

Are COVID-19 Death Certificates Being Manipulated? A Conversation with Dr. Annie Bukacek

By [Dr. Annie Bukacek](#) and [John Shuck](#)
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Dr. Annie Bukacek of Kalispell, Montana speaks with me about COVID19 death certificates.

How do doctors decide whether or not to attribute a death to COVID19 and are the COVID19 deaths being exaggerated?

We also discuss what care is not happening during this lockdown and we talk about whether or not the lockdown is good for our health as individuals and as a nation.

Listen to the interview below.

Full transcript of the interview

John Shuck [00:00:27] Hello, I'm John Shuck, my web site is www.johnshuck.com. I am on the phone with Dr. Annie Bukacek. She makes her residence in Kalispell, Montana, and she has made a video presentation actually that she gave at her church. I believe a few days ago. And we want to talk about that, about what is this testing and how these numbers come to be. And we have a lot of things that I wish to discuss with Dr. Bukacek. Dr. Bukacek. Welcome to my program, Progressive Spirit.

Dr. Annie Bukacek [00:01:08] Well, thank you. I appreciate being on your show and very grateful for the opportunity.

John Shuck [00:01:12] I really enjoyed the presentation that you made. Your pastor, Pastor Chuck Baldwin introduced you and you gave a presentation that was quite fascinating. And I believe it's had a number of views, quite a few in the hundreds of thousands, I believe about your understanding of how these numbers are being attributed in regarding to COVID deaths. And so, first of all, I'd just like to ask you to introduce yourself to us. Tell me, what kind of practice you do, how long you've been a medical doctor and so forth?

Dr. Annie Bukacek [00:01:52] OK. So I'm a board certified internal medicine physician in Kalispell, Montana, and I'm also a council member and a fellow of the American College of Physicians Montana chapter. I'm a member of the Montana Medical Association legislative panel and also the president of Montana Pro-Life Coalitions since 2008. And think of what else. And I'm a part of the Montana Shooting Sports Association. I'm on the board of directors of that.

John Shuck [00:02:22] Well, what did you find in regards to doctors writing on their death

certificates COVID 19? Are deaths attributed to COVID 19, really from COVID 19?

Dr. Annie Bukacek [00:02:37] And that's the big question. Inquiring minds want to know the answer to that because it's significant because they're using that mortality data to basically lock down our entire nation so that the alleged very high risk and all these people are dying from it. They're using that to shut down the nation. So what I talk about—and we've at this point—as of as of five days after I posted it last, I spoke about it a week ago on Sunday, and then on Monday night it was posted. And within five days it had over a million and a half views.

John Shuck [00:03:11] A million and a half.

Dr. Annie Bukacek [00:03:13] Yeah, over a million and a half. And it's been on Zero Hedge and it's been on Infowars. It's been on a lot. And people are picking up on it, taking splices of it, splicing it with Dr. Scott Jensen's stuff. And so it's been used quite a bit. So it's over a million and a half in five days. And I think the reason for that, it's not because I did such a brilliant job, but I laid the information out very well. It's very easy to understand. I gave a lot of examples. And I think the biggest reason why this has gotten so many hits is because people are hungry to know the truth for one. And I think many, if not most people, they have this feeling in their gut. I call it the Holy Spirit, but that, you know, other people would say it's like a gut feeling that the stylish popular narrative about how scary this virus is going to kill us all. They just have a feeling inside them that that is not true. It's not ringing true to them. They're looking at their neighbors. They're saying, you know, they're not seeing people, you know, drop dead from it. And so people just aren't buying it. So I think the reason this is popular is that it's coming from a physician and I'm a credentialed physician. I'm involved in a lot of things that have a long resume. And this is a doctor that's saying things that they already have a hunch about. Some people had a hunch in their gut about these death statistics, like how did they know these people were really dying from that? They had that feeling inside of them. But because they don't have an M.D. or a Ph. D, or they don't have the confidence or the ability to stand up against the popular narrative. They just kept it to themselves. And then here is a person that has credentials, who is speaking to them about what the CDC itself says about death certificates, they're saying, "I was right all along. I knew it. I knew something wasn't right." And so that's why I think it has taken off.

John Shuck [00:05:02] And so tell me about you, about yourself, because I want to get into some of the meat of this. But beforehand, what started making you suspicious? When did you first start thinking, hey, something's not right here?

Dr. Annie Bukacek [00:05:14] Well, I was suspicious from the start because I've followed all these so-called pandemics. You know, we had H1N1 back in 2008, 2009, we're all going to die. Ended up passing. It didn't have that high of a mortality and ended up passing. But then they forced it into the vaccines the next year. So that got my attention. And then the next one after that was Ebola. And so, you know, H1N1 didn't sound very scary. So they had to come up with a scary sounding name. Ebola. And there was never a single documented case of Ebola in the United States. But they had everybody running around with gloves on and HAZMAT suits. So I look at the H1N1 hype. I look at the Ebola hype. And then the next one was the Zika virus, where they said, you know, all of our babies are going to be born with, you know, golf-ball sized heads and all this kind of stuff. I mean, it was not a single birth defect attributed to it in the United States, but that was the next scare. And then there was SARS and MERS. In SARS there were eight cases in the United States. MERS, there were two

cases in the United States. So my background and the reason why I'm suspicious right from the start is that I'm following the history of the pandemics and how they've made a big deal out of nothing. And the outcome of it was usually, you know, either in this country or in other countries, you know, the innocent people in Africa or the Caribbean that are being experimented on with vaccines. So I watched all that. I already was aware of that history. And then they come up with this and at first, you know, the American College of Physicians, which I'm a fellow and a board member, a council member. And the MMA, you know, they were all saying, you know, basically it's probably going to stay in China. Not a big deal. So I gave a talk on, you know, what they're recommending. Just wash your hands, wash them 20 seconds. You know, that kind of the general standard things that we really should be following every flu season. Right. And then the numbers started inflating beyond anyone's comprehension, I shouldn't say, inflating, start being talked about—all the people that are going to die. And I kept in mind the previous pandemics and how they blew everything way out of proportion. And so I'm looking at this and I'm thinking, wait a minute. And then and then the films, the videos of citizen journalists are coming out that are showing that— you might be familiar with that— March 25th, it was CBC. It broadcasted what they said was a New York City hospital.

John Shuck [00:07:44] Yes, Elmhurst in Queens.

Dr. Annie Bukacek [00:07:45] They showed the emergency room, the ICU, where they running all round. It actually had been aired as in a hospital in Italy three days prior. And so they took a hospital in Italy and made it look like that was a New York City hospital.

John Shuck [00:07:57] So they were there. CBS and ABC, one of the two who copied the other.

Dr. Annie Bukacek [00:08:01] It was CBC. And then they apologized. They said it was an editing error, but they had scared people so badly with that that their little apology later didn't mean anything. And then they're showing all these, you know, mass graves that they're putting coffins in. I'm sorry. We don't deal with our dead that way in this country. That just doesn't happen. So none of this is really ringing true. And then because of my being a doctor who has filled out death certificates for over 30 years, I know how much leeway, how much power doctors have over the death certificates. And what's put on there is the cause of death, because the vast majority of time and I go into it and I talk quite a bit. But, you know, the vast majority time, we really don't know what people die from. It's our best guesstimate. I mean, only God really knows. And if people die in the hospital, we have a lot of data. You know, we have the history and the physical. We have laboratory data, radiologic data. We have all of that to make a pretty good guesstimate and certain things. We could be pretty sure that's what the person died from. But even the hospital, sometimes we don't know even when their autopsy is done. Sometimes we don't know. And then, you know, people that die peacefully in their sleep at home or in a nursing home or something like that. We were always making our best guesstimate. So that's before COVID 19 enters the scene. It's already a tremendous amount of leeway, a tremendous amount of what I would say inaccurate information, is being put into the databank. You know, I see somebody, I think that my best guess is they died from this. I put that on the death certificate. It goes unquestioned and it goes into a national databank. That's a problem. But it's not as big of a deal if it's only affecting actuarial data that they use for insurance companies. I mean, that could still be a problem, you know. But it's nothing like the big deal that it is if death certificates are inaccurate and they're using that information to close down

the world. That's a whole different story. So if a cause of death was inaccurate before, it didn't have that big of an impact. And we're just doing the best we can. We're not trying to falsify anything. We're just giving it our best estimate. You know, maybe some doctors falsify it for whatever reason. But generally speaking, it's probably our best guess. But now there's a huge amount of financial incentive to say that a patient has COVID 19.

John Shuck [00:10:21] Financial incentives. Talk about that.

Dr. Annie Bukacek [00:10:24] Well, there's an increased reimbursement. Doctor Scott Jensen, who is a state senator in Minnesota. You've probably seen that. And he talked about how just having the diagnosis of COVID 19, you know, when the person passes away or they're discharged and they have COVID 19 as a diagnosis, they get an extra \$13,000. The hospital does. If a patient with COVID 19 gets put on a ventilator, they get an extra thirty-nine thousand. Scott Jensen talks about that. I don't have that data myself, but that's you know, that's being talked about by him. And, you know, other people have that data and their sharing and it looks like it's probably true. So they get more reimbursement. And the other thing that has to do with your financial incentives for hospitals like our little hospital, Kalispell, Montana, for the whole region, is about a hundred thousand people. Okay, that's not very big. And our hospital got nine million dollars out of the stimulus. And our hospital is virtually empty. The emergency room is empty. The ICU is operating at about half capacity. They're not doing any elective surgeries. They're not really taking care of people that are really, really sick with something and get a heart attack or something. And so they're getting this nine million dollars for what? You know, it's not justified, but that's one of the financial incentives. And since, you know, I have my own private practice, but there are very few of us here that have that. The hospital owns almost all the medical practices. So there's going to be a lot of pressure on those doctors to say this person had COVID 19. So there's pressure from the CDC to do that as well.

John Shuck [00:12:02] Let's talk about the CDC pressure. So nobody just now is running into the Kalispell, Montana hospital demanding a test for COVID?

Dr. Annie Bukacek [00:12:12] There are people demanding tests because people are scared out of their wits. So there are people that want to get tested, but we don't have the, you know, the drive-by testing like they do in some of these places. We don't have that available. In fact, it's hard to get tested for COVID 19 here because you have to go by their algorithm, you have to have been in contact with somebody with COVID 19, either they've been tested and we're waiting for the result or there or they confirm positive or you have to have been in Iran, Japan, Korea or China. So it's hard to get testing here. And so some people say because we're not testing everybody, that that means there's actually more of the disease out there. But we're not seeing people dropping dead. I mean, if people have no symptoms or minimal symptoms and they don't have those risk factors, it's not like they're not getting over it. They're getting over it. So I suspect if we tested more, people would actually show is that the vast majority, that it's already greater than 80 percent of people that test positive for COVID 19 have little or no symptoms. So that's that's even just testing a skewed population. So if they tested everybody, I think it would probably be in a much, much higher rate of asymptomatic or minimally symptomatic people that tested positive for COVID 19. But they're not testing people.

John Shuck [00:13:33] My guest, if you're just joining us, is Dr. Annie Bukacek from Kalispell, Montana. She's a physician. She's questioning the numbers. She had a video that has over a

million and a half hits in terms of wondering about these death certificates. And so let's go further on to that. The CDC, what is their role in these death certificates for COVID 19?

Dr. Annie Bukacek [00:13:59] Well, one of the things that I that I read on my video and I'm going to read it here so I give your audience the very exact information, the quotes. So the National Vital Statistics Symptom Memo went out March 24th, 2020. And here's the language and this is a quote and this is out of the CDC's COVID 19 tally, but it was the National Vital Statistics System Memo. And it says and this is a quote, it says, "The rules for coding and selection of the underlying cause of death are expected to result in COVID 19 being the underlying cause more often than not." End of quote. So that's strange wording. It's a strange way. It's almost like we're expecting more. Science requires reproducibility. You can make a hypothesis and say you think maybe it's going to have a lot of cases, but you don't make a statement without any kind of reproducibility that says we expect this. So that's pretty suspicious right there, I think.

John Shuck [00:15:04] Uh-Huh. And they're also for, for example, in Italy. And I understood that many of the cases there's this distinction in terms of language that people dying with COVID 19 as opposed to those from COVID 19.

Dr. Annie Bukacek [00:15:17] That's correct. And here's the quote that goes along with exactly what you're saying. And that's, I think, the language that that people should be using and should be really grasping that just because somebody has a COVID positive test, it doesn't mean that they have the disease. It just means that they tested positive for it. And if somebody dies and they had a test that was positive for COVID 19, it doesn't mean they died from COVID 19. That means it suggests that they died with it. So your language is exactly, I think, the way people should be talking about it. The example that I use in my talk is somebody that comes in with, you know, pneumococcal sepsis. Pneumococcus is a bacteria and if it grew out in the sputum, in the blood, then the most reasonable thing to say would be that that patient died from pneumococcal sepsis if they pass away. But if they also are tested for COVID 19 and they happen to show up positive for COVID 19, that's going to go on the death certificate, even though that's not that's not really what the immediate cause of death was. Because if you think about it, if a COVID 19 positive person can have no symptoms at all or have mild symptoms, then just testing that way in a hospital doesn't mean you died from it or you're sick from it.

John Shuck [00:16:37] So what do you think? Bottom line on this. How many people really have died from COVID 19? Is there any way to know?

Dr. Annie Bukacek [00:16:45] There's no way to know. Only God knows. I have one more quote that I think is even more laden with meaning than the last one. And this is Steven Schwartz. He's a Ph. D, National Director of the Division of Vital Statistics. And there was a question on this sheet. It's called the COVID 19 Alert. And the question on it is, "Should COVID 19 be reported on the death certificate only with a confirmed test?" And I think somebody like you or me and your listeners, we should say, yeah, that it...

John Shuck [00:17:13] Makes sense.

Dr. Annie Bukacek [00:17:14] Yeah. Kind of intuitively or it's self-evident, right? If you're going to say it's COVID 19, there should be a confirmed test. So that's how you would answer it. This is how this is how he answers it. This is really important. It says, "COVID 19

should be reported on the death certificate for all decedents where the disease caused or is assumed to have caused or contributed to death. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory, etc.” So basically they’re saying it doesn’t have to test positive and the doctors just have to use their best judgment as to whether or not that person died of COVID 19. We already had a lot of leeway in power as far as what goes on the death certificate. And they’re actually encouraging them a certain way. And Scott Jensen, the physician from Minnesota who’s so upset about this, he says that he got a seven-page letter from the CDC guiding him how to fill out death certificates and he’s been a physician for 35 years. So a little more than I have. And he has never gotten anything from the CDC to guide him about how to fill out death certificates. This is the first time that he’s ever had that happen. And they encouraged him in the same way that I’m saying this is. So this is unprecedented.

John Shuck [00:18:41] So if you got the sniffles, You got COVID.

Dr. Annie Bukacek [00:18:44] Pardon me?

John Shuck [00:18:44] It could be that simple, if you got the sniffles, you got a sore throat, you got COVID.

Dr. Annie Bukacek [00:18:51] That’s right. That’s exactly right. And if they got the sniffles, we don’t even know if it’s really COVID 19. It could easily be another virus. And so we really don’t know. You know, I guess I give the example when I’m talking to people about this, of course, like staph aureus. You know, staph is all around us. People can have it in their nostrils as commonly on the skin. Things like the common cold virus or the common wart virus or toenail fungus. I mean, those kinds of things are really common and all around us. They’re ubiquitous. And so if you were to hospitalize somebody, again, we can use the pneumococcal sepsis case, they were hospitalized for that, but you checked their nostrils for staff. You know, chances are that staph could show up on a lot of these people, but that isn’t anything whatsoever because it’s because it’s common. So there’s COVID 19 virus might be as common as is the common wart virus. We don’t really know. And then that gets tagged on there. The way that the CDC is promoting and telling doctors how to fill it out, and then the financial incentive, most doctors work for the hospital. So the financial incentive to fill it out that way, the CDC is telling you to fill it out that way. I am fully confident that it’s being overestimated. There’s no doubt in my mind, just look at that mechanism.

John Shuck [00:20:16] Just a set up for corruption, isn’t it?

Dr. Annie Bukacek [00:20:18] Absolute, absolute setup.

John Shuck [00:20:20] So, OK. My guest, by the way, if you are just joining us, Annie Bukacek from Kalispell, Montana, just made a video, just a report really that’s got over a million and a half hits. What’s the title of that video? To have a title of it if people wanted to search that.

Dr. Annie Bukacek [00:20:37] Oh, golly. Maybe, maybe just death certificates is what I call it. And I think Pastor Baldwin said, “Dr. Bukacek blows the whistle on the CDC about death certificates.” I think that might be what he called it.

John Shuck [00:20:50] All right. You could search that and find that. Bukacek. B-U-K-A-C- E-K. Correct?

Dr. Annie Bukacek [00:20:57] Correct. And if any of your friends want if your listeners want a friend, me, because I'm putting something out every day on my Facebook about the COVID 19.

John Shuck [00:21:06] Excellent Facebook page, you just ask questions and you've got some great responses there. I've really appreciated looking at that. OK. So I don't know anything. I took a biology course in high school. Right? This is just all way, way over my head. OK? And I think there's something to that. First of all. But no expertise. I don't even know anything really about viruses. And so do we automatically trust experts speaking through these mainstream media? Is that wise? That's one question I have to you. But the other question is just really what is the coronavirus first, and what is COVID 19? What are we dealing with?

Dr. Annie Bukacek [00:21:47] The coronavirus, various strains of it were identified back in the in the 1960s. And it's thought that the common cold is caused by a coronavirus 25 to 35 percent of the time. So it's been it's been around. It's fairly ubiquitous. You know, people get sick on various strains of coronavirus. So supposedly, you know, this COVID nineteen is another strain of it. So that's our best. Our best.

John Shuck [00:22:18] Supposedly, you don't sound too confident that that is the case.

Dr. Annie Bukacek [00:22:22] Well, it could be I don't think we're ever going to even know because there isn't going to be—I don't think there's going to be quality research to deny it. So it's really hard to say. I think one of the important things is I just was looking this up with a brother and we were at church together that we were looking it up. It's like in this flu season so far—2020 in the United States. Sixty-three thousand people have passed away allegedly from influenza. And that's pretty normal for an influenza season. I mean, it's horrible. That's a lot of deaths, but that's usual. And the COVID 19 is estimated at being 22,000, 23,000. So even, even with the bloated numbers that are not accurate, it's still a third of the deaths of influenza. We've had, you know, twelve to sixty five thousand a year in the United States died from influenza. And we've never locked down the country over it. So that's another piece of information that people need to understand that we never did this before. Should we shut down the nation six months out of the year during the flu season? You know, it just doesn't—the logic doesn't follow.

John Shuck [00:23:34] So of the 63,000 flu deaths, they could be, some of those could be, or was this last year's numbers?

Dr. Annie Bukacek [00:23:42] This year.

John Shuck [00:23:44] This year. Those are this year's numbers. So some of those could be COVID 19, right? This just could be the flu.

Dr. Annie Bukacek [00:23:50] Yeah, some of the COVID 19 could be the flu. If it was, if the flu cases were COVID 19, because of what we just talked about, you can be pretty sure they'd call it COVID19. So the influenza numbers might be deflated. The COVID 19 numbers certainly are inflated. But even if you take those numbers at face value, which I don't believe, the COVID 19, even if you take it at face value, it's still roughly a third of the deaths of influenza. And so then the next narrative with it is that, "Oh but the next two months, it's going to continue to kill people." So that's the next narrative. "So it's worse than the flu because it lasts longer." Where did they get this? How do they—where do they pull that, you know, from?

John Shuck [00:24:34] Yeah. Well, I would ask you as a medical doctor, because I don't know. I just have to trust them blindly.

Dr. Annie Bukacek [00:24:42] I think they're pulling it out of their hat. They're just coming up with it.

John Shuck [00:24:47] You had mentioned in your in the presentation that you gave a question that you asked on Facebook, because I get this all the time, people are telling me, well, I've got, you know, my cousin died of coronavirus or they're all just dying in New York. You should go there and see what's happening. And my question is, as you asked that question yourself, you asked if anybody knew anybody and you kind of evaluated those responses, could you summarize that discussion?

Dr. Annie Bukacek [00:25:16] Sure, I'd be happy to. So I asked a question, like you said, I ask anybody that you know personally. So the reason for me asking it in that way. If somebody knows somebody personally they might have an idea of their underlying health. Are they a healthy person? Then they might have an idea of the case. They might be following the case in the hospital if it's somebody they personally know. And so I asked it that way specifically because we're more likely to get accurate [responses]. They also required in answer to my question was, is it somebody that had no preexisting conditions and was hospitalized, you know, got severely ill from COVID 19 with no preexisting conditions, so got severely ill or died from it. And so I got about three hundred and fifty comments. And of those, the vast majority of people, I didn't add them up, but the vast majority of people said no, they'd never had. They don't know anybody personally that has it. And then there were some people that said yes. And then when I asked them to give me more details and I told them specifically, you know, if you don't tell me the name or where the person's from, then you're not breaching any kind of confidentiality. You give me some more details. And most people that just said yes, or yeah, or yay or whatever, you know, they'd been give me any details. And there were three or four that gave me details that would qualify for answering my question. So three or four and I have three thousand plus friends and it was it was three or four. And if you take them, that they are telling the truth, and I have no reason to think they're not, they're answering me to the best of their knowledge. And so even if they knew the person really well, and they knew that they had no preexisting conditions, and if they knew the person tested COVID 19, positive and they were really sick or they died, that would answer the question properly. But that's to the best of their knowledge. So, again, we go back to the language that you used, which is the language that I like to use. Did this person die from COVID 19? Were they put on a ventilator because of COVID 19, or did they just have it? Did they just test positive? So that's the question that those three or four. So it wasn't very many people that answered a legitimate yes anyway. And then of those, they're probably answering to the best of their knowledge.

Dr. Annie Bukacek [00:27:34] And most people it was like a friend of a friend of a friend. And then that friend's nephew in New York. Well, that doesn't mean anything to me, because a lot of people, you know, they kind of get into being COVID 19 positive, you know, a melodrama about it or they might just be making it up. So I wanted to have some idea of the validity of it.

John Shuck [00:27:55] Well, I certainly know a whole lot more celebrities who have it than real people. I mean, if I'm looking around today where I live here in in Portland, I mean, I look around. I wouldn't know that there was any pandemic except for the news telling me.

Dr. Annie Bukacek [00:28:14] There you go. There you go. And the ones that tested Corona positive, I think Tom Hanks, I mean, I don't even know for sure. It was COVID 19.. I don't watch the news. But, you know, you get these little flashes when you're on the Internet and it said it's a coronavirus and that could be the coronavirus strain that causes a cold. So that's the other problem. I told you about the test kits. The first round of test kits from the CDC were...

John Shuck [00:28:38] Tell me that again. How is this COVID 19 tested?

Dr. Annie Bukacek [00:28:44] It's a PCR test which looks at genetic material. It isn't specific for a virus, it's specific for a type of reaction. And I don't consider myself expert on that. And I would I would recommend you refer people to that Dr. Kaufmann, that you and I talked about...

John Shuck [00:29:03] Dr. Andrew Kaufman.

Dr. Annie Bukacek [00:29:04] Correct. He's studied it. And everything he says about it rings true. But the thing that I can say about PCR testing, we use it to test a lot of things. You know, if somebody is having diarrhea and we're trying to find out bacteria in the stool, we use a PCR test. So these have been used for years. This one is specific for that genetic material. And it's a very useful test because it usually has a pretty rapid turnaround. So you don't have to wait as long as we used to have to wait for cultures. And so it's been around a long time. Polymerase Chain Reaction, but it tests genetic material. So it's not though they somehow isolated a virus. I mean, you can isolate bacteria because bacteria is alive. Viruses are not alive. So you can't isolate it and say, yep, yep, that's COVID 19. So it's just some things that are suggestive of it. And so that's a problem. And then the other problem is with testing that we consider, you know, at least the older doctors that have been practicing for the previous time where they used to have standards, want for a test to be considered a good quality test, if it's something new, a new type of testing, then they compare it to the gold standard and they try to see is it as good as the gold standard? Because we have sensitivity, we have specificity of tests and we compare it to a gold standard. And in this case, everything was such a big emergency that there was no pressure to develop standards. There are there are no standards. There's no gold standard test. We just know the first round was flawed. And now we're assuming, you know, the second and third and fourth rounds are accurate. And I don't think there's a good basis for that. That's a whole another topic. And again, I would refer to Dr. Kaufmann for that.

John Shuck [00:30:51] So if somebody came into your hospital and Kalispell and you thought to test them for COVID 19, you really wouldn't be able to, would you?

Dr. Annie Bukacek [00:31:02] I do outpatient, I don't do inpatient. We have hospitalists that do inpatient and so I only do outpatient and it was difficult. I haven't been able to get any of my patients tested. Because you have to have the criteria-either they traveled to an endemic area, you know, Korea, China, Iran-or they had contact with somebody that you that we know is COVID positive or their test is pending, they think they have it. So none of my patients have qualified. I had one patient that I tried to get it for because my patients are very scared. People are frightened of this. And so I tried to get it for her. He she didn't have the criteria, but she had just come back from Texas on a plane full of people. And, you know, and she has a underlying asthma. And she was sick. She had fever and cough. And they wouldn't do it. If somebody's sick enough to be in the hospital and this is what I talk

about it in my death certificate talk, is that, in most cases, I suspect I can't say for sure, but I suspect for most people, especially if they go in with something respiratory, that they probably get COVID 19 testing. And I did have I did have one patient. This patient did not have contact in any of those endemic countries, but she had been in Mexico the month prior, not two weeks prior, but the month prior. And so they kind of fudged a little bit and they tested her for COVID 19. And I think it's appropriate because she went in basically with respiratory failure. She was very, very sick. And I think it was totally appropriate to check her. And she came up to be COVID 19 negative. Now, this is a patient that I've known for many years, and she gets hospitalized for this type of problem, usually two to three times a year. And sometimes they find the organism and sometimes they don't. So if she had gone in and they in all they found was COVID 19, even in that case, does it mean that it was? She's doing fine. She went home after three days anyway. So she was very sick at the time. She didn't have to go on a ventilator, but she was you know, she was quite sick, like she usually is when she goes in and she was COVID negative. But even if she had been COVID positive does that necessarily mean, even somebody really sick like that, does it necessarily mean that they were sick from COVID 19? And I would say no. This woman has been in two or three times in the last year, and they sometimes they find her organism, sometimes not. Sometimes it's just her COPD that's gotten worse. You know, maybe the air quality isn't as good or something like that. And so any of those times that she was in, if they had had this COVID 19 testing, maybe sometimes she'd come up positive. But that does not mean that that's what's causing her problem.

Dr. Annie Bukacek [00:33:39] My guest is Dr. Annie Bukacek. She's from Kalispell, Montana. She's recently put together a speech regarding death certificates that's had over a million and a half, I believe a million and a half. I think you said views. So it's touching a nerve and kind of touching that feeling that we have that something isn't quite right. And Dr. Bukacek is bravely among a number of doctors being able to speak out against what this media is constantly telling us. I want to ask you a couple of other questions, but I want to make sure that we've covered your speech regarding the death certificate. Is there anything that I didn't ask that is important to say?

Dr. Annie Bukacek [00:34:25] I don't think so, because I think the most important thing is, again, that language that you use, they test positive and they're sick doesn't mean that they're sick from it. They test positive and they pass away. It doesn't mean they died from it. So I think that's the most important thing. And then the quotes that I gave you from the CDC and what they're telling doctors how to fill out death certificates, encouraging them to call it COVID 19, and then the increased reimbursement for coding it as 19 increased reimbursement for hospitals and most doctors work for the hospital.

John Shuck [00:35:01] All right.

Dr. Annie Bukacek [00:35:02] I do have I do have one more thing that I want to say. I think it's because this person works for the hospital, I suspect, but I'm not I'm not a mind reader. But a week before our governor called for the state of emergency, it was a week before, almost to the day-this is a small town. We only have one infectious disease specialist. I like him very much. I called him up. I forgot to say I'm on the Flathead Health Board here. So I called him up just to see kind of what his take is on this. And he and I were on exactly the same page. He said, "You know, this is being blown out of proportion. People just need to wash their hands better. People need to, if they're sick, or if they have a lot of co-morbidities, they need to quarantine." So we were on exactly the same page almost a week

from the day our Governor Bullock, he called the state of emergency. A week later, we had a meeting at our health board and the meeting was about shutting down restaurants. That was the first phase of the shutdown. And the same doctor came in and testified for the shutdown a week after state of emergency. What happened in that couple of weeks? Were there so many more people dying in Montana? What, was he seeing a whole lot more cases? No. The governor called a state of emergency. He works for the hospital. And they're just going along with the program.

John Shuck [00:36:33] They are bureaucrats taking orders from above. Right?

Dr. Annie Bukacek [00:36:36] That's right. That's right. And it's one of those things. And this is probably another topic in and of itself. But I think it's an important piece of the puzzle is that hospitals, for the most part, they get most of their income from, they're kind of a private sector or public sector combination. But even the private sector portion, if you want to call it that, and where they actually take money in form of insurance, it comes from Medicare and Medicaid. Somewhere around 90 percent of their funding comes from the government. And you can't make it on what Medicare and Medicaid pays. So they have nonprofit status. You know, they get subsidies for being in a small town. And now they're getting, you know, nine million dollars from the so-called stimulus. So there's a lot of that, you know, government and hospital interface. And so the other CEO of the hospital and the CFO might be taking orders from the government. I don't know, but it's all—they're dependent on government funds. They're dependent on tax breaks that the regular small, the little docs like me that are solo practice, we don't get those kind of breaks. The other businesses in town don't get those tax breaks, but the hospital does. So there's a lot of that kind of financial portion of it that I think is really important to understand how this has happened and how they've gotten such control over doctors.

John Shuck [00:37:58] Dr. Bukacek from Kalispell, Montana is my guest. Have a few minutes left. And I want to kind of go and take a different direction with you for a little bit.

Just look at this story that we've inherited here from face value, as best as I understand it, that in China at a seafood market in Wuhan, China, an open-air seafood market, somebody ate a wild bat and got this. What usually happens when people eat bad food in a seafood market? I mean, do we get a virus? Or do you just get sick?

Dr. Annie Bukacek [00:38:30] There was a movie, the movie about that called "Contagion."

John Shuck [00:38:34] Yeah, I remember.

Dr. Annie Bukacek [00:38:34] And it was a terrible propaganda movie because at the end the vaccine is what saved the world. But it came from that. That kind of a theory where the pig got involved in the guy, you know, in a restaurant in China that the chefs, you know, touched the pig that touched the bat and then wiped his hands on his apron and then shook the hands of the woman. That was the case that brought it to the United States in that kind of thing. So those kind of those kind of theories are out there. But that's kind of predicated on this really being a bad virus and a real deadly virus. So I question that. I question that whole theory. So I don't go into the, you know, it is it is it bioterrorism? You know, in Wuhan, did somebody patent this? And I just don't go into those things because I think they're over-exaggerating the danger of the virus in the first place. And so that's why I don't spend time on that kind of thing. You know, I do want to say, if we only have a couple of minutes left, is

that one of the things that they talk about, because we love our senior citizens. We love our older people. I mean, I'm an internist. Most of my patients are older people. And most people that have a heart have a heart for older people. Right? And so one of the parts of what I call the false narrative is that we've got to protect those old people that are the most vulnerable. They're the ones that are by most risk and all that. They use that and they use that repeatedly over and over again. And what I see in my medical practice of my elderly patients is I can't get them into their specialist. People that need knee replacements and hip replacements and cataract surgery. I can't get them in for that. I can't get mammograms ordered. I can't get low-dose CAT scans of the lungs that are used to screen for cancer. And I talked to a surgeon two weeks ago. I had to beg this woman to call a patient of mine. Now, I'm sorry, there's no transmission of anything over the phone. But I had to beg her to call my patient who she had seen before. And I went and he was having some worrisome symptoms for possibly recurrence of his cancer. And I wanted him to see her. And she wouldn't. But she was willing to talk to me on the phone. I talked to the surgeon and I said, "How are you guys going to ever catch up on the backlog of these surgeries that you're calling nonessential? How are you ever going to catch up? There aren't going to be enough hours in the day." And she said to me very nonchalantly, she said, "We aren't going to ever catch up." She said, "People are just going to have to get used to it, just like they do in other countries." So that's the other piece of the lockdown, is that it's serving as a mechanism for rationing of health care to our senior citizens. So when they tell you we're trying to protect the senior citizens with these lockdowns, that is absolutely.... it's a lie. It's a totally false narrative. It is these senior citizens that are being hurt by this lockdown more than anybody.

John Shuck [00:41:21] Well, that's what I wanted to ask. I mean, even if this were a real thing and I think many people have brought up a lot of questions about that, are the procedures, locking down, taking away our rights? This social distancing stand six feet in front of another like little robots for healthy people. Is this the way that human beings should respond? I mean, I'm asking you as a medical doctor, does this make any sense?

Dr. Annie Bukacek [00:41:48] No, it does not make any sense and touch is very important, and that's the other thing, these are elderly people that are in nursing homes and assisted living or they're living at home alone and their family members can't visit them. So they're there totally without any touch or affection or familiar faces. So they're languishing lonely in these nursing homes. And I had a patient who's 92. She's in assisted living and her daughter couldn't get in. And she called me up and this woman's doctor for many years and she said, could you go visit her, please? You know, and I said, of course, they wouldn't even let me in because the patient's not sick. So these people are being are being totally isolated. And you look at, you know, the scripture and what it says about Jesus and how often he touched people, you know, he hugged them or touched their head or, you know, he was touching people. I mean, then those studies about newborn infants that aren't touched and what happens to their nervous system in their whole psyche when they're not touched. I mean, we are people that are supposed to be looking at each other warmly, you know, hand on the shoulder, whatever we do, we're supposed to be doing all that. That's essential to our nervous system. So this is it. This is horrific on multiple levels.

John Shuck [00:42:55] I mean, we've been taking care of humans, have been taking care of each other for however long you think humans been around. Well, we've been doing it haven't we?

Dr. Annie Bukacek [00:43:03] Yeah, that's right.

John Shuck [00:43:04] Suddenly this top down. Boy, you're shutting everything down. Just seems very odd at the best we can say. So there are many effects, you mentioned the effects on seniors. What are other effects that this new reality has on us in regards to health?

Dr. Annie Bukacek [00:43:24] The private sector is being completely destroyed. People are becoming totally dependent on the government for their livelihood. So that's you know, that's another very serious thing that's happening. And that and the suicide rate, homicide rate, domestic violence, all those things. I mean, even prior to this lock down, those go up when unemployment goes up. So that's a caller's correlation. You can't prove that it's the cause. But it just kind of stands to reason people are around each other more. People have more time to think about devious things. You know, they're not keeping you know, they're not staying active. And so those kinds of things. And then you look at the food shortages that came not because of the virus, but because of people's fear of the virus. You look at the hoarding of food and hygiene. All of that kind of stuff. These little old people, they don't have the freezer capacity to store, you know, six months worth of food. So, again, it's the elderly-senior citizens that are being hit hardest by this. Just in terms of food shortages.

John Shuck [00:44:29] We're recording this conversation. My guest is Dr. Annie Bukacek from Kalispell, Montana on Easter Sunday, April 12th, 2020, Easter worship. I mean, churches have been shut down. You mentioned a little bit about Jesus, if you don't mind, if I can talk from a faith perspective. You don't have to answer anything you don't want to. But that aspect. I mean, bear witness. What does it mean? I mean, churches are places of healing, aren't they not?

Dr. Annie Bukacek [00:44:59] That's right. And that's right. It's been just. Yeah. Absolutely. And the Bible says forsake not the Assembly of the Saints. It says forsake not, forsake not. But that doesn't mean looking at each other on a video camera. You know, it means being there together. And I know, you know, in my service, I mean, you could feel the Holy Spirit and pastor talks about, you know, when there's division in the church, you know, there's darker spirit. I mean, he could feel it from up there. So there's those kinds of things. You know, we need to be there supporting each other. Our church is a very, you know, just affectionate, loving, you know, very affirming type of church. We look out for one another and we are still meeting, but we're keeping, you know, our six feet apart and all that, because we don't want to get shut down. We want to be able to continue to meet.

John Shuck [00:45:44] So you've been meeting. Tell me the Liberty Fellowship, is that it?

Dr. Annie Bukacek [00:45:48] Liberty Fellowship, OK. And he has an online service. So it's Kalispell and it starts at 2:30.

John Shuck [00:45:55] So you've come from that service to just before you talked with me.

Dr. Annie Bukacek [00:46:00] Correct. Yes, we had and we kind of extended—took out the center wall so that we could invite more people and still keep the social distancing. Because if they're going to shut us down, we don't want to give them any cause or anything that, you know, in the media they could make it look like it was justified to shut us down. So we kept everything straight. And I haven't heard that there been any problems from it. So, you know, he asked us to bring our sanitizer. And just in case the police came and there was no

incident that went perfect. There were no problems. So there are ways to continue to meet and people need to come up with those. And we didn't push the envelope. We didn't break any rules other than more than 10 people, but we kept our distance. And so far, so good.

John Shuck [00:46:46] What a world, isn't it, when worship becomes a crime?

Dr. Annie Bukacek [00:46:50] Yes. Yes, it is. It's really, it's horrific. And it needs to stop. And I think that the medical education piece is part of it. And so I feel so, so blessed to be a part of shedding the light on the medical portion, because the whole so-called I mean, I put it in quotes, "justification" for the lockdown is this terrible virus is going to kill us all. So the more and more, you know, doctors that come out and speak about this being false, the more people are going to be able to relax a little bit and maybe be less willing to give up their freedoms and question it. And I think this this whole thing could—as long as it happens fairly soon, you know, we can we can get by with less damage. The longer this goes on, the more especially older people, you know, are going to suffer in the private sector. Businesses are going to suffer.

John Shuck [00:47:45] You mentioned doctors. Is there any kind of organization in terms of medical doctors searching out the truth of this?

Dr. Annie Bukacek [00:47:58] Well, we started a week ago, a group it's called Doctors Unmasking COVID 19 and we have a Web site and we already in one week's time we have 500 likes. And what we've done is we've taken and they're not all medical doctors. Some of them are Ph. Ds Like Dr. Shiva, who has four degrees from M.I.T. and he's excellent. So we've taken various doctors, probably three quarters of our medical, the other doctors that have other degrees. And we started an organization a week ago. So we already have 500 followers, not 500 likes, but 500 followers. And so when we get Scott Jensens, you know, his videos, we get those we put those on there. Anything that the people that are managing it, you know, I'm managing it. And a couple other people are. And we find these articles, we put him on there and it just encourages people. And the more, you know, more doctors are joining it. So it's pretty it's exciting. And so that gives kind of a central location where people can go and they can they can cut and paste the articles and use it, you know, on their own Facebook or whatever they use for social media. They can they can use it to talk to the sheriff or the chief of police, because we've got to turn this around quickly for the sake of the economy. We need to get people back to work.

John Shuck [00:49:20] The sake of the economy, which is not just numbers. Economy is the managing of one's house. It's our health. It's life.

Dr. Annie Bukacek [00:49:28] That's right.

John Shuck [00:49:31] So Doctors Unmasking COVID 19? Is that it?

Dr. Annie Bukacek [00:49:36] Doctors Unmasking COVID 19. If you're a physician, you know, let us know that. And then, you know, you could be anybody, can make comments on any of the things that we post. And then if someone's a physician, they can get on there and they could be one of the managers and find articles and put them on or put their own opinions on their own experiences, because there are many, many hospitals like mine here in Kalispell that are virtually empty. And yet they're getting nine million dollars of the stimulus money. And the little guy is only getting seven to eight percent of that stimulus money. It's mostly it's going to large corporations and bankers. It's not really helping us.

John Shuck [00:50:18] And then, of course, what you just said is that these important other surgeries that are now considered non-essential are not being done for anyone's health.

Dr. Annie Bukacek [00:50:26] Yeah. And they're never going to be able to catch up. And once a person needs a hip replacement or a knee replacement, they're in agonizing pain. We don't take those surgeries lightly. They're already disabled by the pain. And then they're going to be told they have to wait six months or a year like they do up in Canada or maybe never. Maybe they'll never have it done. That's very serious impact on public health.

John Shuck [00:50:48] Dr. Annie Bukacek what do you think about-I catch these stories- I don't know how reliable they are, but Bill Gates is in the news a lot in terms of a vaccine that's coming and a mandatory vaccine. What do you make of these stories? What do you make of that possibility?

Dr. Annie Bukacek [00:51:07] Some of it is. You can watch his lips move. It's coming right out of his mouth. Same thing with Dr. Anthony Fauci. They're both talking that way that we're not going to be able to get people back to work until there's a vaccine or there's a treatment for this. And they're talking about how everyone is going to have to be checked to see if they're immune. And if you're not immune, you're not going to go back to work. I mean, this is really serious. So it's out of their own mouth. You could see their lips moving and them saying that. So it's actually true for Bill Gates and Anthony Fauci. They're talking about that.

John Shuck [00:51:40] I don't think I want one. I'd rather just catch the thing and whatever.

Dr. Annie Bukacek [00:51:47] That's right. That's right. But if you don't get it, then you'll be limited probably in where you can go and what you can do and you'll still have to stay home. So that's what they're indicating. If you want to get out and have a normal life, you're going to have to be tested. And if you if you don't test that, you're immune to it, then you're going to have to get the vaccine. And if you don't test the right way and you don't take the vaccine, then you just need to stay home for the rest of your life. Except for grocery shopping. I guess so. So that's what that's what they're proposing. And again, that's why the critical piece is more and more doctors coming out and speaking out about this. They they've just got to do that.

John Shuck [00:52:29] Can you give me, as a person of faith, your kind of overall picture of this? If you'd like to. I mean, I'm thinking for me. I had to have really an understanding and I'm putting it out there. I'm not putting words in your mouth, I had to have an understanding of evil that was big enough.

Dr. Annie Bukacek [00:52:48] Right. That's right. All right. Yeah. And I think what's happening with you on the same page and I'm only talking to you this way because you're a brother and probably most your listeners are, because for nonbelievers, this would sound really far-fetched. But anybody that knows their Bible knows that the devil from the start, I mean, back from the Tower of Babel. But even before that, you know, his plan has always been to subject everyone in the world. It'll be under his dominion. You know, it'll be a be all one world under his dominion. That's always been his plan. And here we have the whole world is shut down based on a virus that isn't really. I mean, it's just like a scary story. I'm not saying the virus itself is made up, but the fear factor has been blown completely out of proportion. And because we've been so dumbed down and we've become so glued to our

televisions and, you know, and glued to trusting the government and all that, it's been it's been pretty easy go for them. They've been able to basically shut down the world based on what I call a scary story. And people are just asking for the government to come and take over their lives. And so it's something that has been brewing since, like I said before, the Tower of Babel. And it just it took it took a long time, because there have always been people that have said, no, you know, our liberty, these rights come, especially in this country, you know, our rights come from God. They don't come from the government. They come from God. And that was the foundation of our nation. And so we've preserved that to an extent. But over time, it's just been chipped away, chipped away at our educational system, chips away at that. A lot of people don't even believe in the devil. And so to me, it's scriptural that this would happen. And it's just it's embarrassing that we would let it happen so easily. You know, it's not 300 million Chinese troops that come in and take us over, which we deserve to be taken over. We did. We killed, you know, it's way beyond 60 million. You know, the number of unborn babies we've killed here. And so we deserve to be taken over. But it's not—we're not being taken over by 300 million troops—foreign troops. We're being taken over by a scary story. And that's pathetic.

John Shuck [00:55:02] Hmm. Yeah. Well said, we've been taken over by a scary story.

Dr. Annie Bukacek [00:55:10] Out of fear, not out of something real. Even we relinquished our freedoms voluntarily because of fear.

John Shuck [00:55:18] Well, thank you, Dr. Annie Bukacek for being a warrior and a truth teller.

Dr. Annie Bukacek [00:55:23] And you are the best moderator and talk show host I think I've ever spoken to. It is such a pleasure. You ask the best questions. And I know sometimes I talk fast. And you're such a gracious host.

John Shuck [00:55:36] Well, well, thank you for that. And I hope we'll be able to talk again. So. Well, God bless you and all the best to you and to Pastor Chuck and all your church there in Kalispell.

Dr. Annie Bukacek [00:55:45] And well, say one more thing really quickly, and that is that fear never comes from God. We know that.

John Shuck [00:55:51] That's right.

Dr. Annie Bukacek [00:55:53] So that's something people need to keep in mind. Pestilence can come from God. He can do that if he wishes. But fear never comes from God. So that's it.

John Shuck [00:56:02] We're going to leave it there. Doctor Annie Bukacek.

Dr. Annie Bukacek [00:56:04] All right, John, you're terrific. Thank you so much. I really appreciate it.

John Shuck [00:56:09] You've been listening to John Shuck, John Shuck Dot Com is my website. www.johnshuck.com. I will have links to Dr. Annie Bukacek's page as well as her Facebook page and her video and the Doctors Unmasking COVID 19 website as well. Find all my interviews, essays, everything at John Shuck dot com. Be well, be safe. Be attentive.

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