

Submitter: Moxie Loeffler  
On Behalf Of:  
Committee: Senate Committee On Judiciary  
Measure: SB1060

Chair Prozanski and Members of the Senate Committee on Judiciary,

As an Internal Medicine Physician, I support this bill because legal recourse for abuse, assault, and the suffering of disabled people needs to improve in our state. As a Resident, I learned how to assess patients who are unable to speak, write, or otherwise communicate their pain. We also learned to identify pain by the mechanism of injury and the identification of wounds, including noticing damage to soft tissue or bone, bruising, or bleeding. Inability to sleep and muscle tension, and monitoring vital signs for high blood pressure, increased respiratory rate, and increased heart rate are other signs of pain that guide us when patients show no physical trace of pain. We monitor for impaired function that is new also.

For tools on the assessment of pain in nonverbal people, or people with neurologic conditions, please see these website links below:

1. Nonverbal Pain Scale (NVPS) for Nonverbal Patients

Quantifies pain in patients unable to speak.

<https://www.mdcalc.com/calc/3621/nonverbal-pain-scale-nvps-nonverbal-patients>

2. Behavioral Pain Scale (BPS) for Pain Assessment in Intubated Patients.

<https://www.mdcalc.com/calc/3622/behavioral-pain-scale-bps-pain-assessment-intubated-patients>

People with disabilities speak to us all the time. We simply need to learn new ways to listen.

Please contact me if you have any questions. Thank you for your effort.

Thank you,  
Moxie Loeffler, DO, MPH  
Internal Medicine and Addiction Medicine