

I am Amy Godat, a Maryland Emergency nurse speaking on behalf of myself.

I am in favor of SB568 because emergency physicians and nurses experience significantly higher rates of verbal abuse and threats than any other professionals, and this interferes with our ability to care for our patients. These threats occur daily and multiple times a day and impact all the patients in the ED. Threats can also quickly escalate into physical assault.

I recently was a victim of an attack. The reason for visit was hyperglycemia. She had been cooperative throughout the visit. We had set up a place for her to go and had got her prescriptions. As I began going over the instructions, the patient quickly turned aggressive and loud in speech. She was refusing to discuss discharge and continued to state she needed to stay. I asked the physician to come into the room to help explain the plan of care, which the physician did immediately. As we both calmly spoke, we explained what was done and what the results were, and that the patient did not warrant or need admission. The patient continued to get angrier and more demanding, and the verbal aggression suddenly became physical—the patient abruptly got off the stretcher and chased both the physician and me. I fell backwards, hitting my head and back against an EKG machine and my right side on the floor. I open my eyes to sit up and see the patient on top of the physician.

This attack left the ED short both a nurse AND physician. My co-workers, who witnessed the act had to take over the care of my patients including the patient that attacked. They already had full patient loads themselves. This bill is about **THREATS and interfering with care**, I am asking that legislature to be clear that this interference is not permissible, and that there are consequences for endangering the lives of others.

I returned to work after being cleared by Occupational Health purposely because I did not want this patient to take away from me something I love to do...I love my job, and especially now Baltimore needs some love. But many nurses, instead of returning, are leaving either the emergency department setting or the profession all together.

I have pain everyday as a result of this incident, I am in PT for my right knee

As for the patient, she was discharged 2 days later, free to go without any restrictions.

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