As a child in the 80's, my parents brought us to the hospital to visit our Grandfather who was suffering from cancer. I remember watching the nurses caring for my grandfather: keeping him comfortable with positioning and pain medication and attending to his needs in a loving and compassionate manner until he passed away peacefully. It was then that I knew that I wanted to be a nurse.

Compassion, defined as "suffering with" is the foundation from which the nurse builds his or her practice. However, Compassion and Choices has hijacked this word, using it to make the public feel as though offering this lethal prescription is the compassionate choice. It is not. It is the antithesis of compassion, the antithesis of what it means to be a nurse.

I find it ironic that you would introduce this SB845 following the 3 years of the Covid Pandemic. We nurses worked so hard taking care of critically ill Covid patients, saving their lives every day when they were dying by the hour. We know that the worst cases were those with other preexisting health conditions, so-called "high risk." Those were the patients we meticulously cared for, wore masks in public for, were early adopters of the vaccine for. Those patients will now be offered this lethal concoction in order to *hasten* their death.

A second irony and hijacking of the compassion of nurses is listed in Compassion and Choices' pamphlet. It's called MEDICALAID IN DYING: A Guide for Patients and Their Supporters.

- page 54, they state that, "if one cannot swallow the lethal prescription, then a clinician, usually a nurse, inserts a catheter so that the patient can self-administer." The nurse is now complicit in this early death.
- page 64: "There is nothing in any aid-in-dying law that prohibits hospice staff from mixing these medications or handing the mixture to you." Complicit.
- page 67: "those around the patient should become something of a cheering squad to achieve the 2 minute goal of swallowing the prescription." I ask, how is a "cheering squad" not complicit; how is this not coercion?

SB845 does not specifically mention nurses, a conspicuous omission. You have neither given us immunity nor have you given us conscience protections. Nurses could be accused of abandoning their patients if we do not comply and/or be forced to be complicit in a practice for which we do not agree.

Last, we know from Sloan Kettering Hospital Pain and Palliative Care Service that 95% of individuals that initiate the process of Assisted Suicide will change their minds once their Depression is treated. And yet, there is no requirement for a mental health evaluation prior to these lethal prescriptions.

In summary, Assisted Suicide is not necessary; it is not Nursing Care; it is not Compassionate care. You are asking nurses to turn our back on the very thing that drives most of us to do our work: Compassion.