

February 5th, 2026

Testimony in Support of SB 1570-1

To the Senate Health Care Committee:

Thank you for taking the time to consider this very important matter.

For 3 shifts consecutively, nearing 36 hours in total, I was the Primary Bedside nurse for a patient in ICE custody. I have never experienced so much fear, anxiety, and confusion when taking care of a patient. Upon admitting this patient, they were shackled at the ankles, a clear fall risk. After asking for the shackles to be removed, a clear safety / fall risk, the ICE agents at bedside denied this request. The patient informed myself and other nursing staff present that they were taken from their home, at gunpoint by multiple agents, and driven in a vehicle for an unknown amount of time, to an unknown location. The patient was brought to the hospital after it was deemed they needed medical care, which then escalated to an admission into the hospital, where I first encountered the patient and ICE.

Every 4 hours, 2 ICE agents would stand "guard" outside of the patient's room. Being the nurse for this patient for nearly 36 hours, I encountered roughly 15 different ICE Agents - all of which were operating under different assumptions / circumstances. 2 of these agents showed up with full masks (gaitors) covering their faces. 2 of these agents told me I was not allowed to be left with my patient. Multiple agents (more than 6), asked me for medical information regarding my patient and their care, which I informed them I would not be giving. I was never provided with any documentation, immigration status, warrant, etc. providing legitimate proof that my patient was to be in ICE custody.

The ICE agents were entering the private hospital unit, as well as walking, talking, and roaming in hallways, with plenty of unsuspecting people walking by. These agents were all dressed in street clothes, some of which included basketball shorts, converse shoes, and American Flag t-shirts.

When being spoken to by myself and other medical staff, the ICE agents were not clear on their directives, creating even more uncertainty. For example, 2 of the ICE agents told me, and a provider, that they did not know if the patient could have a phone call. When asked if they would ask a superior, they said they would "think about it." Later that night, 2 different ICE agents informed the nurse that the patient could have a phone call. When the nurse returned a mere 15-30 minutes later, they said that it was "too late."

In another instance, the ICE agents told me that the patient wanted to leave AMA / Against Medical Advice. I informed them that I needed to hear that from the patient, not from them. When entering the room, and asking them to leave, I got to speak with the patient privately. The patient informed me that they did not want to leave the hospital, but that they were scared and in distress because they did not know what was going to happen to them following their

discharge from the hospital. As a nurse, I am trained in how to comfort and deescalate, and it was clear, all it took was some listening and empathy to bring some calmness back to the patient.

With 2 ICE agents staring down the patient, and nursing staff, 24/7 is not calm for anyone. In one instance, one of the agents began pulling out chains, or shackle looking objects, from a bag in the hallway of the inpatient unit. I was very put off by this, as I felt it was yet another way to try and intimidate myself, the patient, and anyone else who had the knowledge that ICE was present.

This bill is extremely important to protect every single person that steps foot inside the hospital walls. This includes Patients, Nurses, Doctors, Technicians, CNAs, Management, Housekeeping, Pharmacists, Waitstaff, and more. I have had other patients verbalize their concerns about themselves or their family coming to the hospital, as they feared being questioned or detained by ICE. No one should be afraid to seek medical care, and it only makes outcomes worse.

As the nurse for those 3 consecutive shifts, I feel that I developed a very deep moral injury, and am still feeling the effects of it to this day. I have cried tears both at work and at home. I have experienced panic attacks. I have had to begin in person counseling. I have had to relive this soul crushing experience with my colleagues, as well as with leadership / authority figures. Work as a nurse has never felt the same since I had to interact with ICE.

I should not have had to feel the way I have while trying to treat, care, and advocate for my patient. I did not become a nurse to be complicit with ICE. I became a nurse because I care about my patients and their well being. My patient in ICE custody should have been spared from the trauma they experienced, both in and out of the hospital walls.

As a concerned nurse, citizen, and human being, I am asking that you do something about it. You have the power to do so.

Thank you for the opportunity to provide comment and I look forward to your support.