

Physician Guide to Oregon's Aid In Dying Law

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The Death with Dignity law (Oregon Revised Statute [127.800-127.995](#)) gives adult Oregonians who are imminently dying the choice to control the manner and timing of their death with a physician's prescription.

Two physicians certify the individual is eligible to use the law – one physician writes the prescription and submits the required documents to Oregon Department of Human Services and the other physician is a consultant.

WHO IS ELIGIBLE?

The law requires that the patient:

- Be an adult - 18 years of age or older,
- Be capable - able to make and communicate health care decisions,
- Be an Oregon resident,
- Have a terminal illness – a disease that will, within reasonable medical judgment, produce death in 6 months, and
- Make a voluntary request.

LEGAL REQUIREMENTS OF THE PRESCRIBING (“ATTENDING”) PHYSICIAN

You must document the elements of an informed decision in the chart as follows:

- Diagnosis,
- Prognosis,
- Potential risks associated with taking the medication (vomiting and death, or rarely, the medication is ineffective),
- Result of taking the medication (death),
- And the feasible alternatives, which include but are not limited to comfort care, hospice, and pain control.

After exploring the basis of the request, document your reminders to the patient of his or her "right to rescind" the request. You must recommend that your patient discuss his or her intentions with relatives and take the medication with another person in attendance in a private site. Obtain a consultation from another physician to confirm the diagnosis and prognosis.

If either physician is unsure of the patient's decision-making capacity or judgment, refer the patient to a psychiatrist or psychologist. The attending physician may not write the prescription until the psychiatrist or psychologist determines the patient is capable and does not have impaired judgment.

LEGAL REQUIREMENTS OF THE CONSULTING PHYSICIAN

The consultant must examine the patient and relevant records and explore the basis for the request. He or she must document all the elements of an informed decision. The consultant must request a referral IF there is a question about the patient's capability or judgment. The consultant must document this process on the [Consulting Physician's Compliance Form](#) and deliver the form to the attending physician.

TIMING SAFEGUARDS OF THE ACT

- The attending physician must wait at least fifteen (15) calendar days after the patient's first oral request AND forty-eight (48) hours after the patient has signed the [Request for Medication Form](#) to write the prescription. The earliest a physician may write a prescription is 15 days after the first oral request. The first request may be made to any physician who documents the request.

- The patient cannot sign the [Request for Medication Form](#) until the prescribing and consulting physicians determine that the patient is eligible.
- The patient may make the second oral request no less than fifteen (15) calendar days after the first request.

The medication procedure and name of a cooperating pharmacist are available from us by request.

SPECIAL CIRCUMSTANCES

Poor candidates for using this law are patients unable to ingest the entire medication mixture in approximately two (2) minutes and patients who have poor drug absorption, bowel obstruction, or uncontrolled vomiting. Other options include voluntary refusal of food and fluids and palliative sedation. Contact us to discuss the problem.

Should the Prescribing Physician be Present?

The choice is your patient's and yours. *Compassion* offers to have experienced volunteers present and our volunteers always offer your patient one more chance to change his or her mind.

How Terminally Ill Patients Die after Self-Administering the Medication to Hasten Death

According to the Department of Human Services 12th Annual Report, 460 patients have successfully hastened death ingesting a barbiturate according to our law since October 1997. Patients have slipped into a coma in 1 to 38 minutes (median 5 min.) and have died within 1 minute to 104 hours (median 25 min.) after ingestion of the barbiturate. Twenty patients died after vomiting some of the lethal medication.

After the Patient Has Died

Family and or friends should notify hospice. If the patient is not on hospice, we recommend notifying the prescribing physician. To assure patient and physician confidentiality, the prescribing physician should fill out the Death Certificate as follows:

- Under "Immediate Cause of Death" (part 50), insert the patient's underlying terminal illness.
- Under "Manner of Death" (part 52), check "Natural".

Reporting Requirements

The Act requires physicians to report to Oregon Dept. of Human Services (DHS) that collects information about patients who use the law. The DHS forms are available at <http://www.oregon.gov/DHS/ph/pas/pasforms.shtml>, or from Compassion & Choices of Oregon.

Copies of the following forms must be mailed to DHS up to 7 days after writing the prescription:

- One 2-page [Attending Physician Compliance Form](#);
- The [Consulting Physician's Compliance Form](#);
- The patient's completed [Request for Medication Form](#), which must be witnessed by 2 individuals (see paragraph at the bottom of the written Request form); and
- If obtained, the [Psychiatric/Psychological Consultant's Compliance Form](#).

Do not mail medical record copies.

The mailing address is on the state forms and Compassion & Choices of Oregon will provide you with specific directions to fill out all forms. Information that all parties provide to the DHS regarding identity of patients, physicians, and pharmacists is confidential.

When your patient dies, you must fill out pertinent sections of the 6-page [Attending Physician Follow-up Form](#) that is available on line at : <http://www.oregon.gov/DHS/ph/pas/docs/mdintdat.pdf> Or call us to assist you.

The law is available at <http://www.oregon.gov/DHS/ph/pas/ors.shtml>.