How to talk to your Doctor about Medical Aid in Dying in Hawai‘i

Discuss your end-of-life priorities with your medical team now to ensure the options you want will be available to you. Confirm that your doctor will support your choices.

Suggestions for starting the conversation

For those who do not have a terminal illness:

I value quality of life. Should I become terminally ill and no longer able to enjoy living, I would like to have the option of medical aid in dying.

I hope you will honor my decisions and respect my values, as I respect yours. Would you write a medical aid-in-dying prescription in accordance with the law if I qualify? If you will never be willing to honor my request, please tell me now.

For those who do have a terminal illness:

I want to have the authorized option to advance the time of my death if my suffering becomes unbearable.

Am I eligible for medical aid in dying? If yes, will you write a prescription in accordance with the Our Care, Our Choice Act?

If not, will you refer me to a doctor who is willing to write a prescription? If I am not eligible, what will my condition look like when I am eligible?

Medical aid in dying is a safe and trusted medical practice in which a terminally ill, mentally capable adult with a prognosis of six months or less to live may request from his or her doctor a prescription for medication which they can choose to self-ingest to bring about a peaceful death.

No one but you can make this request to your doctor(s). And it is important to ask only your doctor; do not ask your physician’s office staff, nurse or physician’s assistant, or leave a request on voicemail.

You may mention that Compassion & Choices provides assistance to physicians through our Doc2Doc Program, which offers free, confidential telephone consultation with a seasoned medical director. Please feel free to give your physician our Doc2Doc flier or the Doc2Doc phone number: 1-800-247-7421.

The Our Care, Our Choice Act

To be eligible for medical aid in dying under the Our Care, Our Choice Act, a person must be:

➔ An adult
➔ Terminally ill
→ Given a prognosis of six months or less to live
→ Mentally capable of making their own healthcare decisions.

In addition, a person must meet the following requirements:

→ A resident of Hawai‘i
→ Acting voluntarily
→ Capable of self-administering the medical aid-in-dying drug.

Eligibility to use the law is not the same as eligibility for hospice.

Two Hawai‘i physicians must confirm eligibility to use the Our Care, Our Choice Act, as well as confirm that you are making an informed decision and voluntarily requesting the medical aid-in-dying medication. The attending physician prescribes the medication, and the consulting physician provides a second opinion. (An attending physician is described as a physician who has primary responsibility for care of the individual and their disease.)

A patient’s mental capacity must also be confirmed by a psychiatrist, psychologist or licensed clinical social worker. This evaluation may be provided through telehealth (by phone or video).

You may change your mind at any time. You may at any time withdraw or rescind your request for a prescription for medical aid in dying, and there is no obligation to take the medication once you have it in your possession.

For more information please visit www.CompassionandChoices.org/Hawaii or email Hawaii@compassionandchoices.org.