

**Testimony To the House Appropriations Committee
HB742**

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03/22/2005

Ladies and gentlemen of the committee, Madam Chair: I chose to be here today to speak in support of House Bill 742 because I felt it vital for you to hear just how important an electronic repository for Advance Directives can be. As a hospital chaplain, I am a daily witness to the decisions that are made in the sometimes very narrow gap between life and death. This is never an easy place to be but it is especially difficult when the circumstances are such that a patient is unable to speak for themselves when decisions about treatment must be made. In the best of all possible worlds, every person would have family gathered around at this critical time and the family would all agree on the best course of treatment or at least the course of treatment that the patient would want were they able to voice their own wishes. Often, however, family is not available or the family that is available is not of one mind as to the best course of treatment nor what the patient would want.

This is where an Advance Directive is so valuable to guide the family and the physicians in the care of the patient. When the Advance Directive is not available, however, then decisions are delayed or patients are placed on life sustaining technology which they did not want.

There is a particular day that stands out in my memory because of how it so ably demonstrates the importance of Advance Directives and their availability. Two patients were dying. In both cases, further aggressive medical treatment, would be futile in determining the ultimate outcome. At one end of the hall, the family gathered around the patient's bed, sometimes quiet, sometimes weeping, sometimes sharing stories of the patient's life. At the other end of the hall the family was arguing, anguishing over their division as to the right course of action. Some family members said that the patient had expressed wishes to not be "kept alive on machines" while others felt the patient would want everything done that was medically possible for as long as possible.

The difference between the two patients was, one had an Advance Directive on their chart, and the other did not. One family grieved in unity as they released the life of one they loved, knowing they were adhering to her wishes. The other family argued as they struggled with what to do.

Certainly, an electronic repository for Advance Directives will not solve all such problems or conflicts. But I can tell you that since the Choices Bank has come on-line, I have been able to go onto the secure site on numerous occasions to obtain a patient's Advance Directive to assist the healthcare team and the family in the patient's care. As recently as Friday, I had indication that a patient had an Advance Directive but only a portion of it had made it into the hospital chart. On a chance, I went to the Choices Bank found that this patient had deposited their document there and I was able to print the entire document for the chart.

I could go on with story after story – the sad ones where Advance Directives were not available but would have made a difference and the other stories where the Choices Bank assured that a patient's wishes, as provided for by the Montana Rights of the Terminally Ill Act, were followed.

Please vote in favor of House Bill 742 because, from where I stand, at the bedside of patients and with their families, it is the right thing to do. Thank you.