

SB201—2020

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of  
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Position: Opposed

## **BACKGROUND**

- Registered Nurse for over 40 years
- Background includes long-term care and end-of-life care (not termed “hospice” care)
- Background includes all areas of nursing  
Experienced with case review
- Former Chairperson for Ethics Committee of Maryland Nurses’ Association
- RN membership active in Maryland Nurses’ Association and Health Ministries Association

A patient who experiences insurmountable pain, overwhelming financial hardship or a disease that will result in further deterioration of the patient’s health, is often unable to make reasonable and sound decisions that will, at that moment, improve their quality of life. When curative outcomes are not realistic, patients continue to require assistance with their quality of life and to help restore spirit.

When patients are offered the choice to end suffering by taking lethal medications (physician assisted suicide) or to have those lethal medications administered to them by a physician (euthanasia), a “ripple effect” results. Patients encouraged to take their own lives will not experience the support, love, and self-value they would otherwise receive from their loved

ones, caregivers, and community. Families will never have the opportunity to provide the support, love, and care to their ill family member when a lethal injection is given — this behavior would be interpreted by the patient as abandonment. The community will be deprived of the opportunity to join together in solidarity to provide the patient and the patient's family with recognition of that person's place in society and with a true perspective for all of the patient's legacy to be left behind.

The American Nurses' Association Position Statement on Ethics claims that patients should always have the right to make their own decisions, regardless of whether that means ending one's own life, or not. Medical Aid in Dying, including both euthanasia and physician assisted suicide, is not and never was inclusive in the language or accepted as a best practice in the healing arts. MAID, which this practice is now called, has devastating long-term effects on patients, their families, and the community-at-large. An example of this is a proposal the American Nurses' Association will soon present for inclusion in the Nursing Practice Act—that nurses will be allowed to administer these lethal medications to their patients.

What is missing here is every person's right, God-given and inalienable, to life, liberty, and the pursuit of happiness. Without life that is protected, the rest is just theoretic ideology.