FAV With Amendment HB1328/SB926

Amendment: include routine question on medical record

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Thank you for this opportunity to support HB1328 and SB926 - End of Life Option Act. (The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass Act). I hope this year we can get this done. I testified in support of a similar bill last year and was sorely disappointed that it did not pass. If you have experience with a loved one who is dying, in a bed, in pain, for months, and with nothing better to hope for, it seems cruel and heartless. In addition, in today's health care environment, health care staff and dollars are stretched so thin, it seems shortsighted to spend most of a person's life-time of medical expenses in the last months of life, when they would choose to end the suffering.

Last year, I was saddened by the testimony of many saying that this is a slippery slope to ending the lives of our disabled population. The examples provided of mentally ill, depressed, disabled and suicidal people do not meet the criteria of "6 mos remaining for a terminal illness". If anything, the provision to meet all of the requirements may be too arduous for a sick person unless they start very early. And I was disappointed this bill would not help individuals who have a sudden stroke or other event that dooms them to a bed until their dying day.

To address that, I recommended that a question about the patient's feelings of MAID be included in the medical record. I am not a legal scholar so I am not clear if this could have other ramifications, but I think this would be a good idea to address the issue of "physicians being able to refuse participation in MAID". If MAID is what a patient wants, I think it is a good idea to have long-standing documentation of it. In addition, if doctors are not willing to participate, then that should be established at the start of the doctor/patient relationship not at the critical junction when it is needed.

Last year, I was also surprised at the numbers of health care professionals against the bill. I do not know if they understand what the experience is for the average American seeking healthcare. Where they feel that this would jeopardize a doctor/patient relationship, I feel like it would strengthen it knowing that the doctor could help end suffering. I would see that person as my savior. For people needing appointments, it often takes months to see a doctor. Perhaps in an ideal world where our health care system could cover all needs, things might be different, but here and now, we fail those who are sick in terms of resources, time, and attention. A 15-minute visit with a doctor does not make the hours of living, while dying, more palatable.

No bill is perfect and all bills can be modified. I would like to see us fix this injustice for a very vulnerable population.