

Frequently Asked Questions:

Delaware's Ron Silverio/Heather Block End-of-Life Options Act

What is the Ron Silverio/Heather Block End-of-Life Options Act?

An Act that authorizes medical aid in dying, an established medical practice which allows a terminally ill, mentally capable adult resident of Delaware with a prognosis of six months or less to request a prescription from their qualified healthcare provider for medication they can choose to self-ingest to die peacefully on their own terms.

Who is Eligible for Medical Aid in Dying?

To be eligible for medical aid in dying under the Ron Silverio/Heather Block End-of-Life Options Act, a person must be:

- > An adult,
- > Terminally ill,
- > Given a prognosis of six months or less to live, and
- > Mentally capable of making their own healthcare decisions.

In addition, a qualified patient must be:

- > A resident of Delaware,
- > Acting voluntarily, and
- > Capable of self-ingesting the aid-in-dying medication.

Two qualified Delaware healthcare providers must confirm eligibility to use the Ron Silverio/Heather Block End-of-Life Options Act, as well as confirm that the person requesting it is making an informed decision and voluntarily requesting the aid-in-dying medication.

In addition to the requirements listed above, a multi-step request process must be followed in order for a person to qualify for a prescription for aid-in-dying medication. More information about this process can be found at CompassionAndChoices.org/Delaware.



Which Healthcare Providers May Participate?

Under the law, Delaware-licensed physicians and advanced practice registered nurses (APRNs) may participate in medical aid in dying. A qualified patient must see two healthcare providers: an *attending* physician or APRN and a *consulting* physician or APRN. An attending physician or APRN is designated by a qualified patient to have primary responsibility for the individual's terminal illness. A consulting physician or APRN must be qualified by specialty or experience to make a professional diagnosis and prognosis related to the patient's terminal illness.

Is the Practice of Medical Aid in Dying Trusted?

Yes, because the eligibility requirements ensure that only mentally capable, terminally ill adults with a prognosis of six months or less are able to request and obtain aid-in-dying medication. In Delaware, the law specifically states that no person can qualify for aid-in-dying medication solely based on disability or age.

Additionally, in Oregon, studies suggest that end-of-life care has improved overall since the law's implementation, in large part due to the dialogue that the Oregon Death With Dignity Act encourages between people and their healthcare providers.¹ Hospice referrals are up, as is the use of palliative care.² Oregon now has one of the lowest rates of in-hospital deaths and the highest rates of at-home deaths in the nation.³ Almost 30 years of rigorously observed and documented experience in Oregon shows us the law has worked as intended, with none of the problems opponents had predicted.

How Does the Public Feel About Medical Aid in Dying?

The American public consistently supports medical aid in dying by large majorities in independent national and state surveys. In a 2021 poll, two out of 3 voters (67%) nationwide said if they "had an incurable, terminal illness, still had a sound mind, had less than six months to live, and ... met the legal requirements," they "would want the option of medical aid in dying."⁴ By nearly a 4-1 margin (72% vs. 20%), Delaware voters surveyed support legislation "that would give terminally ill patients with decision-making capacity the right to take medication to end their own lives."⁵



How Does the Medical Profession Feel About Medical Aid in Dying?

Among U.S. physicians, support for medical aid in dying is strong. In a 2022 survey, nearly 3 out of 4 Delaware physicians surveyed (74%) said they support current legislation that would allow terminally ill adults the legal option of medical aid in dying to end their suffering.⁶ More than 3 out of 4 physicians (77%) in the same survey who identified as a member of the Medical Society of Delaware (MSD) support medical aid-in-dying legislation.

What Can I Do to Make Sure My Provider Will Support Me if I Ever Want to Access Medical Aid in Dying?

Ask your healthcare providers now whether they will support your end-of-life options, including medical aid in dying. This will encourage your providers to listen to your priorities and become prepared to provide you with the treatment you may want in the future. If your providers are unable or unwilling to support your end-of-life choices, you have the option to change your care to a healthcare team that puts your wishes first.

My Healthcare Providers Want to Better Understand Medical Aid in Dying; Where Can They Learn More?

The Compassion & Choices End-of-Life Consultation (EOLC) team provides personalized and confidential support around end-of-life planning. Consultants are available to answer questions and provide resources to healthcare providers and terminally ill individuals. EOLC can be contacted directly at eolc@compassionandchoices or by calling 800.247.7421.

Are There Other Resources Available to Learn More About Medical Aid in Dying?

You can visit CompassionAndChoices.org/Delaware for more information, including videos, forms and other resources.



How Do I Talk to My Healthcare Provider or Hospice About Medical Aid in Dying?

Compassion & Choices has handouts on its website (CompassionAndChoices.org/Delaware) with tips on how to talk to your healthcare provider about medical aid in dying and how to interview a hospice to make sure that your medical team will support you in your choices.

Do All Healthcare Providers Have to Participate in Medical Aid in Dying?

No. Providers may choose whether to participate, so it is important to ask your healthcare team whether they will support your end-of-life choices. Some healthcare systems may actually prohibit their employees from participating in medical aid in dying – however, no healthcare system can prohibit their employees from providing scientific and accurate information about medical aid in dying to patients. Under the law, healthcare systems and institutions that prohibit their employees from participating in medical aid in dying are required to provide notice of the institution’s policy to the employees and the public.

What Cause of Death Should be Listed on the Death Certificates of Individuals Who Have Accessed Medical Aid in Dying?

The underlying illness should be listed as the cause of death. The law specifies that a death resulting from self-administering aid-in-dying medication is not suicide.



Endnotes

1. A Therapeutic Death: A Look at Oregon's Law. Psychology, Public Policy, and Law. K. Cerminara, A. Perez, (2000) Available from:
<https://www.ncbi.nlm.nih.gov/pubmed/12661538>
2. Geographic Variation of Hospice Use Patterns at the End of Life. Journal of Palliative Medicine, S.Y. Wang, M.D, Aldridge, C.P. Gross, et al.. (2015) Available from:
<https://doi.org/10.1089/jpm.2014.0425>
3. Lessons from Oregon in Embracing Complexity in End-of-Life Care. New England Journal of Medicine, S.W. Tolle, MD, J.M. Teno, MD, (2017) Available from:
<https://www.nejm.org/doi/abs/10.1056/NEJMs1612511>
4. Poll Shows Voters Much More Likely to Vote for Candidates Who Support Medical Aid in Dying. CompassionandChoices.org, P. Portillo & D. Blank, (2022) Available from
<https://compassionandchoices.org/news/poll-shows-voters-much-more-likely-to-vote-for-candidates-who-support-medical-aid-in-dying/>
5. Poll shows broad support for medication assisted suicide in Delaware. WHYY, M. Eichmann, (2020) Available from:
<https://whyy.org/articles/medication-assisted-suicide-gets-broad-support-in-delaware-poll/>
6. Nearly Three in Four Delaware Physicians Surveyed Support State's Current Medical Aid-in-Dying Bill. CompassionandChoices.org, P. Portillo, D. Blank, (2022) Available from:
<https://compassionandchoices.org/news/nearly-three-in-four-delaware-physicians-surveyed-support-state-s-current-medical-aid-in-dying-bill/>

