

elements and threats. First, if hydration and nutrition are comfort care or are for the alleviation of pain, and those are both medical terms that doctors can apply...

SENATOR SMITH: And that would then...that would encompass then the nutrition?

SENATOR LANDIS: ...they continue to have that professional responsibility. In the event it is neither of those two things but is a life-sustaining treatment, then the living will would apply in that situation, and in the event it is for comfort care or for alleviation of pain, the obligation continues to...the professional obligation continues to apply hydration and nutrition.

SENATOR SMITH: Okay, and probably I'd need to have more explanation to determine what the difference is between what you consider to be comfort care or alleviation of pain versus other kinds of life-sustaining measures. I would just like to say that, you know, Senator Labeledz and Senator Chizek, you both discussed concerns that you have had with family members and so on, I dealt with this issue with...I have seen this happen with my in-laws. My mother-in-law has Alzheimer's disease. She is now at the point where she is being fed intravenously. I guess I don't call it intravenously, it is a tube down through her nose with a bag, and that is...it is a desperate situation when you are watching that happen with someone who is no longer able to speak for themselves. One of the things that I like about the living will is the fact that it takes, this is very selfish, but it takes the burden from the family, if that person had determined beforehand to let you know specifically in writing what it is they would have wanted, because it is really hard to make those kind of decisions for someone, yet it is also hard to watch them just lay there day after day after day being continued on with what I don't even call quality of life any longer. And we are now in the position of having to finally make some decisions, which I am not wanting to have to do.

SPEAKER BAACK: One minute.

SENATOR SMITH: But it has been a priority of the elderly in the State of Nebraska. In working with aging programs before I ever came to the Legislature, this was an issue with them across the state. And when I ran for office, it was a big issue as far as the aging population, and it was a priority of the network of