



March 11, 2021

To: The Honorable Rachel Prusak, Chair
The Honorable Cedric Hayden, Vice Chair
The Honorable Andrea Salinas, Vice Chair
Members of the House Health Care Committee

Re: HB 2510 Safe Storage of Guns

Chair Prusak and members of the committee,

I was working an evening shift in our pediatric emergency department. I received a call that a teenager had been shot in the chest and possibly had a collapsed lung. The transferring hospital would place a tube in their chest to drain the air and start a blood transfusion, then they would be brought to our emergency department by ambulance for further treatment. As we prepared to receive the patient, setting up the room, obtaining more blood to transfuse if they needed it, and so on, my phone rang again. There was another gunshot wound. This one was a toddler who had been shot in the head. The circumstances were not clear but the child was very ill and would be arriving in 10 minutes.

A sick feeling swelled in my stomach as we called for extra help and prepared to care for this young child. When the EMS crew wheeled the toddler in on the gurney, they were unresponsive, not breathing on their own, and had continued brisk bleeding from their head. The paramedics told us that the child was playing with a gun that was unsecured and loaded and had accidentally shot themselves in the head. We placed a breathing tube so we could take over breathing and we started transfusing blood immediately, something called a 'massive transfusion protocol', a strategy used when there is a very large amount of blood lost. Despite medications to help decrease the swelling in the brain due to the firearm injury, and despite the multiple blood transfusions received, the child became very pale and cold and we could not feel a pulse. We performed multiple rounds of CPR, regaining pulses only to lose them again minutes later. After evaluating this child's head more closely, after working to revive them for over an hour, we realized they could not survive their injury. After losing pulses for the final time, the child passed away in front of us.

The mother and grandparents arrived shortly after and we sat down with them in a private room. We told them what had happened, what we had done to try to save their child, their grandchild. We told them that ultimately we were not successful—their child had died. I will never forget the sound of that collective wailing, the tortured look on the mother's face, the uniquely horrifying, palpable energy filling that space in that moment. In that moment you are overwhelmed with helplessness; there is no word or deed that can assuage that suffering for those in the face of loss of this size. After several minutes of grief, anger, and

despair, the mother stood up, faced us directly, and sobbing, thanked us. She then hugged each of us, the doctors who had tried but failed to save her child's life.

I didn't feel like I deserved her thanks. Her child had died in our hands; we could not save them from an injury like this one. But this didn't have to happen. If that child didn't have that gun, if it was never in a place where they could have gotten to it, they would still have their life. The child would still have grade school, awkward adolescence, a first date, a first job, a first car. They would experience the joys, the heartbreaks, the warmth of friendship, the anxieties of that we too often take for granted as we move through our rich and varied lives. That all has been taken. Their future doesn't exist anymore. And the family will be irrevocably changed by the trauma of their loss.

Please help us, providers on the frontlines caring for the tragic victims of accidental and intentional gun violence. Please help our Oregon families, so that no mother or father will have to suffer the incomparable pain of losing their child to a gruesome and entirely preventable death. Please help us as a community find the middle ground where we respect an individual's rights to own a firearm while mandating responsible measures to ensure these weapons are stored safely. Please support HB 2510. Children's literal lives depend on it.

Sincerely,

Beech Burns, MD, MCR

Assistant Professor, Pediatrics and Emergency Medicine

Vice Chair of Pediatrics, Department of Emergency Medicine

Medical Director, Pediatric Emergency Department

Oregon Health and Science University

And

Oregon Chapter of the American College of Emergency Physicians, Board member