Submitter: Dr R Paul Post MD FAAFP AAME

On Behalf Of: Self

Committee: Senate Committee On Rules

Measure, Appointment or Topic: SB1003

I oppose SB 1003 on the basis of three major points:

- 1) It broadens the definition of who can prescribe lethal drugs: It is difficult even for well trained physicians to determine who has a terminal condition, and who may have a treatable condition such as depression. If you open the door for nurse practitioners and physician assistants to facilitate assisted suicide, this could open a Pandora's box of this procedure being foisted on patients inappropriately.
- 2) Mandates Promotion of Assisted Suicide by Healthcare Facilities: Hospice hospitals and other facilities would be required to disclose in writing the availability of assisted suicide before a patient is admitted. This is a subtle form of coercion to those with disabilities to make them think they are a burden on society.
- 3) It shortens the existing 15-day waiting period to just seven days, and in cases of "imminent death" allows drugs to be administered within 48 hours. This undermines critical time for evaluation and discernment, especially for patients facing mental health challenges, grief or treatable conditions. What is the great need to rush the process?