

## Moniz-Carroll, Rhonda

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**From:** jcbjmancini <jcbjmancini@aol.com>  
**Sent:** Monday, March 16, 2015 8:36 PM  
**To:** JudTestimony  
**Subject:** Testimony in support of HB #7015

### 3/18/15 CONNECTICUT TESTIMONY - BARBARA MANCINI

Good afternoon. I am Barbara Mancini of Philadelphia, PA, and I have become an advocate for DWD laws since I was exonerated of the felony charge of aiding an attempted suicide. I was prosecuted under that criminal statute for handing my dying father, who was in great pain, his legally prescribed morphine. When he took more than the prescribed dose, the home hospice provider and the police invalidated his legal advanced directives, and he suffered greatly for four more days, while enduring unwanted life-saving treatment, before succumbing to pneumonia.

I know that prosecution of family caregivers on such specious charges is a rare occurrence. Similar prosecutions have happened in CT. That it happens at all is shocking and shameful. How tragic it is that the dying and their caregivers have to worry about the possibility of a similar ordeal at such a vulnerable and stressful time.

Many people will testify that hospice care can make dying comfortable, and that there is no need for medical aid in dying. While it is possible that appropriate hospice care can keep the dying from suffering, my father's case is a prime example of hospice care that did very little to address my father's end of life suffering. The hospice team leader, in her sworn testimony, told the court that my father should not receive any more than 2.5mg of oral morphine at any given time. Throughout my father's hospice records, the providers repeatedly documented that my father was "comfortable despite pain", which is a blatant falsehood.

Statistics from Oregon show dramatic and measurable improvements in end of life care since DWD was enacted. Hospice care and pain management *improved*, advanced directives are honored, and people die at home per their wishes. And, there is no misuse of criminal statutes against the caregivers of the dying.

I urge you to carefully consider the validity of DWD, not only to preserve patient autonomy and choice, but to see the concomitant improvement of EOL care that enactment of DWD produces. My family and I are haunted by the tragic way my father's life ended, and our grieving will never be separated from the trauma of an unjust prosecution of a family caregiver.