

March 8, 2024

Honorable Chairman Senator Thompson, and committee,

My name is Cathy Gordon. I am an advanced practice nurse practitioner (APRN) in Kansas and Missouri. I am licensed as a board-certified family nurse practitioner and nurse midwife. I am in favor of HB2358.

I have had the privilege to practice in the bi-state area of Kansas City, whereas my clients live both in Missouri and Kansas. My practice included the family, from the womb to the tomb, so to say. In other words, I was able to attend hundreds of births and also attend deaths of many family members of all ages. I started a nonprofit clinic in Shawnee Kansas, which added locations in KCK and Raytown, over 24 years ago specifically to provide health care for the underserved and uninsured in our community.

Let me give you a picture of one of my clients. Donna was a sixty-year-old woman in poor health with many cardiac and mental health problems. She saw many specialists and took many medications. I saw her frequently for routine follow-up, lab work, and assessments. One day she was found sitting in her lazy boy chair deceased, for over 24 hours. I was the last provider who saw her and my name was on her prescription bottles. EMS found at her home. I was able to certify their death as an APRN because she resided in Missouri, something I can not do in Kansas.

As a nurse midwife, I have delivered over three thousand babies. Unfortunately, some of the most difficult times in my midwifery career were those where a baby died before birth or soon after. Babies that die in the womb before birth are born as a "stillbirth".

Learning that your baby has died is a nightmare. It is a difficult time for families who had hoped and prayed for their baby, and also for the providers who had cared for them during their pregnancy. As a nurse midwife who provided prenatal care, I chose to stay with these families during labor. I chose to stay with them and deliver their baby. I chose to help them navigate the worst day of their life, helping them sayP "hello and then goodbye" to the baby they wanted so dearly to live.

Imagine for just a moment the pain, the silence and awkward presence of strangers during this intimate time of a family holding their baby. I was in attendance for their birth, but I could not certify the stillbirth. In Kansas, I needed to have a physician certify the stillbirth. A physician who never met the family or was not present at the birth, to the family, "a stranger".

Now keep in mind, if we knew that the baby could possibly die, or have a high- risk birth, we would involve higher levels of care, but rarely would these physicians attend the birth or deliver the baby. I did. I chose to work with these families through their birth because they chose to carry their babies as long as possible in hopes of a miracle. The physicians and I supported the family birth decisions on who would attend them. None of these families want someone to "deliver their baby" they had never met. These same physicians were asked to certify the stillbirth, even though they were not in attendance at the birth, or a provider who had recently seen the client. Awkward.

Since th inception of my first birth center in 2004 I have been able to certify birth. Please support and pass HB 2358, for APRN's to certify death and stillbirth certificates.

I am available for questions; my personal phone is 913-707-8578.

Sincerely,

Cathy Gordon, APRN, MS, FACNM,
Board certified family nurse practitioner & nurse midwife