

Submitter:

Dr Carolyn Klaus MD

On Behalf Of:

Committee:

Senate Committee On Rules

Measure, Appointment or Topic:

SB1003

Dear Senators,

Please do not pass Senate Bill 1003, the new rules on Assisted Suicide.

The removal of Oregon residency requirements means that what is decided in Oregon affects all patients throughout the USA, regardless of where they live.

Though I practice medicine outside of Oregon, I currently know two people who have recently considered or who are now considering going to Oregon to seek medical help in ending their lives.

This bill removes important safeguards that would prevent unnecessary deaths.

First, the change in terminology from “attending physician” to “prescribing provider” opens the door to removing the requirement that a physician be involved in this most serious of decisions. Nurse practitioners or physician assistants should never be empowered to make such decisions. Furthermore, a ‘prescribing provider” need have no prior relationship with a patient. This would open the door to the establishment of “death clinics,” places that specialize in prescribing life-ending medicine without knowledge of the patient’s context or serious attempt to examine alternative ways forward.

Second, the bill reduces the waiting period from 15 days to 48 hours. This is not enough time for a person to process normal times of grief, mental health challenges, or treatable conditions. It is certainly not enough time for the health care system to offer any real help to persons going through such painful though often temporary difficulties

Third, assisted suicide laws create a two-tiered healthcare system where those with disabilities are given assisted suicide as a cure and the non-disabled are given suicide prevention. What a horrible message this is about the value of human life, disabled or not.

My duty as a physician who has cared for many people with advanced illness has always been to relieve suffering, not to assist in their deaths. It is always possible to relieve suffering to a significant degree, even though a person may soon succumb to death. It is the height of laziness and lack of compassion, let alone arrogance, to opt for an artificially quick end rather than to provide both palliation and accompaniment as patients finish their earthly journey.

Please vote no on SB 1003.

Sincerely,

Carolyn Klaus, M.D. (Internal Medicine)