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From: jrppac@comcast.net
Sent: Monday, March 16, 2015 1:20 PM
To: JudTestimony
Subject: HB 7015

To the Judiciary Committee:

My name is John Pike and I reside in Middletown. I'm a licensed physician assistant, practicing at St. Francis Hospital in the cardiac surgery service the past 22 years, most frequently in the critical care setting.

I'm writing in opposition to HB 7015 as I believe this bill for physician-assisted suicide (let's call it what it really is) would have a negative effect on the critical relationship of trust between a provider and a patient, dating back thousands of years to Hippocrates.

This bill is virtually the same bill that was not brought to a vote last year because of the language that still requires medical personnel to lie on the death certificate by forbidding physicians from listing assisted suicide as the cause of death.

It's imperative that the members of this committee understand what physician-assisted suicide is and is not about:

- It's not about pain management since adequate pain control methods exist that make dying in pain unnecessary.
- It's not about stopping needless suffering in an ICU setting, or elsewhere, since there are policies in place to stop treatment without actively killing the patient by the hand of a provider.
- It's not because patients are without other choices. They, or their family members, already have a choice to stop unwanted treatment whether it is ventilators, dialysis, feeding tubes, chemotherapy, etc. – all choices that have pain and suffering control measures available.
- However, it is about significant depression that often exists in patients who choose this avenue. A few years in Oregon, it was noted that over 80% of patients who used PAS made the request because of "lost enjoyment".
- Importantly it is about provider responsibility to participate in the slippery slope that will, not may, lead to euthanasia. Washington state is already discussing the move from physician-assisted suicide to euthanasia.

As our healthcare system becomes burdened, will the terminally ill, the elderly, the disabled or mentally ill, perhaps even the poor – maybe one of your family – become targets for ending their lives?

- This legislation also opens the door for potential subsequent legislation that would mandate participation by any provider. We have already seen attempts, on a federal level, to remove the ability of providers to follow their conscience by refusing to participate in a number of procedures that violate their beliefs.