

**Testimony of Janice Bird, MD**  
**Support for SB443/HB403 The End-of-Life Option Act**  
**(The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass Act)**  
**February 2024**

I am Dr. Janice Bird, a board-certified obstetrician and gynecologist, retired after 35 years of practice in Annapolis.

I strongly support this bill.

I have two comments.

**1. You should pass this bill for the minority of patients whose pain and suffering cannot adequately be controlled.**

I cared for thousands of patients in my career as an obstetrician gynecologist.

It was a privilege to provide the best medical care I could. Ob/Gyns provide care over one's lifetime – "from cradle to grave." In the small minority of my patients with terminal cancer, such as ovarian cancer, they experienced profoundly debilitating pain and suffering, begging for a peaceful end. They wanted a dignified, peaceful way to bring an end to their inevitable death for themselves and their loved ones. I have been present at deaths that were prolonged by pain and suffering that was not alleviated with the best of hospice and palliative care. It is patronizing and wrong for opponents of this bill to believe they are justified in stopping this small minority of patients from ending their lives with peace and dignity if they chose to do so. Patients are asking for this law. We need and deserve this law.

**2. It is reasonable and ethical for physicians to choose to participate in such programs, and that participation does NOT violate the Hippocratic Oath.**

I cringe when opponents state this process violates the Hippocratic Oath, because in my mind they do not understand the entirety of the Oath. You should think about two different Hippocratic Oaths – the original from 2400 years ago and oaths administered today. There clearly are parts of the original oath relevant to today's practice of medicine that focus on not harming patients, following moral principles, and protecting confidentiality. My problem with

opposing witnesses is that they “cherry-pick” one small part of the Oath when there are many parts that today are irrelevant or inappropriate. That original oath has one swear to the God Apollo, acknowledge only male physicians, and agree not to perform surgery, particularly mentioning removing stones.

Now consider modern oaths. Fully 116 of 122 U.S. medical schools now administer oaths that accommodate medical aid in dying, including the updated oath for the Johns Hopkins Med School.

The entire focus of aid in dying involves an option, and requires a conversation, an interaction, an evaluation, informed consent and, perhaps, a prescription within legally defined standards. It is ethical. It is compassionate. These are components of any modern or ancient version of the Hippocratic Oath. Physicians may choose to participate in treating these patients. There is no requirement. Deciding to take the drug is the patient’s option. I am one of many physicians who fully support this law that ensures patients have the legal process to choose a means to end their pain and suffering when their inevitable death is near.