

Sanford #6645

Testimony for Public Hearing
Public Health Committee
March 20, 2013

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H.B. 6645: An Act Concerning Compassionate Aid In Dying for the Terminally Ill

Madame chairs, Vice Chairs, Ranking Members, and Members of the Committee my name is Shannon Sanford I am a Oncology Clinical Nurse Specialist from Seymour, CT and I strongly support passage of HB 6645: An Act Concerning Compassionate Aid In Dying for the Terminally Ill. And as you can see from the pile next to me so do a great number (stopped counting after 1500) of residents from the State of Connecticut. I would like their letters entered into the record of the hearing today.

I have been a Registered Nurse since 1999. I have my Master's from the Yale School of Nursing where I authored my thesis on the Oregon Death With Dignity Act and would be happy to answer any questions you might have on that legislation. I have taught Hospice Nursing at Naugatuck Valley Community College. I have worked at the bedside. I can tell you that the patients who will avail themselves of this legislation will be the exception not the norm. Sometimes despite our best efforts to treat and manage the symptoms a patient is having it does not equal the quality of life that the patient expects to have. The quality of life that the patient expects to have is different for every patient. What is quality of life to me or you is not the same and nobody has the right to determine for another what constitutes his or her quality of life. That is ones own personal decision.

This legislation is important for the people of Connecticut who may need this medical service. Note this may be a need not a want. Patients generally don't want to die. They want to live as long as they possibly can at the highest level of functioning and quality of life that they are able to have. I am strong supporter of Hospice services. Patients choosing compassionate aid in dying will not be the norm. These will be the patients who despite our best efforts to manage their symptoms they are just not experiencing the quality of life that is meaningful to them.

I believe this bill could use some improvements. I would encourage modeling after the Oregon legislation and instituting a waiting period for the prescription request and having a two physician model. In Oregon the patient must wait 15 days after making an oral request before making a second request for assistance. Then the patient must put the request in writing. Also in Oregon, the patient's terminal prognosis must be confirmed by two physicians. I believe adding these additional steps would serve to enhance HB 6645. I appreciate your consideration.

Thank you for your time,

Shannon Sanford