

March 7, 2023

General Senate Hearing

Bill # SB0845

The Honorable Elijah E Cummings and the Honorable Shane E Pedergrass

End of Life Option Act

Testimony of support

My name is Dixcy Bosley, born in Baltimore, Maryland and after nursing school, I worked in DC on a AIDS research unit from 1985 to 1990.

It was a horrible time in human history when many young people died miserable deaths and as a young nurse, it set me on a path to examine the value of comfort care when curative medical care was limited. I realized early on that caring meant relieving suffering, not prolonging life. After many years of acute care nursing, I served as a hospice nurse, later became a family nurse practitioner and work now as a geriatric nurse care manager advising clients about end of life care planning.

In the last few years, since DC has allowed medical aid in dying for those who qualify, I have volunteered to accompany individuals requesting information to access the DC law. There are many who inquire to expand their options of choice as they battle a terminal illness. Additionally, I lead seminars designed to teach the public about their expanded rights as DC residents and I am intrigued by how many well informed Washingtonians want to understand our human rights law for end of life care. As a nurse who has cared for terminal patients for over 35 years, I feel it is my obligation to provide my clients with full knowledge of care options to promote their bodily autonomy and protect them from relentless suffering.

Since 2018, it has been my privilege to accompany four DC residents while they ingested a solution to end their lives in their private home with family present. It was a decision that was made over months of discernment, collaboration with their medical team and family. I chose to be there as an emotional support and observer of the law. I also wanted learn about how individuals decide to end their suffering, how the process is implemented and how the family caregivers react before and after death. Although most hospice providers in DC claim to be neutral on this issue, I believed my presence would affirm a patient's choice when even excellent hospice care was not enough. Hospice palliation and the option for medical aid in dying are partnerships in providing best practices.

Briefly, I will describe the four courageous people I accompanied as they accessed the DC law.

RT was a 62 year old father and son (I heard him call his 100 year old mother just before he died to thank her for understanding and for loving him) He had suffered from a long history of work related COPD and spent years attached to a oxygen tank. After an unsuccessful attempt to end his life with morphine years earlier, he went from an ICU

into hospice and when he learned he could take medical aide, he set his date just after Thanksgiving 2019. His family, close friend and myself were at his side with he mixed and swallowed his life ending beverage. He sang to us and then soon became unresponsive, died 30 minutes later. Across the street, a school playground alive with children laughing was the back drop of this peaceful event.

BF was a 70 yr old film producer who lived with her devoted partner of many years who helped her deal with her physical disability related to advanced Parkinson disease. Her mother had dementia and she fear that her PD would become a disease of her mind as well as her body. Together with her partner's sacrificial support, she decided to request a prescription of medical aide and after months of discernment, she consumed it with full knowledge that she did not want to extend her life with only more predictable debility in the future.

PK was a 95 yr old successful architect having achieved so much in his long life. Even as a POW, bombed out of the sky in WW2, he reported great suffering from years of lung cancer, oxygen dependency and pain from metastatic bone cancer. He hand wrote a beautiful love letter he left at his bedside, found after he ingested his medication. He passed within minutes due to his advanced age and illness but I remember his wife feeling great relief to see him so peaceful after years of suffering. Her own grief was comforted by his unlabored breathlessness..

RL was likely the most profound experience of witnessing the end to of suffering. At 42 years old, this resident of New Mexico, who had AIDS and lymphoma was escorted by his four siblings in a caravan across the country to come to DC with hopes of accessing the DC law.

RL was under hospice care, with unmanageable nausea, pain, and despair. His siblings were amazing advocates for him to direct his own care and he successfully acquired the medical aide prescription and set a date when his siblings could be with him at time of ingestion. I remember the sister who called to thank me for being with them as they celebrated his life and freedom from years of illness.

As a registered nurse in DC and MD, I hope that all my patients know they are entitled to full access of compassionate care. Most patients who ask about the option for medical aide, do not actually fill the prescription or even take it, But for the few who do, I honor them in my testimony today because I believe all citizens deserve bodily autonomy especially. None of us ever know another person's journey with a harmful and hopeless terminal illness. I air on the side of compassion. Thank you for considering my professional experience in DC to support the legislation for medical aide in dying in Maryland. It is time for expanded human rights in our neighboring state.

Dixcy Bosley RN, MSN
1527 Upshur St NW
Washington DC 20011