

## Testimony in Support of H 7234

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Chairwoman Donovan and members of the committee, thank you for your time today. My name is Dr. Lynn Taylor. I am here in support of H 7234. I am a resident of Barrington, a Research Professor at URI, Director of [Rhode Island Defeats Hep C](#), and Co-Director of [MomDocFamily](#), a network of physicians and medical students who are mothers. I completed my Internal Medicine residency at Brown University and Rhode Island Hospital. I loved my training rotation in emergency medicine so much that I considered trying to switch to that program. I then served on faculty for 18 years in Brown's Division of Infectious Diseases at Miriam Hospital. For over 25 years I have worked closely with my Emergency Medicine colleagues and served the people of Rhode Island. I am confident that the bill before you would improve patient care and medical training in our state.

In medicine, it is crucial for our patients that we learn and grow, keep up with evolving standards of care and science, and that we examine how our colleagues are practicing and training. But in this instance, Brown's Emergency Medicine Residency has done the opposite—they have walled themselves off from the rest of the world. They have refused to change their ways and admit that non-human animals are not only unnecessary for teaching emergency medicine procedures, but inferior.

I have served on advisory panels and guideline committees for the Centers for Disease Control and Prevention and the World Health Organization, so I understand the value of collaboration. Here is an incredible chance for Brown to collaborate. Six years ago, their colleagues at the University of Arizona developed their own 3D-printed model for teaching surgical airway, the procedure Brown currently teaches on pigs. In a study of that new model, Arizona's trainees "specifically commented on the realism of the bleeding tissue and texture of the skin."<sup>1</sup> Just three years ago, the University of Washington paramedic program—widely considered the best paramedic training program in the country—built their own simulator and used it to replace pigs for teaching surgical airway.<sup>2</sup>

I care a great deal about my Emergency Medicine friends and colleagues, and H 7234 would only enhance their training. It was traumatizing for me to operate on pigs as a medical student. I am haunted by the savagery and torment I was part of as I returned with agonizing guilt to hug my dog Blue each night. I was baffled that I was being taught on one hand to Do No Harm,

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<sup>1</sup> Hughes K., et al. (2018). Evaluation of an Innovative Bleeding Cricothyrotomy Model. *Cureus*.

<sup>2</sup> Physicians Committee for Responsible Medicine. (2021, Nov. 5). *UW Replaces Animals in Deadly Training Lab Following Years of Pressure from Physicians, Local and State Legislators*. Retrieved from <https://www.pcrm.org/news/news-releases/uw-replaces-animals-deadly-training-lab-following-years-pressure-physicians>

when I was *causing* so much needless harm and suffering. I learned so much more from the simulators than I ever did from that one animal lab.

Increasingly, U.S. medical students, nearly all graduating from schools that have stopped operating on live pigs and other animals, seek a humane residency program. It is not sufficient to say, "That is the way we have always done it, so we will continue." That is not good medicine. If it were, we might still be practicing bloodletting.

Please ensure that Brown's Emergency Medicine residency and all medical programs in Rhode Island use modern, human-relevant training methods. I urge you to support H 7234 and advance this bill out of committee. Thank you for all you do.