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**From:** Committee Services Office  
**Sent:** Sunday, 5 July 2015 4:55 PM  
**To:** LSIC  
**Subject:** New Submission to Inquiry into End of Life Choices

Inquiry Name: Inquiry into End of Life Choices

Mister Raymond Godbold  
[REDACTED]

Was Senior Clinical Nurse Consultant - Palliative Care  
Terminally ILL  
[REDACTED]  
[REDACTED]

## **SUBMISSION CONTENT:**

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I am a 59 year old R.N. Division 1 nurse with 34 years which through out my whole career had contact with palliative patients. The last 4 years I was solely in contact with advanced cancer and palliative clients. In May of 2012 I received the shock diagnoses of malignant, disseminated Gastro-Oesophageal cancer Stage 4. The cancer had spread to my liver and lymph nodes without any warning.

It is my experience that I will have a very difficult and unpleasant death under the current palliative care guidelines and pathways. I have been attendant at many deaths and I myself do not want to spend days in bed being totally dependent receiving Morphine and Midazolam keeping me sedated whilst my body wastes away with my family in attendance. I am currently 52 kilograms a loss of 28 kilograms from my 80 kilograms at diagnosis. I am 6 foot tall.

I am supportive of the current Palliative Care guidelines up until the terminal phase as I have seen many patients die with obstructions in their gastro-intestinal tract especially bowel and have faecal matter in their mouths. This occurs in many diseases especially with cancers that have metastasised. Cancer being a leading cause in death in Australia.

After long thought and careful consideration I joined Dying With Dignity Victoria and decided to go public with my story. I have had two stories about my situation published in The Age newspaper in November of last year and also this year. I have obtained the means to end my life at an appropriate date and time to spare me and my family the pain and indignity that faces me. I do not want to use this and hope that I will die from a catastrophic i.e. AML, etc which is quite possible given my current state of health after 3 separate chemotherapy cycles.

It is my fervent hope that the recommendations of the Committee are in favour for change and support legislative change as you and I will help thousands of Australians, the pain-physical and psychological and the indignity that they and their families currently face under the current Medical system.

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