center for hospice care
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TESTIMONY

Delivered BY Maureen Collins, Vice President of Clinical Services, Center For Hospice Care Southeast CT

March 20, 2013

Raised Bill No. 6645

AAC Compassionate Aid In Dying for Terminally Ill Patients

Senator Gerratana, Representative Johnson and members of the Public Health Committee. My name is Maureen Collins and I am the Vice President of Clinical Services, Center for Hospice Care Southeast CT. I am a registered nurse with 23 years of experience in hospice. I am filing written testimony in **OPPOSITION** to Raised Bill No. 6645: **AAC COMPASSIONATE AID IN DYING FOR TERMINALLY ILL PATIENTS.**

The proponents of this bill site pain and suffering as the main reason to legalize physician assisted suicide. I too do not want to die in pain. However, it doesn't have to be that way. Hospice provides expertise in pain and symptom control for the terminally ill. This is the part of our job that takes the least amount of time. In this day and age of medical treatments hospice is able to control pain and provide comfort for our patients. And this pain control provides quality of life time for our patients. They are not "drugged" or "out of it." Hospice is able to provide the right amount of medications or treatments necessary to enable our patients quality time with their families. They are able to attend weddings, graduations, and even go the casinos. They are able to participate in all decision regarding their care and die with dignity surrounded by those who love them.

Many times, more importantly, hospice is able to deal with the psychosocial and spiritual needs of the patient and family. Hospice provides a team of experts: physicians, nurses, clergy, aids, social workers, bereavement counselors and volunteers. This team works with the patient and their family to assist the patient to live their life to the fullest and die with dignity. Our bereavement team works with the families for 13 months after the death of the patient to deal with any issues dealing with grief and loss. This will not be available to those who have chosen physician assisted suicide.

This bill proposes that the patient must "self administer" medication prescribed by a physician. However in Sec 6, (b), (6), the physician will also dispense "ancillary medications...to minimize the qualified patient's discomfort." This is not death with dignity.

I can assure you those patients who experience pain and suffering at the end of life were not part of a hospice program. Instead of legalizing physician assisted suicide we need to provide more education and access to hospice and palliative care to terminally ill people and their families.

Thank you and if you have any further questions, please contact me directly at mcollins@hospicesect.org or 860.848.5699.