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POLICY

Hospitals exist to heal, educate and provide comfort, including pain relief. When a patient has been diagnosed with a terminal illness, the patient and his/her family need time to grieve and to plan for the end of life and the loved one's future. Decisions related to death and dying, especially choosing to end life, should be made with a clear mind, with full knowledge of the options and consequences involved, and with the support and advice of family and trusted, long standing advisors.

Acute care hospitalizations by nature are of short term duration. Healthcare providers in the hospital setting have become increasingly specialized and do not have an established, long term relationship with the patient to understand all of the issues the patient may be facing. The hospital healthcare providers can provide support and education, but that does not take the place of an on-going developed physician/patient relationship. Therefore, EvergreenHealth Monroe will not participate under the Death with Dignity Act.

EvergreenHealth Monroe believes in the principle of autonomy and the individual's right to choose. We recognize that some patients may desire to seek physician advice and consultation regarding the ending of life. We recommend that the hospital not interfere between a patient and his/her primary care physician, but would encourage the physician and patient to consider all options including Hospice and other end of life comfort measures.

- 1. Washington law recognizes certain rights and responsibilities of qualified patients and health care providers under the Death with Dignity Act ("Act"). Under Washington law, a health care provider, including EvergreenHealth Monroe is not required to assist a qualified patient in ending that patient's life.
- 2. EvergreenHealth Monroe has chosen to not participate under the Death with Dignity Act. This means that in the performance of their duties, EvergreenHealth Monroe

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physicians, employees, independent contractors and volunteers shall not assist a patient in ending the patient's life under the Act on hospital premises. EvergreenHealth Monroe pharmacists will not dispense medications for the purpose of ending life.

- No patient will be denied other medical care or treatment because of the patient's
 participation under the Act. The patient will be treated in the same manner as all
 other EvergreenHealth Monroe patients. The appropriate standard of care will be
 followed.
- 4. Any patient wishing to receive life-ending medication while a patient at this hospital will be assisted in transfer to another facility of the patient's choice. The transfer will assure continuity of care.
- 5. All providers at EvergreenHealth Monroe are expected to respond to any patient's query about life-ending medication with openness and compassion. We believe our providers have an obligation to openly discuss the patient's concerns, unmet needs, feelings, and desires about the dying process. Providers should seek to learn the meaning behind the patient's questions and help the patient understand the range of available options, including but not limited to comfort care, hospice care, and pain control. Ultimately, EvergreenHealth Monroe's goal is to help patients make informed decisions about end-of-life care.

PROCEDURE

- 1. All patients will be provided with educational materials about end-of-life options. These materials will include a statement that EvergreenHealth Monroe does not participate in the Act.
- 2. If, as a result of learning of EvergreenHealth Monroe's decision not to participate in the Act, the patient wishes to have care transferred to another hospital of the patient's choice, Hospital staff will assist in making arrangements for the transfer. If the patient wishes to remain at EvergreenHealth Monroe, staff will discuss what end of life care will be provided consistent with hospital policy.
- 3. If a patient requests a referral to a physician who will fully participate under the Act or expresses the desire to take medication that will result in the patient's death, the provider may choose to provide the patient with a referral, or may instruct the

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patient that he or she must find a participating provider on his or her own. The relevant medical records will be transferred to the physician taking over the patient's care. The patient's primary clinical care giver (nurse or social worker) will be responsible for:

- a. Informing the patient's attending physician that the patient wishes to take lifeending medications.
- b. Ensuring that the medical record is complete and all required documentation is included. A copy of the Resuscitation Status (DNR) order, copies of advance directives, and POLST (Physician Orders for Life Sustaining Treatment) form are to be included.
- c. Communicating with other clinicians involved with the patient to ensure continuity of care.
- d. Documenting all communication in the patient's medical record.
- 4. Nothing in this policy prevents a physician or provider from making an initial determination that the patient has a terminal disease and informing the patient of the medical prognosis.
- 5. Nothing in this policy prevents a physician or provider from providing information about the "Washington State Death with Dignity Act" to a patient when the patient requests information.
- 6. Nothing in this policy prohibits a physician who is employed by or who is an independent contractor of EvergreenHealth Monroe from participating under the Act when not functioning within the Hospital.

Sanctions

If a provider participates in the Act beyond what is allowed in the policy, EvergreenHealth Monroe may impose sanctions on that provider. EvergreenHealth Monroe shall follow due process procedures provided for in the medical staff bylaws. Sanctions may include:

· Loss of medical staff privileges;

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Loss of membership;

Public Notice

EvergreenHealth Monroe will provide public notice of this policy in the following ways: posting the policy or information about the hospital's stance on the Death with Dignity Act on the hospital's web page; informing local media; and including information in the hospital's materials regarding advance directives.

Resources

Any patient, employee, independent contractor, volunteer or physician may contact the Ethics Committee, Spiritual Care, or Social Services for assistance.

REFERENCES

Initiative 1000/Washington Death with Dignity Act.
WAC 246-978, Washington State Department of Health Regulations
The Oregon Death with Dignity Act: A Guidebook for Health Care Professionals

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