S-1011.1			

SENATE BILL 5683

State of Washington

10

1112

63rd Legislature

2013 Regular Session

By Senators Becker, Hargrove, and Padden

Read first time 02/08/13. Referred to Committee on Health Care .

- AN ACT Relating to information under the death with dignity act;
- and amending RCW 70.245.010, 70.245.040, and 70.245.180.
- BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 Sec. 1. RCW 70.245.010 and 2009 c 1 s 1 are each amended to read 5 as follows:
- The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.
- 8 (1) "Adult" means an individual who is eighteen years of age or 9 older.
 - (2) "Attending physician" means the physician who has primary responsibility for the care of the patient and treatment of the patient's terminal disease.
- 13 (3) "Competent" means that, in the opinion of a court or in the 14 opinion of the patient's attending physician or consulting physician, 15 psychiatrist, or psychologist, a patient has the ability to make and 16 communicate an informed decision to health care providers, including 17 communication through persons familiar with the patient's manner of 18 communicating if those persons are available.

p. 1 SB 5683

- (4) "Consulting physician" means a physician who is qualified by specialty or experience to make a professional diagnosis and prognosis regarding the patient's disease.
 - (5) "Counseling" means one or more consultations as necessary between a state licensed psychiatrist or psychologist and a patient for the purpose of determining that the patient is competent and not suffering from a psychiatric or psychological disorder or depression causing impaired judgment.
 - (6) "Health care provider" means a person licensed, certified, or otherwise authorized or permitted by law to administer health care or dispense medication in the ordinary course of business or practice of a profession, and includes a health care facility.
 - (7) "Informed decision" means a decision by a qualified patient, to request and obtain a prescription for medication that the qualified patient may self-administer to end his or her life in a humane and dignified manner, that is based on an appreciation of the relevant facts and after being fully informed by the attending physician of:
 - (a) His or her medical diagnosis;

- 19 (b) His or her prognosis, and the treatment for cure or prolonging 20 life;
- 21 (c) The potential risks associated with taking the medication to be 22 prescribed;
 - (d) The probable result of taking the medication to be prescribed; and
 - (e) The feasible alternatives including, but not limited to, comfort care, hospice care, and pain control.
 - (8) "Medically confirmed" means the medical opinion of the attending physician has been confirmed by a consulting physician who has examined the patient and the patient's relevant medical records.
 - (9) "Patient" means a person who is under the care of a physician.
 - (10) "Physician" means a doctor of medicine or osteopathy licensed to practice medicine in the state of Washington.
 - (11) "Qualified patient" means a competent adult who is a resident of Washington state and has satisfied the requirements of this chapter in order to obtain a prescription for medication that the qualified patient may self-administer to end his or her life in a humane and dignified manner.

SB 5683 p. 2

- 1 (12) "Self-administer" means a qualified patient's act of ingesting 2 medication to end his or her life in a humane and dignified manner.
- 3 (13) "Terminal disease" means an incurable and irreversible disease 4 that has been medically confirmed and will, within reasonable medical 5 judgment, produce death within six months.
- 6 **Sec. 2.** RCW 70.245.040 and 2009 c 1 s 4 are each amended to read as follows:
 - (1) The attending physician shall:

15

24

25

26

29

30

31

32

- 9 (a) Make the initial determination of whether a patient has a 10 terminal disease, is competent, and has made the request voluntarily;
- 11 (b) Request that the patient demonstrate Washington state residency under RCW 70.245.130;
- 13 (c) To ensure that the patient is making an informed decision, 14 inform the patient of:
 - (i) His or her medical diagnosis;
- 16 (ii) His or her prognosis, and the treatment for cure or prolonging
 17 <u>life</u>;
- 18 (iii) The potential risks associated with taking the medication to 19 be prescribed;
- 20 (iv) The probable result of taking the medication to be prescribed; 21 and
- (v) The feasible alternatives including, but not limited to, comfort care, hospice care, and pain control;
 - (d) Refer the patient to a consulting physician for medical confirmation of the diagnosis, and for a determination that the patient is competent and acting voluntarily;
- 27 (e) Refer the patient for counseling if appropriate under RCW 28 70.245.060;
 - (f) Recommend that the patient notify next of kin;
 - (g) Counsel the patient about the importance of having another person present when the patient takes the medication prescribed under this chapter and of not taking the medication in a public place;
- (h) Inform the patient that he or she has an opportunity to rescind the request at any time and in any manner, and offer the patient an opportunity to rescind at the end of the fifteen-day waiting period under RCW 70.245.090;

p. 3 SB 5683

- 1 (i) Verify, immediately before writing the prescription for 2 medication under this chapter, that the patient is making an informed 3 decision;
- 4 (j) Fulfill the medical record documentation requirements of RCW 5 70.245.120;
 - (k) Ensure that all appropriate steps are carried out in accordance with this chapter before writing a prescription for medication to enable a qualified patient to end his or her life in a humane and dignified manner; and
 - (1)(i) Dispense medications directly, including ancillary medications intended to facilitate the desired effect to minimize the patient's discomfort, if the attending physician is authorized under statute and rule to dispense and has a current drug enforcement administration certificate; or
 - (ii) With the patient's written consent:

8

9

11 12

13

14

15

18

19

2021

22

23

- 16 (A) Contact a pharmacist and inform the pharmacist of the 17 prescription; and
 - (B) Deliver the written prescription personally, by mail or facsimile to the pharmacist, who will dispense the medications directly to either the patient, the attending physician, or an expressly identified agent of the patient. Medications dispensed pursuant to this subsection shall not be dispensed by mail or other form of courier.
- (2) The ((attending)) physician ((may)) who signs the patient's death certificate ((which)) shall list ((the underlying terminal disease as)) the cause of death as assisted suicide.
- 27 **Sec. 3.** RCW 70.245.180 and 2009 c 1 s 18 are each amended to read 28 as follows:
- 29 (1) Nothing in this chapter authorizes a physician or any other 30 person to end a patient's life by lethal injection, mercy killing, or 31 active euthanasia. Actions taken in accordance with this chapter except for filling out the death certificate and for recording accurate 32 vital statistics do not, for any purpose, constitute suicide, assisted 33 suicide, mercy killing, or homicide, under the law. State reports 34 35 shall ((not)) refer to practice under this chapter as (("suicide" or)) 36 "assisted suicide((\cdot, \cdot))" or "ingested lethal medication" consistent with RCW $70.245.010 \ ((\frac{7}{7}, \frac{11}{11}, \frac{11}{11}), \frac{11}{11}) \ (12) \ (\frac{70.245.020(1)}{11}, \frac{11}{11})$ 37

SB 5683 p. 4

(2) Nothing contained in this chapter shall be interpreted to lower the applicable standard of care for the attending physician, consulting physician, psychiatrist or psychologist, or other health care provider participating under this chapter.

--- END ---

p. 5 SB 5683