



NEW JERSEY

**Introduction to
Medical Aid in Dying**



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New Jersey's Medical Aid in Dying for the Terminally Ill Act

The Medical Aid in Dying for the Terminally Ill Act authorizes the practice of medical aid in dying, allowing a terminally ill, mentally capable adult with six months or less to live to request from their doctor a prescription for medication that the individual can choose to self-administer to bring about a peaceful death if their suffering becomes unbearable.

To be eligible to use the law, one must:

- » Be an adult
- » Terminally ill
- » Given a prognosis of six months or less to live
- » Mentally capable of making their own healthcare decisions.

One must also be:

- » A resident of New Jersey
- » Acting voluntarily and making an informed decision
- » Capable of self-administering the medical aid-in-dying drug

Two New Jersey physicians must confirm eligibility to use the Medical Aid in Dying for the Terminally Ill Act. The attending physician, who has primary responsibility for care of the terminally ill individual and their disease, determines initial eligibility. The consulting physician confirms eligibility. Once eligibility is confirmed and all of the regulatory requirements of the law have been completed, the attending physician is the provider who writes the prescription.

If either the attending physician or the consulting physician has any concerns that the terminally ill individual may not be capable of making the request for medical aid in dying, that provider must refer the individual to a psychiatrist, psychologist or licensed clinical social worker for a determination of capacity. In that case, a prescription cannot be written for aid-in-dying medication unless and until the mental health professional determines that the individual making the request is capable of making their own medical decisions.

An individual may change their mind at any time and withdraw their request, or choose not to take the medication.

An individual must make a total of three requests to their attending physician (also called the prescribing physician) to use the Medical Aid in Dying for the Terminally Ill Act: two verbal requests and one written request. The written request is made by filling out the Request for Medication to End My Life in a Humane and Dignified Manner form provided by the state, which is included in this packet. Only the terminally ill individual can make these requests; they

cannot be made through an advance directive or by a family member, friend, or healthcare proxy. The requests must be made to a physician, not office staff. Please see the "Steps" section of this document for details.

The type and dosage of aid-in-dying medication doctors prescribe, including medications to prevent nausea and vomiting, vary with each individual. The medication is not administered via injection. The terminally ill individual must be able to ingest the medication themselves, which usually requires swallowing or by using a feeding tube. No one can administer the medication to the terminally ill individual. **The attending physician must send the prescription directly to the pharmacy. The pharmacy will NOT accept a prescription directly from an individual.** A designated family member or friend may pick up the medication.

Any physician who has questions about appropriate clinical practice guidelines or the kind of medication, they may call Compassion & Choices' free and confidential Doc2Doc consultation line at 800.247.7421.

Terminally ill individuals should contact their insurance carrier about what their policy covers and be sure to ask their physician or pharmacy about the cost of these medications. Some health-care insurance policies cover the cost of medical aid in dying including the physician visits and the the medication, others such as Medicare, do not.

Life insurance benefits are not affected by requesting or using the Medical Aid in Dying for the Terminally Ill Act. The law specifies that a death resulting from self-administering aid-in-dying medication is not suicide.

Unused medication:

There is no obligation to take the medication. If the person who was prescribed the medication does not use it, it should be disposed of safely and properly in accordance with state and federal law. Please note it is illegal to use another person's medication. If the terminally ill individual decides to pick up the medication, he or she must designate a person who will be responsible for the lawful disposal of any unused aid-in-dying medication after their death.

What to do with unused medication:

- » Use the following website to search for a controlled substance public disposal location near you: <https://www.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s1>
- » Contact the pharmacist for more information.

If pharmacists have any questions, they may call Compassion & Choices' free and confidential Pharmacist2Pharmacist consultation line at 503.943.6517 for more information.

Steps for Using the Law

- 1. Make two verbal requests for a prescription for aid-in-dying medication directly to your attending physician.** Ask your physician to make sure these requests are documented in your medical record. These two verbal requests must be separated by at least 15 calendar days.
- 2. In addition to your prescribing physician, a consulting physician must certify that you are eligible to use the law and that you are making both an informed decision and a voluntary request.**
- 3. If deemed necessary,** a patient's capacity to make their own health care decisions will also be confirmed by a psychiatrist, psychologist or licensed clinical social worker.
- 4. You must fill out the Request for Medication to End My Life in a Humane and Dignified Manner form** and give the completed form directly to the attending physician. **This form must be witnessed by two people.** Please read the form carefully to determine who may or may not be a witness. This form can be filled out at the first oral request or any time thereafter.
- 5. At least 48 hours after the Request for Medication to End My Life in a Humane and Dignified Manner form is signed and dated, your prescribing physician may write the prescription.** The prescription must be sent directly to the pharmacy by the prescribing physician, not by you, a family member or friend. The pharmacy may need time to order the medication. Some pharmacies will prepare the medication before it is picked up if the prescribing doctor adds this instruction to the prescription.
- 6. The minimum amount of time the process can take, from the first request to the written prescription, is 15 days. However, for many people it takes considerably longer.** We encourage people who are interested in medical aid in dying as one of their end-of-life care options to start talking to their healthcare providers well in advance. Once the prescription is written, you may choose to keep it on file at the pharmacy if and until you choose to use the medication. You need not pay for the medication until the prescription is filled.
- 7. You may withdraw your request at any time.** There is no obligation to take the aid-in-dying medication simply because you have it in your possession. Many people find comfort in simply knowing the medication is available.
- 8. If the terminally ill person does pick up the medication, they must designate the person who will be responsible for its safe disposal, if they ultimately do not use it.**

The forms required for the Medical Aid in Dying for the Terminally Ill Act will be available on the State Department of Health website or at [CompassionAndChoices.org/new-jersey](https://www.compassionandchoices.org/new-jersey).

Talking With Your Physician

Some people feel anxious about discussing medical aid in dying with their physicians. By explaining your preferences early in your illness, you are more likely to have an end-of-life experience consistent with your values.

SUGGESTIONS ON HOW TO DISCUSS AID IN DYING WITH YOUR PHYSICIANS

Language for someone who DOES NOT have a terminal illness:

I value quality of life. If I am no longer able to find dignity in my life and I meet the legal requirements, I would like to have the option of using the Medical Aid in Dying for the Terminally Ill Act.

I hope you will honor my decisions and respect my values, as I respect yours. Will you write a prescription for aid-in-dying medication in accordance with the Medical Aid in Dying for the Terminally Ill Act should I become eligible? If you will not honor my request, please tell me now.

Language for someone who DOES have a terminal illness:

I want the option to advance the time of my death if my suffering becomes unbearable. Am I eligible? If yes, will you write a prescription for medical aid-in-dying medication in accordance with the Medical Aid in Dying for the Terminally Ill Act? If you will not write the prescription, will you record in my chart that I am eligible to use the law and refer me to a physician who is able and willing to honor my request?

If I am not eligible, what will my condition look like when I am eligible?

Regardless of your physician's response, it is important to ask that your request be recorded in your medical record.

You may mention that Compassion & Choices provides free and confidential consultation to physicians who have questions about end-of-life options, including medical aid in dying, through our Doc2Doc consultation program at 800.247.7421. Also feel free to give them the "Letter to Your Physician" included in this packet.

End-of-Life Care Planning Checklist

Please see Compassion & Choices Plan Your Care Resource Center for more resources at CompassionAndChoices.org/end-of-life-planning.

Many people postpone making arrangements for the end of life. Planning ahead allows individuals to spend their final days with friends and family while focusing on the present. Informing loved ones of wishes ahead of time relieves them of the possible burden of making decisions about your final arrangements.

Please consider whether any of the following are appropriate for your situation:

- Advance directive or living will
- Identifying and assigning a healthcare proxy (also called agent, durable power of attorney, healthcare representative)
- POLST (Practitioner Orders for Life-Sustaining Treatment Physician Orders for Life-Sustaining Treatment) and/or DNR order (Do Not Resuscitate)
- Last will and testament or living trust
- Life insurance policies
- Memorial service and/or funeral arrangements
- Detailed instructions regarding finances (bank accounts, pensions, investments, property, etc.)

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Compassion & Choices' End-of-Life Consultation program (EOLC) provides information on the full range of options at the end of life. EOLC, and representatives of EOLC, do not provide medical or legal advice. We simply inform individuals of the available options.

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Letter for Your Physician

800 247 7421 [phone](tel:8002477421)
CompassionAndChoices.org

Dear Dr. _____:

The Medical Aid in Dying for the Terminally Ill Act will go into effect on August 1, 2019, authorizing medical aid in dying as an end-of-life option. You may receive patient inquiries about this option and thus might wish to discuss it alongside other end-of-life choices with your patients. Compassion & Choices has over 40 years of combined experience in this evolving field and is here to help you keep your practice safe, effective, patient-centered and legally compliant.

We provide a wide range of free resources to support you and your patients, including:

- » One-on-one consultations with physicians who have years of end-of-life and medical aid-in-dying experience through our free and confidential **Doc2Doc program: 800.247.7421**.
- » Clinical Criteria for Physician Aid in Dying and supplemental clinical information published in the Journal of Palliative Medicine (2015).
- » Information on our website:
 - » CompassionAndChoices.org/new-jersey – includes eligibility requirements, information for medical providers, and forms needed to comply with the law.
 - » CompassionAndChoices.org/in-your-state/new-jersey/resources-for-doctors – provides free informative videos that can help you in your practice.
 - » CompassionAndChoices.org/end-of-life-planning – features tips, toolkits and forms on end-of-life care and choice for individuals seeking information on the full range of end-of-life options, including a video for terminally ill patients wanting to learn more about medical aid in dying.
 - » CompassionAndChoices.org/resources – includes fact sheets on medical aid in dying.

If you have a patient requesting medical aid in dying, please contact our Doc2Doc line at 800.247.7421 so we can provide you with up-to-date information on medication protocols. These protocols are updated and reviewed regularly, and provided free of charge.

Along with the guidance of a team of local doctors, Compassion & Choices is committed to providing stewardship of the law. As a leader in the medical aid-in-dying movement, we have established a record of authority, integrity and accessibility in this evolving field of medicine and law. We are committed to providing support and clinical information for physicians and other medical providers interested in supporting their patients who are eligible and want the option of medical aid in dying.

Please feel free to contact us at any time with questions or concerns. We look forward to hearing from you.

With kind regards,



Dr. David Grube
National Medical Director, Compassion & Choices

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Medical Aid-in-Dying Tracking Sheet



Individual Name _____ Consultant/Volunteer _____

This handout is a tool intended for personal use to help you keep track of important information related to the choice of medical aid in dying. It is neither a requirement of any medical aid-in-dying legislation, nor do you need to submit it to any person or medical professional.

It is important to review and update (if necessary) your advance directive and POLST prior to taking the medical aid-in-dying medication.

IMPORTANT: You may wish to contact your doctor if your health status changes or you are concerned about symptoms that may interfere with your ability to ingest aid-in-dying medications (i.e. uncontrolled nausea & vomiting; concerns about swallowing or ability to plunge feeding tube; digestive issues; changes in mental status).

Durable power of attorney for health care (name/relationship/phone) _____

Hospice _____

If not on hospice: Physician designated to sign death certificate? _____

Individual designated to contact mortuary? _____

Prescribing physician _____ Phone _____

Consulting physician _____ Phone _____

Date of 1st verbal request _____ Physician Name _____

Date of 2nd verbal request _____ Physician Name _____

Date written request submitted _____

Mental health evaluation completed (if required) _____

Aid-in-dying medication protocol prescribed _____

Physician or pharmacist designated to review medication _____

Date aid-in-dying prescription sent to pharmacy _____

Date of planned ingestion _____

Who knows about plan _____

Who will be present during ingestion _____

Who will be your medical support on day of ingestion?

Hospice Doctor

Contact _____ Phone Number _____

Individual plan for day of ingestion _____

Plan for support person(s) _____

Plan for unexpected event (such as prolonged dying process or waking up)

Date(s) discussed _____

Details _____

For California ONLY:

Date Final Attestation form completed _____

Who will deliver form to prescribing physician _____

Additional Notes _____

