

Concerning House Bill 6645:

I am a registered nurse and my nursing specialty certification was for Hospice Nursing. I worked as a home hospice nurse for a large home care agency in the Farmington Valley for ten years. Our program cared for hundreds of patients, and in that entire span of time, not one patient ever asked to hasten his or her death. The subject was never raised. Each patient was discussed at our weekly hospice team meetings, and had this been an issue, it would have come up. It never did. And the reason it never did was that we afforded our patients excellent end of life care. We addressed their spiritual, psychological, social and especially, symptom control issues, and we made it our mission to provide excellent pain control, to optimize their quality of life. The hospice team also provided emotional support for the patient's family.

Most of our patients were on narcotics for pain control, and they had in their possession enough narcotics to end their lives if they wished to do so. None ever tried. Taking an overdose is the opposite of death with dignity. Hospice care does afford death with dignity. It neither hastens nor hinders death and is the compassionate answer to end of life care. Suicide is not even remotely in the realm of medical care, and I would caution the legislature against being fooled that it is.

Lorraine ZuWallack R.N.

144 Forge Dr.

Avon, Ct. 06001