabetes, or even a simple sinus infection using early, aggressive therapy that has shown a high rate of success while costing much less than a hospital stay, then we, as a nation, would be far better off rather than be stymied by a constant barrage of numbers that become meaningless because of the confusion of surrounding data collection. Rather than using information as a political tool, the American people should be made aware of successful, alternative options, allowing them to choose what course to follow (right to try). This information on a course of treatment that thus far has shown to be safe and effective when used early and with patients eligible for outpatient care, would help to erase some of the fear that has been generated by the media with overemphasis on hospitalization and possible severe complications and death. Knowing treatment is readily available from one's own family doctor needs to be part of the model for this and future similar pandemics...and there will be more!

Twenty-Three years ago, I took the Hippocratic Oath. It is posted in my lobby. It is my creed and promise to my patients. The FDA, CDC, NIH, and the WHO are not mentioned in this Oath anywhere. This IS the REAL story. This crisis has become political in the way it has been handled by many states, and this crisis should be about saving the lives of people all over the world and not about the endless struggle between two political parties. My heart goes out to the millions of people who have suffered in the wake of this pandemic. If all PCPs would use this regimen as one of the options they can offer patients early on, the brunt of this pandemic could end in a few weeks, acquired immunity would continue to occur at a more normal rate, and we won't be faced with the problems related to when and if a vaccine is developed before the next round of the virus surfaces. While I fully realize this data is far from representing a randomized double-blinded controlled clinical trial, we need to go to war with what we have. We need a grass root movement to cure this pandemic. Please circulate this to everyone you know: social media, politicians, doctors, friends, and family. With hope, faith, love, dedication, and perseverance, together we can end this pandemic without destroying any more lives. Please help us end this crisis! Serious inquirers about details and treatment can contact us at doctorcovid19@yahoo.com. BELIEVE, and we can get our lives and country back fast!!

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