UC San Diego
SCHOOL OF MEDICINE

1

Medical Aid in Dying

Evolution & Future of California's End of Life Option Act

2

Thaddeus Pope

May 22, 2026

3

1 disclosure

4

Wolters Kluwer
UpToDate®

royalties - for 2 topics on MAID

5

6

2026

7

3,100,000

total deaths

8

300,000

CA

9

control

timing & manner of their death

10

11

physical

suffering

12

pain
nausea
dyspnea
paralysis

13

existential
suffering

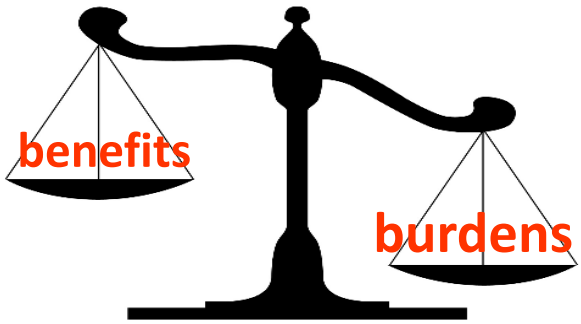
14

psychic pain
loss of control
anxiety
delirium
despair

15

control
timing & manner
of their death

16



17

lost ability to
enjoy activities

18

fear illness related suffering

19

fear losing control & independence

20

21

22

UC San Diego
HEALTH SYSTEM

23

control
timing & manner of their death

24

how?

25

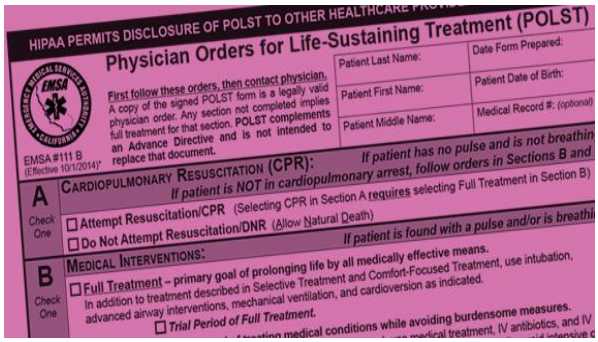
5 end-of-life options

26

1

27

28



29

decline

life-sustaining treatment

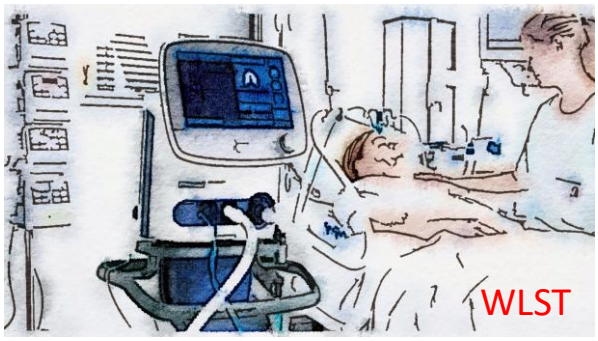
30

dialysis
antibiotics
ANH
mech vent

31

2

32



33

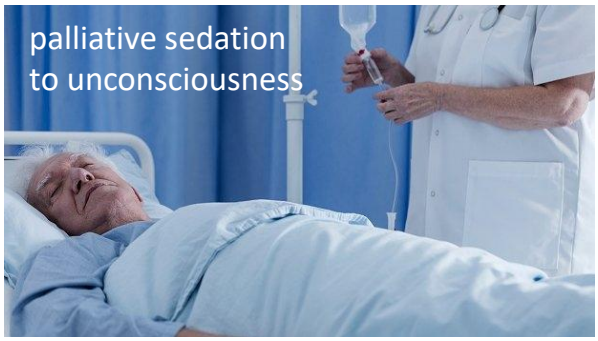
3

34

35

4

36



37

5

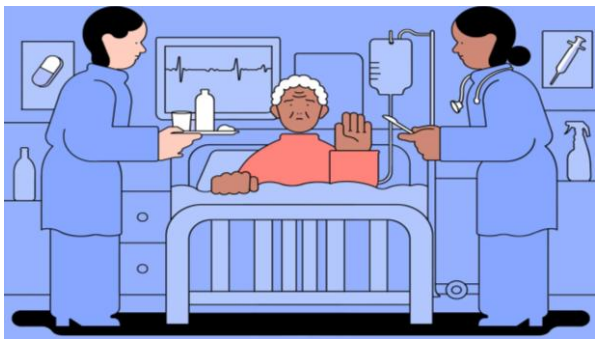
38

Voluntarily
Stop
Eating &
Drinking

39

VSED

40



41

patients **already** use these 5 EOL options in **CA**

42

43

6th option

44

MAID

45

roadmap

46

3 parts

47

part 1

48

what is MAID?

49

part 2

50

first 10 years

51

2016 - 2026

52

June 9, 2026

53

part 3

54

next
10 years

55

2026 - 2036

56

57

unifying theme

58

Faye Girsh Endowed Lecture on Medical Aid in Dying

59

60

61

"I could go on for **hours** … about why … California's End of Life Option Act is **too restrictive**"

62

unifying theme

63

access

64

can patients **get** MAID

65

can patients **get** MAID -- when it **fits** their goals, preferences, values

66

unifying theme is **access**

67

what is MAID?

68

end-of-life option

69

for **small** number of patients

70

who

71

1

72

adults

73

18+ years

74

2

75

decisional capacity

76

competent

77

mentally capable

78

understand nature & consequences

79

nobody can request MAID for another

80

~~conservator~~

81

~~healthcare agent~~

82

~~surrogate~~

83

~~parent~~

84

patient **themself**

85

3

86

terminally ill

87

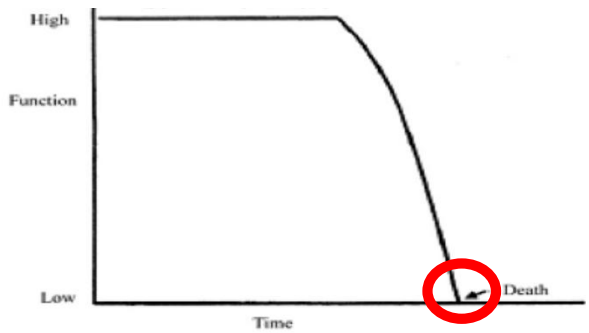
final stage of an **incurable & irreversible** physical medical condition

88

will cause death

< **6** months

89



90

4

91

able to self-ingest

92

drink from cup or straw

press plunger

93

recap

94

adult
competent
terminally ill
able self-ingest

95

what

96

ask & receive prescription

drugs

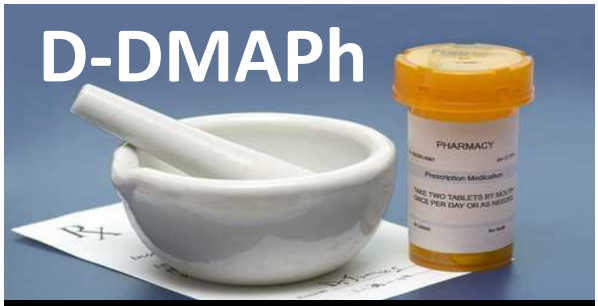
97

self-administer

to hasten death

98

D-DMAPh



digoxin, diazepam, morphine , amitriptyline , phenobarbitol

99

sleep	**dead**
3m	45m

100

quick

peaceful

painless

101

3 ways to take

102

103

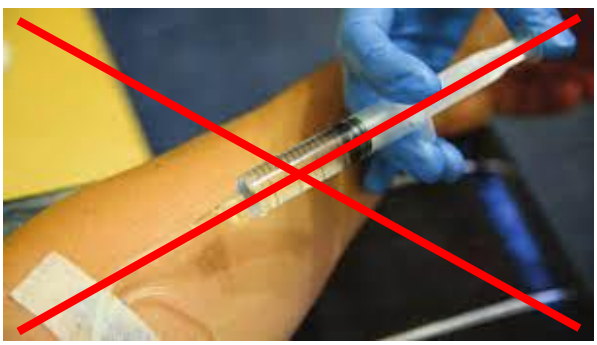
104

105

106

only those
3 routes

107



108

others may help Pt **prepare** meds

109

110

may not help Pt **administer** meds

111

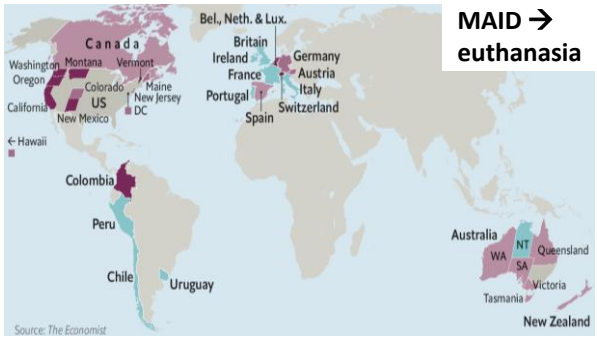
patient alone

takes final overt act

112

113

114



115

but

116

117

118

nobody may administer drugs **to** the patient

119

patient does it

themself

120

that's

what MAID **is**

121

122

108,000,000

Americans live in a MAID jurisdiction

123

1 in 3

Americans

124

132 years

combined experience

125

OR	28	HI	8
WA	18	ME	7
MT	17	NJ	7
VT	13	NM	5
CA	10	DE	1
CO	9	NY	0
DC	9	IL	0

126

>30,000
patients

127

>11,000
California

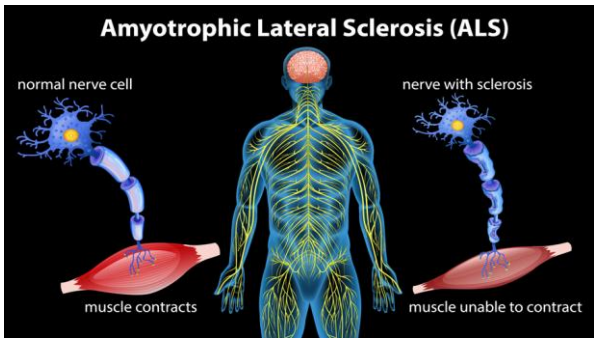
128

66%
cancer

129

1 in 100

130



131

1 in 10

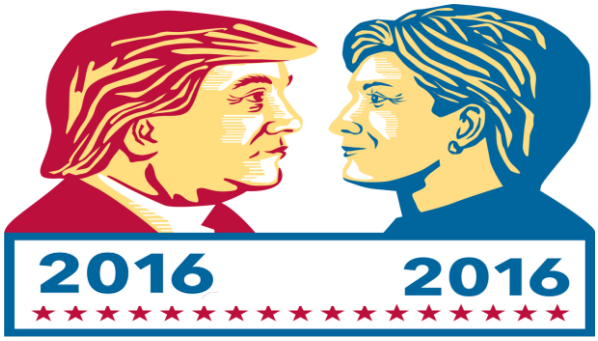
132

that's **enough** background & overview

133

1st 10 years CA EOLOA

134



135

1988

136

CA was poised to be a leader

137

A Special Supplement, January/February 1989

The California Humane and Dignified Death Initiative

by Allan Parachini

138

but

139

140

1992

141

142

161 Physician-Assisted Death. Terminal Condition. Initiative Statute.

Official Title and Summary Prepared by the Attorney General

PHYSICIAN-ASSISTED DEATH. TERMINAL CONDITION. INITIATIVE STATUTE.

- Authorizes mentally competent adult to request in writing "aid in dying", as defined, in event terminal condition is diagnosed. Establishes rules for executing, witnessing, revoking request.
- If properly requested, authorizes physician to terminate life in "painless, humane and dignified manner"; provides immunity from civil or criminal liability for participating health care professionals, facilities.
- Allows physicians, health care professionals, privately owned hospitals to refuse assistance in dying if religiously, morally, ethically opposed.
- Provides requesting, receiving authorized assistance "not suicide."
- Prohibits existence or non-existence of directive from affecting insurance policy terms, sale, renewal, cancellation, premiums.

143

but

144

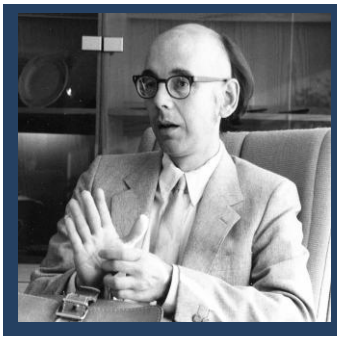
145

no 54%
yes 46%

146

1992

147



Thomas Donaldson

148

CALIFORNIA COURTS
Courts of Appeal

no

2 Cal. App. 4th 1614

149

150

151

AB 1080 (1995)
AB 1310 (1995)
AB 1592 (1995)
AB 654 (2005)
AB 651 (2006)
AB 374 (2007)

152

SO…

153

154

155

1994

156

157

158

159

2008

160

161

2009

162

163

2013

164

165

2015

166

167

168

169

2 Pt/day

rest of 2016

170

but

171

we started

amending

EOLOA

172

173

2017

174

STATE OF CALIFORNIA
AUTHENTICATED
ELECTRONIC LEGAL MATERIAL

Senate Bill No. 811

CHAPTER 269

175

176

2018

177

STATE OF CALIFORNIA
AUTHENTICATED
ELECTRONIC LEGAL MATERIAL

Assembly Bill No. 282

CHAPTER 245

178

Safe Harbor

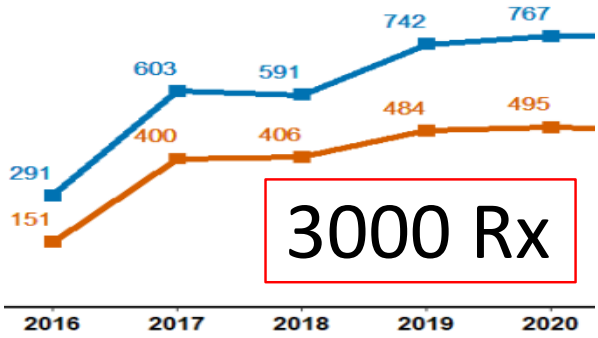
179

1st 4 years

180

2016 - 2020

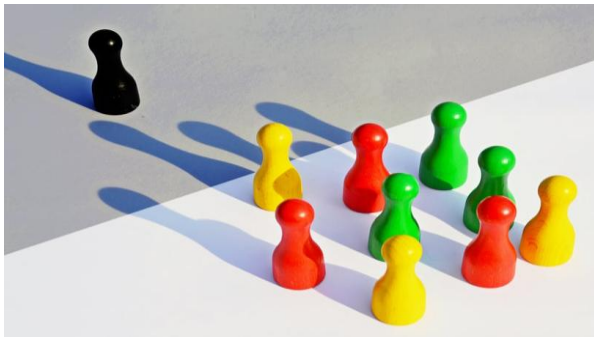
181



182

but

183



184

2 reasons

185

186

187

SO…

188

2021

189

STATE OF CALIFORNIA
AUTHENTICATED
ELECTRONIC LEGAL MATERIAL

Senate Bill No. 380

CHAPTER 542

190

MOST IMPORTANT

191

192

193

wait period
sunset
final
attestation

post policy
immunity
opt out
public place

194

3 changes

195

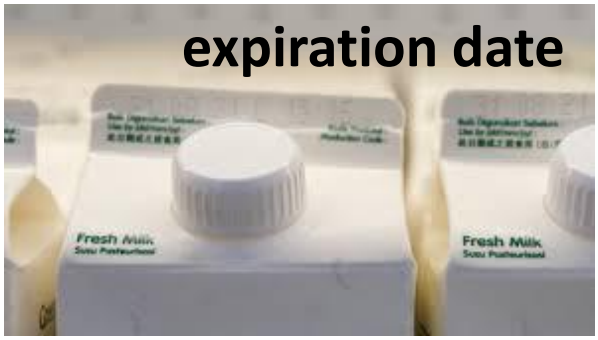
1st change

196

extended
the sunset

197

198



199

"remain in effect **only until** January 1, 2026"

200

S.B. 380 pushes back to **2031**

201

2nd change

202

transparency
which entities participate

203

"each health care entity shall **post** on … **website** … **policy** governing medical aid in dying"

204

allows Pt to make informed choice **where** to get care

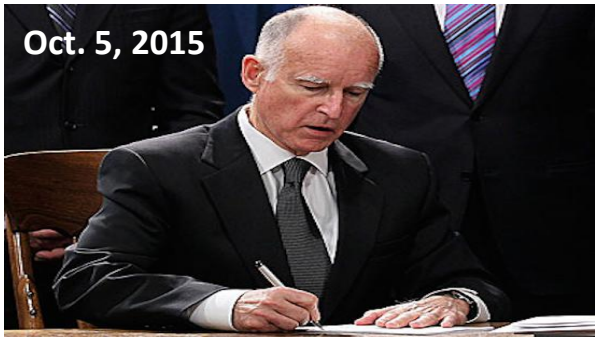
205

3rd change

206

shortened waiting period

207



208

2 oral requests separated by **15+ days**

209

but

210

undue burden

211

many patients cannot wait that long

212

JAMA Intern Med. 2017 Dec 26;178(3):417-421. doi: 10.1001/jamainternmed.2017.7728

Characterizing Kaiser Permanente Southern California's Experience With the California End of Life Option Act in the First Year of Implementation

213

Situating requests for medical aid in dying within the broader context of end-of-life care: ethical considerations

Seller L, *et al. J Med Ethics* 2019;**45**:106–111. doi:10.1136/medethics-2018-104982

Lori Seller,[1,2] Marie-Ève Bouthillier,[3] Veronique Fraser[1]

35% lost capacity

19% died

214

so…

215

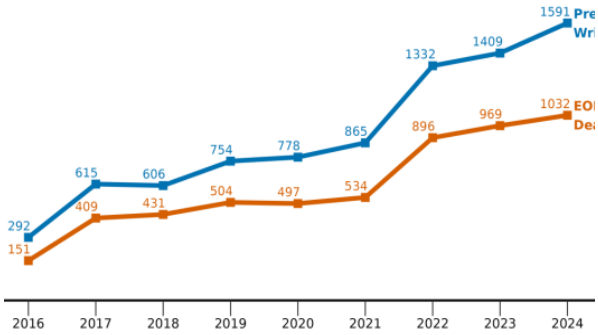
216

217

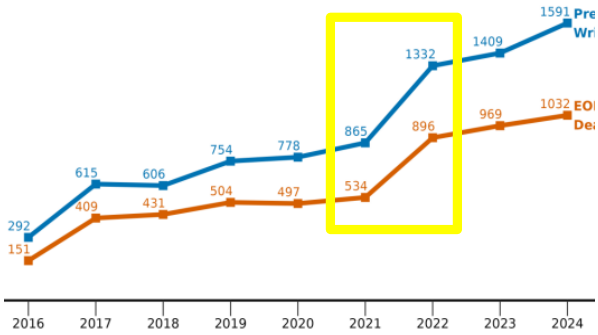
CALIFORNIA END OF LIFE OPTION ACT
2024 DATA REPORT

CDPH
California Department of Public Health

218



219



220

54% increase

2021 - 2022

221

next largest increase = 13%

222

that was

S.B. 380

223

224

2025

225

STATE OF CALIFORNIA
AUTHENTICATED
ELECTRONIC LEGAL MATERIAL

Senate Bill No. 403

CHAPTER 315

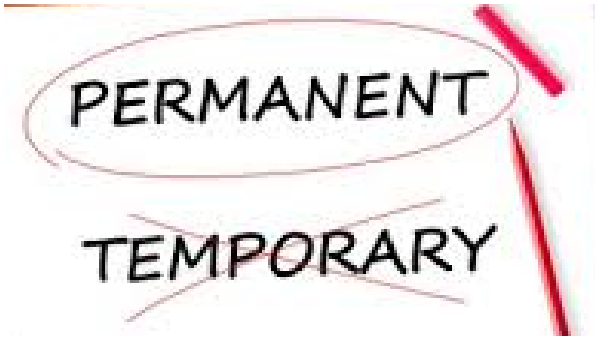
An act to repeal Section 443.215 of the Health and Safety Code, relating to public health.

226

227

repeals the sunset clause

228



229

230

first

10 years

231

2016 - 2026

232

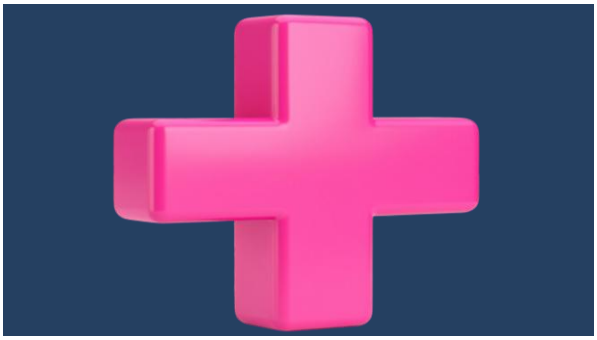
233

4 times

234

2015	original
2016	SB 811
2017	AB 282
2021	SB 380
2025	SB 403

235



236

attempted changes

237

4 **more** times

238

2016	SB 1002
2018	SB 1336
2023	AB 1665
2024	SB 1096

239

2016	SB 1002
2018	SB 1336
2023	AB 1665
2024	**SB 1096**

240

2021

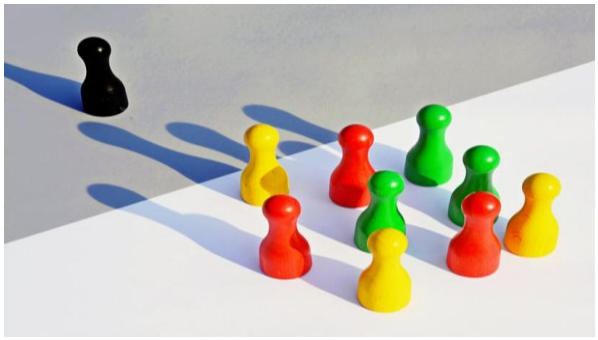
241

SB 380 improved **access**

242

but

243



244

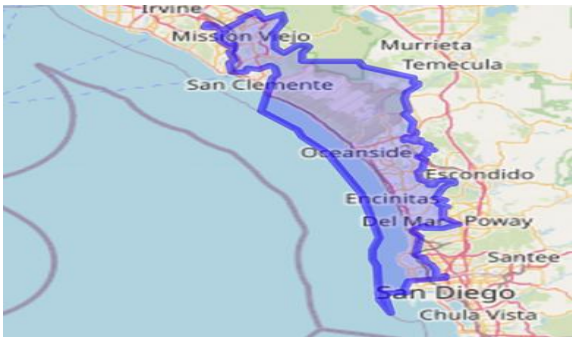
so…

245

2024

246

247



248

AMENDED IN SENATE MARCH 19, 2024

SENATE BILL **No. 1196**

Introduced by Senator Blakespear

February 14, 2024

249

amend
EOLOA

Assembly Bill No. 15

CHAPTER 1

An act to add and repeal Part 1.85 (commencing with Section 443) Division 1 of the Health and Safety Code, relating to end of life.

[Approved by Governor October 5, 2015. Filed with Secretary of State October 5, 2015.]

250

2 changes

251

1st change

252

253

2nd change

254

~~terminal illness~~

255

~~6 mo~~

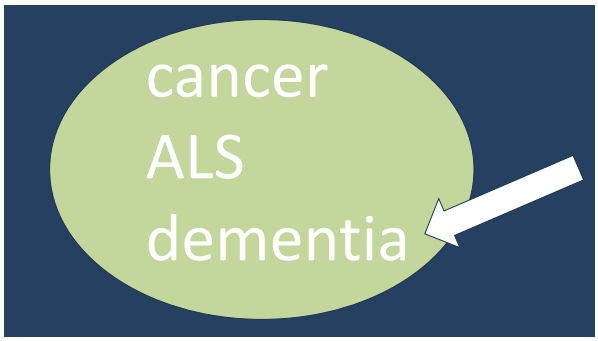
256

grievous & irremediable medical condition

257

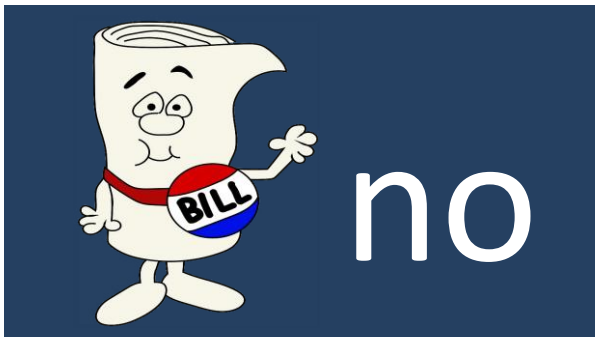
"diagnosis of **early to mid-stage dementia**"

258



259

260



261

262

263

264

but

265

266

3 cases

267

case 1

268

2021

269

assisted
self-administration

270

anyone can **help**
Pt get meds,
mix, hold straw

271

but

272

nobody may help
Pt make drugs go
into their body

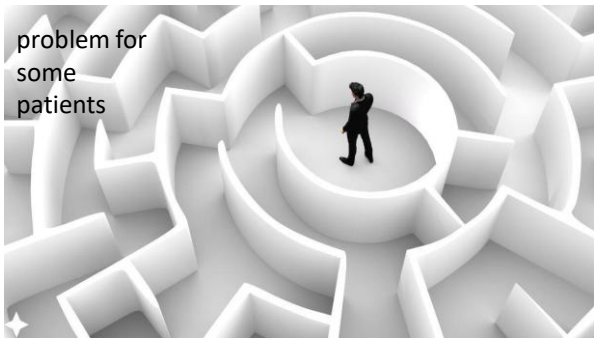
273

HPD opens murder probe after alleged violation of Hawaii's assisted death law

By Star-Advertiser staff

Jan. 4, 2025

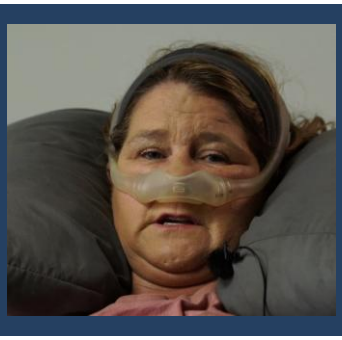
274



275

ALS patients need **help** to self-administer

276



Sandy Morris

277

MAID **earlier** than wanted because still physically able

278

United States District Court
Northern District of California

279

ADA
Americans with Disabilities Act

280

ADA permits (even requires) assist to **complete** self-administration

281

282

case 2

283

2016

284

SANG-HOON AHN, ET AL.
Plaintiffs and Respondents,

v.

MICHAEL HESTRIN, ETC., ET AL.,
Defendants;

CATHERINE S. FOREST,
Movant and Appellant.

285

SUPERIOR COURT OF CALIFORNIA
COUNTY OF RIVERSIDE

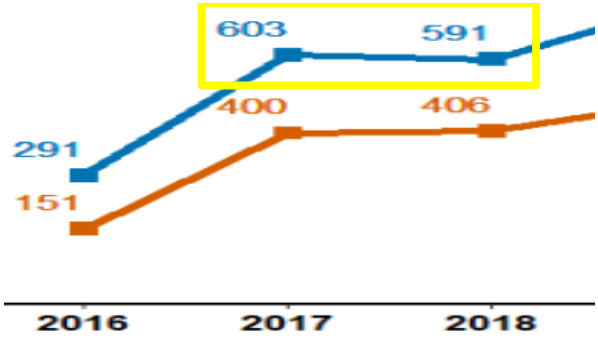
invalid &
unconstitutional

286

287

288

289



290

case 3

291

2025

292

UNITED STATES DISTRICT COURT

CENTRAL DISTRICT OF CALIFORNIA – WESTERN DIVISION

UNITED SPINAL ASSOCIATION; NOT DEAD YET; INSTITUTE FOR PATIENTS' RIGHTS; COMMUNITIES ACTIVELY LIVING INDEPENDENT AND FREE; LONNIE VANHOOK; INGRID TISCHER,

Plaintiffs,

vs.

STATE OF CALIFORNIA; GAVIN NEWSOM, in his official capacity as Governor; ROBERT BONTA in his official capacity as Attorney General;

CASE NO. 2:23-CV-03107 DMG (PVCx)
Assigned to Hon. Fernando L. Aenlle-Rocha, Ctrm. 6B

lost

293

IN THE UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT

UNITED SPINAL ASSOCIATION, *et al.*,
Plaintiffs and Appellants,

v.

STATE OF CALIFORNIA, *et al.*,
Defendants and Appellees.

294

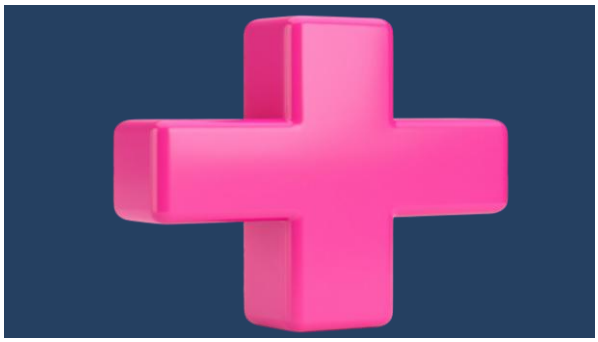
295

first
10 years

296

297

298



299

changes at
institutional
level

300

JOURNAL OF PALLIATIVE MEDICINE
Volume 23, Number 1, 2020

DOI: 10.1089/jpm.2019.0169

Hospital and Health System Policies Concerning the California End of Life Option Act

Cindy L. Cain, PhD,[1] Barbara A. Koenig, PhD,[2] Helene Starks, PhD,[3] Judy Thomas, JD,[4] Lindsay Forbes, BA,[2] Sara McCleskey, MS,[5] and Neil S. Wenger, MD[6]

301

TABLE 2. CONTENT OF HOSPITAL POLICIES FOR HOSPITALS THAT PERMIT THE END-OF-LIFE OPTION (*N* = 106 HOSPITALS AND 35 POLICIES)

	Hospitals, n *(%)*	*Policies,* n *(%)*	*Discharge,*[a]*%*
Requires additional safeguards			
Yes	40 (38)	14 (40)	13
No	66 (62)	21 (60)	29

302

2 examples

303

example 1

304

Stanford HEALTH CARE

305

Stanford MEDICINE | Stanford Center for Biomedical Ethics

Stanford Center for Biomedical Ethics

306

dropped as unnecessary

307

example **2**

308

UCSF Health

309

EOLOA

310

MAID is only for Pts with decision-making **capacity**

311

capacity assessed

attending MD

and

consulting MD

312

2 assessments

313

refer to mental health specialist only if **unsure**

314

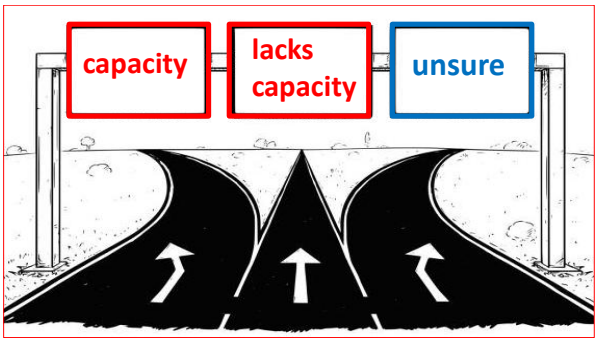
MAKES SENSE

315

physicians determine capacity **every day**

316

317



318

UCSF Health

319

320

required MH visit for **every** MAID Pt

321

3rd assessment **automatic**

322

but … after a few years

323

Journal of the Academy of Consultation-Liaison Psychiatry
Volume 66, Issue 2, March–April 2025, Pages 172-178

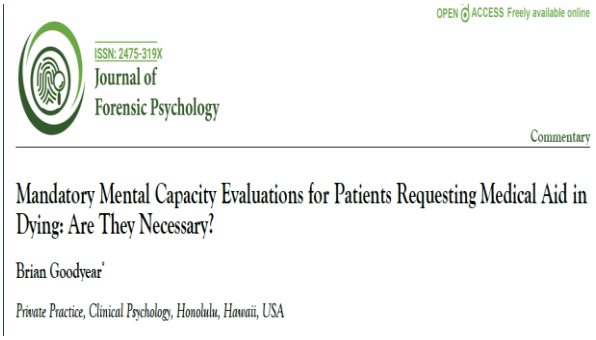
Perspective

Implementation of the California End of Life Option Act at UCSF: Examining the Utility of the Mandatory Mental Health Assessment in Medical Aid in Dying

324

3rd assessment adds **nothing** in terms of Pt safety

325



OPEN ACCESS Freely available online

ISSN: 2475-319X
Journal of
Forensic Psychology

Commentary

Mandatory Mental Capacity Evaluations for Patients Requesting Medical Aid in Dying: Are They Necessary?

Brian Goodyear*

Private Practice, Clinical Psychology, Honolulu, Hawaii, USA

326

potentially costly, time-consuming, and burdensome –

justified by **no benefit**

327

so…

328

dropped it

329

other institutions have dropped **their** additional safeguards

330

331

1st 10 years

332

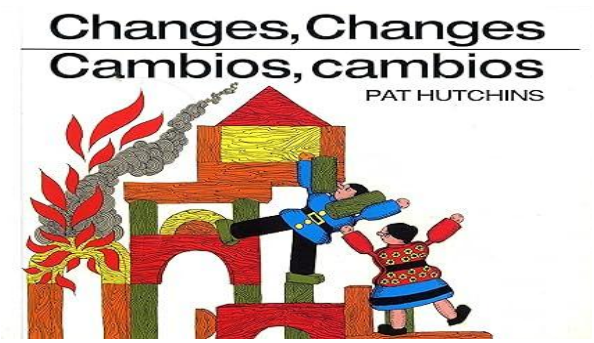
June 9, 2016

June 8, 2026

333

multiple changes

334



335

336

NOT. DONE. YET.

337

changes will

continue

338

339

340

next

10 years

341

June 9, 2026

June 8, 2036

342

343

344

345

346

347

348

349

350

MAID

351

10 changes

352

5 easier

353

5 harder

354

355

356

change 1

357

enforce
SB 380

358

voluntary
& optional

359

no clinician
must participate
who does not want

360

no facility

must participate
who does not want

361

but

362

how does
Pt identify

363

SB 380

364

who participates

who does not

365

"each health care entity shall **post … website** … policy governing medical aid in dying"

366

367

368

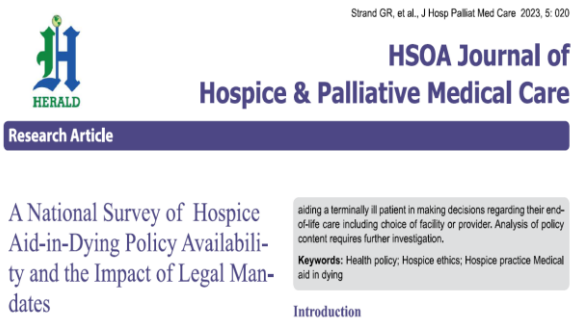
but

369

massive
non-compliance

370

371



372

Health Care Organization Policies about the California End of Life Option Act

The Paper Victory of the Medical Aid in Dying Movement

Megan S. Wright and Cindy L. Cain

373

Hospices Don't Want to Advertise Where they Stand on the End of Life Option Act (EOLOA)

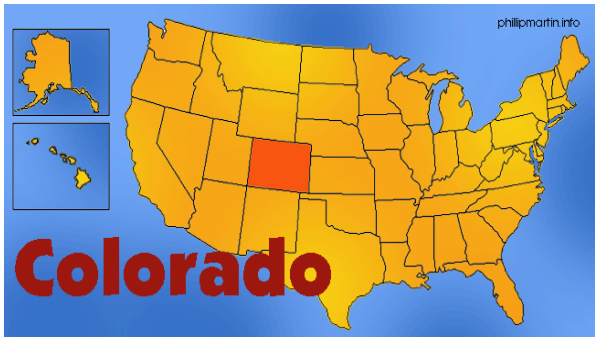
By Pat Fisher, HSSD Member/Volunteer

Despite the legal requirement (CA SB380) that healthcare entities (that includes home health care agencies) post their End of Life Option Act (EOLOA) policy1 on their website we are only aware of 4 non-hospital hospices (out of 94 San Diego County hospices with licenses) that have posted statements indicating some level of support for EOLOA. 3 of the hospices are designated "Profit Corp." by the CA

374

contrast

375



376

Patients' Right to Know Act
Service Availability Form
(continued)

COLORADO
Health Facilities & Emergency Medical Services Division
Department of Public Health & Environment

Ley sobre el derecho de los pacientes a saber
Formulario de disponibilidad de servicios (continuación)

End-of-life Healthcare Services
Servicios de salud hacia el final de la vida

Medical-Aid-in-Dying Services
Servicios de asistencia médica para el proceso de muerte

Service or Item *Servicio o concepto*	Service *Servicio*	Referral *Referencia*	Service or Item *Servicio o concepto*	Service *Servicio*	Referral *Referencia*
Counseling, discussion, and education regarding medical-aid-in-dying services	--	--	Performing or assisting with the written and verbal request requirement	--	--

377

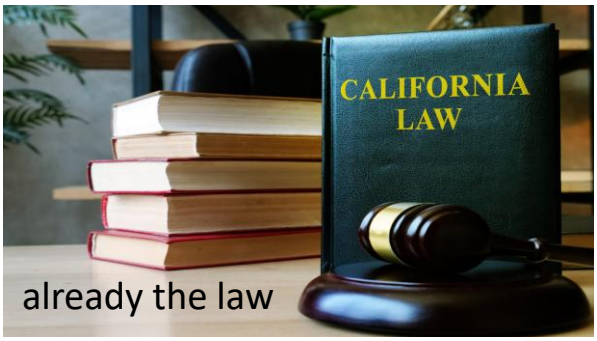
that's

change #1

378

enforce
SB 380

379



380

require
transparency

381

patients can make
informed choices
where to get care

382

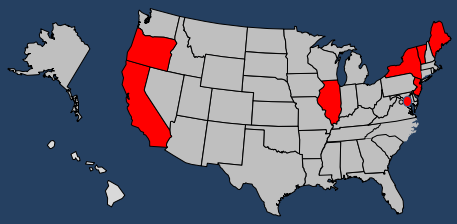
change **2**

383

who can
prescribe

384

8 states



385

386

physicians **only**

387

MD *or* DO

388

but

389

MAID has been changing

390

391

more focus on

access

392

can patients **get** it?

393

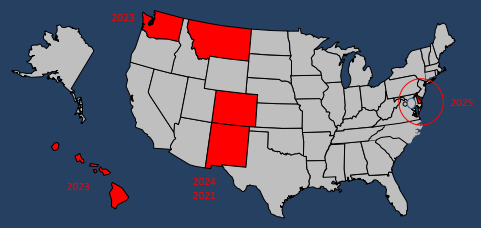
394

395

SO…

396

6 states



397

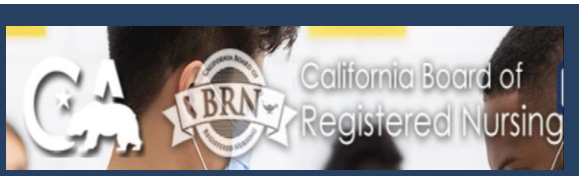
also

APRN *or* PA

398

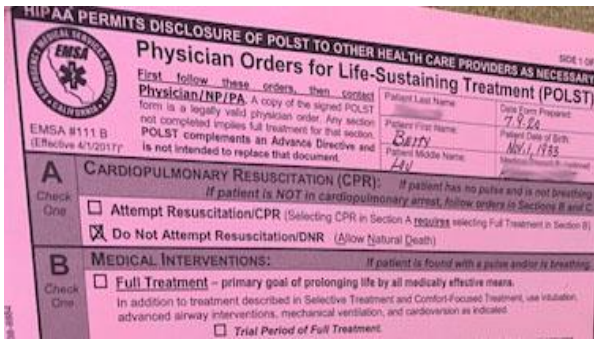
IN IA KY MN NH PA VA WI

399



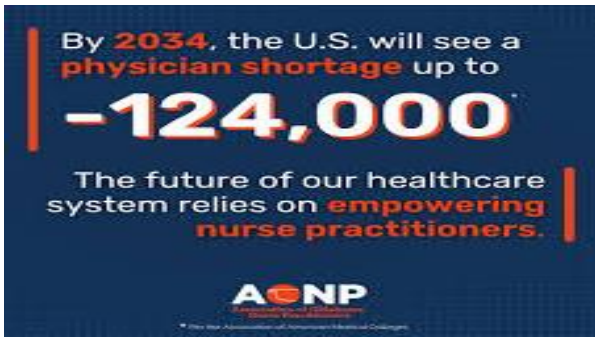
50,000

400



401

402



403

404

405

that's

change #2

406

407

permit **APRNs** to be consulting or attending clinician

408

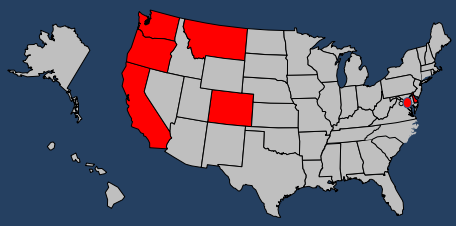
change 3

409

who can make 3rd capacity assessment

410

7 states



411

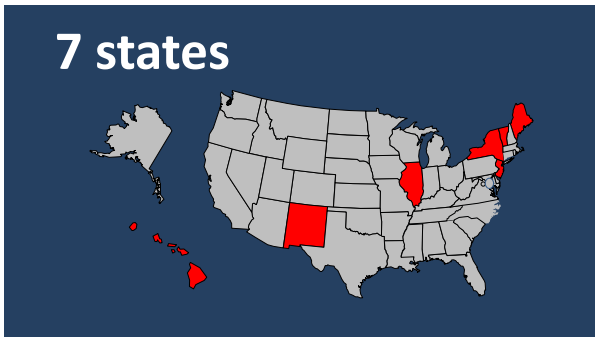
412

psychologist
or
psychiatrist

413

but

414



415

416

psychiatric nurse practitioner

licensed clinical social worker

clinical mental health counselor

417

that's

change #3

418

419

expand licensees who can do MH screenings

420

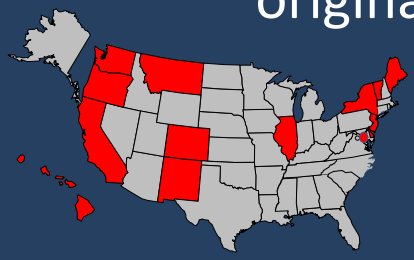
change 4

421

residency requirement

422

originally



423

"resident of ___"

424

425

CA permits MAID for **only** **CA** patients

426

but

427

2023

428

~~"resident of ___"~~

429

430

Vermont

431

432

IA MI MN
NH NY WI

433

434

435

"citizens of each state shall be entitled to **all privileges ... of citizens** in [other] states"

436

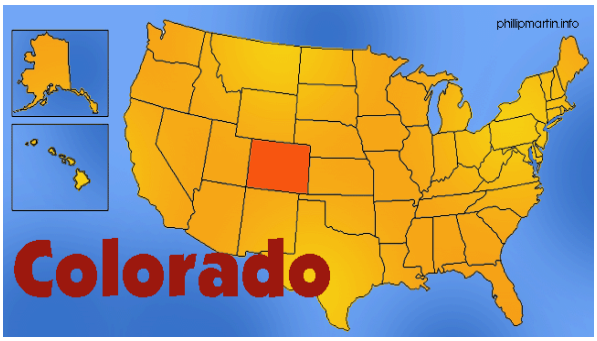
SO …

437

CA **may not** limit MAID to Californians

438

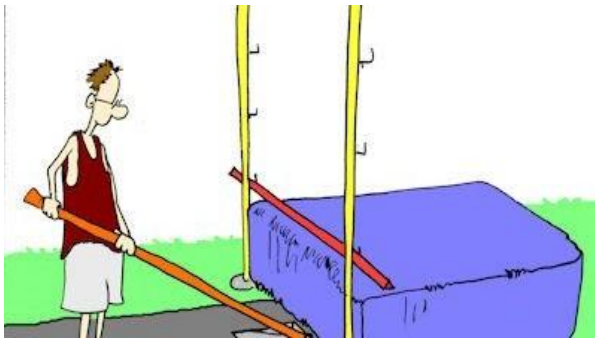
439



440

441

442



443

driver license

voter registration

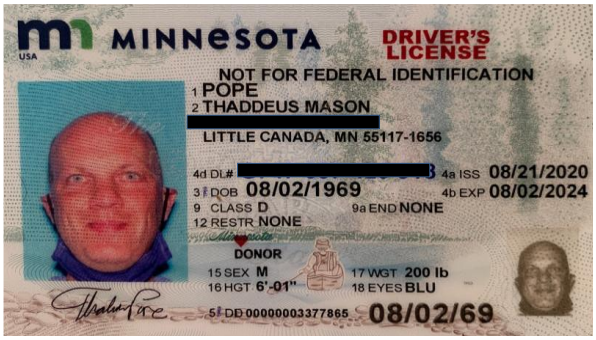
tax return

own / **lease property**

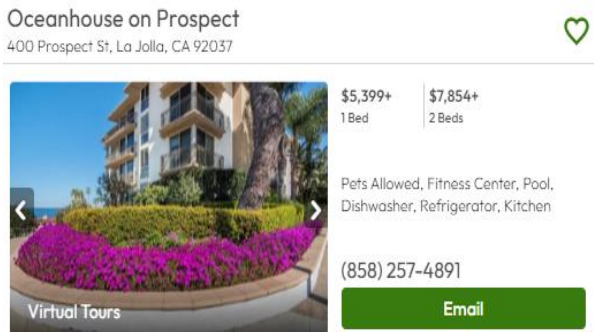
444

no minimum duration

445



446



447

I'm a **CA** resident

448

449

Pt **already** come to California for MAID from all over the world

450

so…

451

452

that's
change #4

453

drop the residency requirement

454

change 5

455

informed consent

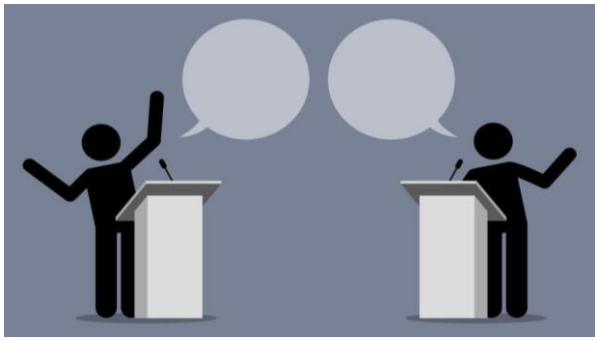
456

3 issues

457

issue 1

458



459

wait for Pt to ask

or

MD raise option

460

461

462

3 reasons

463

reason 1

464

2008

465

Assembly Bill No. 2747

CHAPTER 683

An act to add Part 1.8 (commencing with Section 442) to Division 1 of the Health and Safety Code, relating to end-of-life care.

466

Terminally Ill Patients Right to Know End of Life Options Act

467

"when … provider makes a diagnosis that a patient has a **terminal illness** …"

468

"provide … **comprehensive** information … **legal** end-of-life … **options**"

469

MAID is a legal end-of-life care option

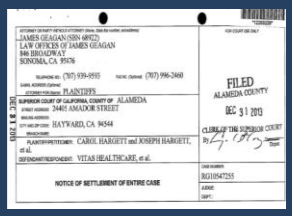
470

SO …

471

"**provide** … comprehensive information and counseling"

472



JAMES GEAGAN (SBN 68922)
LAW OFFICES OF JAMES GEAGAN
946 BROADWAY
SONOMA, CA 95476
(707) 939-9595 (707) 996-2460
PLAINTIFFS
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA
24405 AMADOR STREET
HAYWARD, CA 94544
PLAINTIFF/PETITIONER: CAROL HARGETT and JOSEPH HARGETT, et al.
DEFENDANT/RESPONDENT: VITAS HEALTHCARE, et al.
NOTICE OF SETTLEMENT OF ENTIRE CASE
FILED
ALAMEDA COUNTY
DEC 31 2013
CLERK OF THE SUPERIOR COURT
RG10547255

473

reason **2**

474

Gary L. TRUMAN, Jr., a Minor, etc., et al., Plaintiffs and Appellants,
v.
Claude R. THOMAS, Defendant and Respondent.
S.F. 24054.
Supreme Court of California, In Bank.
June 9, 1980.

Ralph COBBS, Plaintiff and Respondent,
v.
Dudley F. P. GRANT, Defendant and Appellant.
S. F. 22687.
Supreme Court of California, In Bank.
Oct. 27, 1972.

475

"duty … disclose … **available choices**"

476

reason **3**

477

Code of Medical Ethics

of the American Medical Association

478

It's like saying to someone with heart disease, I can give you pills but not tell them about the option of surgery.

479

need **not** recommend or encourage MAID

480

just include as **one** available option

481

cannot assume Pt already aware of MAID option

482

JAMA Network Open

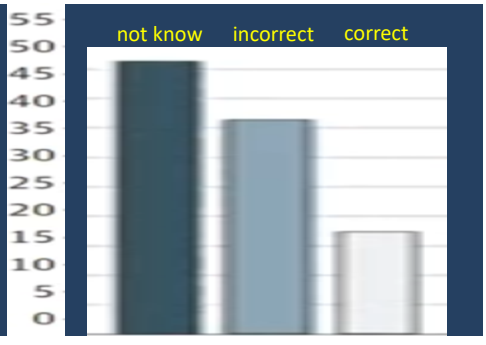
2025

Original Investigation | Health Policy

Knowledge of and Preferences for Medical Aid in Dying

Elissa Kozlov, PhD; Elizabeth A. Luth, PhD; Sam Nemeth, BA; Todd D. Becker, PhD, LMSW; Paul R. Duberstein, PhD

483



484

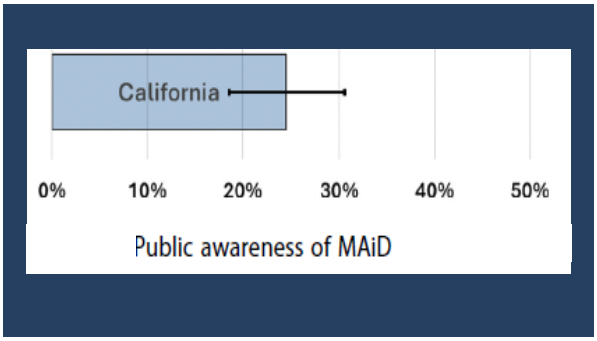
Mortality
Promoting the interdisciplinary study of death and dying

ISSN: (Print) (Online) Journal homepage: www.tandfonline.com/journals/cmrt20

Disparities in public awareness, practitioner availability, and institutional support contribute to differential rates of MAiD utilization: a natural experiment comparing California and Canada

Adrian C. Byram & Peter B. Reiner

485



486

487

0.5%

488

issue 2

489

counseling Pt **ineligible** for MAID

490

Pt **asks** MD for MAID

491

but

492

Pt **not** terminally ill

493

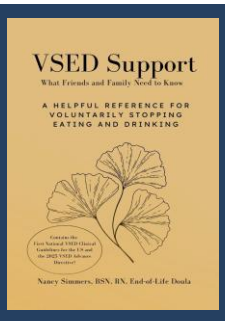
disclose **other** options

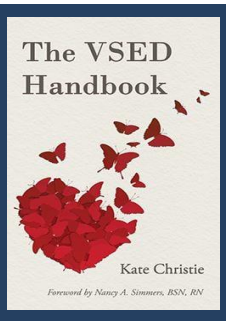
494

495

VSED

496





497

issue 3

498

499

OFFICE OF THE GOVERNOR

OCT 07 2023

To the Members of the California State Senate:

I am returning Senate Bill 58 without my signature.

500

psilocybin helps terminally ill Pt deal with **end-of-life psychological distress**

501

by boosting the will to live, psilocybin may **avert** Pt **need or desire** for MAID

502

psilocybin is option patients will find **significant** – and some will choose

503

SO…

504

legal & ethical
duty to disclose

505

UC San Diego Health

Policy Name:	California (CA) End of Life Option Act: Physician Aid in Dying
Policy Number:	UCSDHP 383.2
Authoring Department:	Ethics Committee
Last Revised Date:	July 5, 2024

"review **available means** of addressing … sources of distress identified by … patient"

506

that's
change #5

507

improve
informed
consent

508

509

5 easier
changes

510

1. post policies
2. expand APRN
3. expand MH
4. drop residency
5. informed consent

511

5 harder

512

change 1

513

access barriers

514

2024

1600 Pt got MAID prescriptions **CA**

515

but

516

517

1/3 as many Rx

but only **1/7** population

518

519

520

521

State	Prescriptions	Ingestions	Source	Population	Rate
California	1591	1032	2024 DOH	40m	26/m
Colorado	510	313	2024 DOH	6m	52/m
Delaware	--	--	--	1m	--
Hawaii	93	59	2025 DOH	1.5m	39/m
Illinois	--	--	--	13m	--
Maine	66	48	2024 DOH	1.4m	34/m
Montana	--	--	--	1.1m	--
New Mexico	280+	280	NMEOL	2.1m	133/m
New Jersey	131	122	2024 DOH	9.5m	13/m
New York	--	--	--	20m	--
Oregon	607	376	2024 DOH	4.3m	87/m
Vermont	36+	36	2021-23 DOH	0.7m	51/m
Washington	524	427	2023 DOH	8m	53/m
Washington, DC	8	6	2023 DOH	0.7m	9/m
TOTAL	**3846+**	**2699**			

522

523

524

change 2

525

race disparities

526

CALIFORNIA END OF LIFE OPTION ACT
2024 DATA REPORT

CDPH
California Department of Public Health

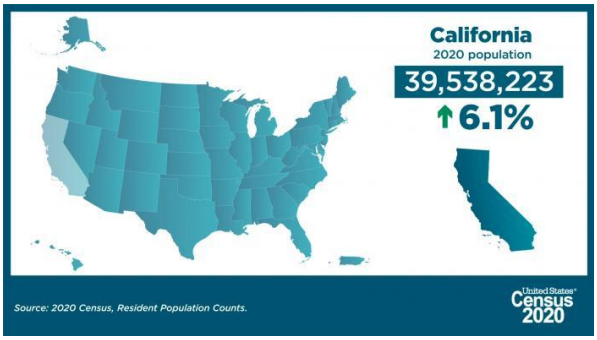
527

EOLA Individuals	2024	2024 %	2023	2023 %	2016-2022	2016-2022 %	Total	Total %
White	895	(86.7)	826	(85.2)	3017	(88.2)	4738	(87.4)
Black	8	(0.8)	10	(1.0)	28	(0.8)	46	(0.8)
Hispanic	53	(5.1)	47	(4.9)	122	(3.6)	222	(4.1)
American Indian / Alaska Native	6	(0.6)	1	(0.1)	6	(0.2)	13	(0.2)
Asian[12,13]	60	(5.8)	70	(7.2)	214	(6.3)	344	(6.3)
Asian Indian							28	(8.1)
Chinese							147	(42.7)
Filipino							15	(4.4)
Japanese							52	(15.1)
Korean							31	(9.0)
Taiwanese							13	(3.8)
Vietnamese							24	(7.0)
Native Hawaiian/ Pacific Islander[6, 14]	2	(0.2)	2	(0.2)	4	(0.1)	8	(0.1)
Multi-race	3	(0.3)	7	(0.7)	23	(0.7)	33	(0.6)
Other	3	(0.3)	2	(0.2)	3	(0.1)	8	(0.1)
Unknown	2	(0.2)	4	(0.4)	5	(0.1)	11	(0.2)

528

88% white

529



530

White	**34%**
Hispanic	41%
Asian	17%
Black	6%

531

532

	CA	OR
Hispanic	41%	16%
Asian	17%	6%
Black	7%	3%

533

534

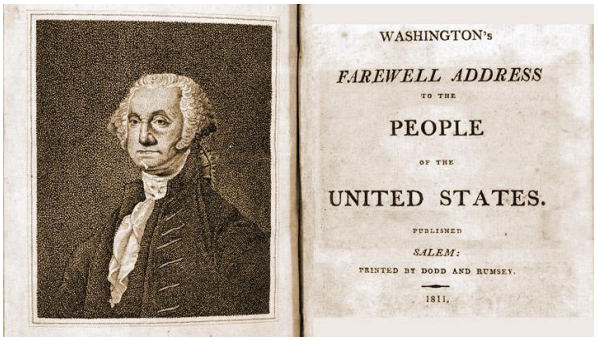
changes 3 4 5

535

536

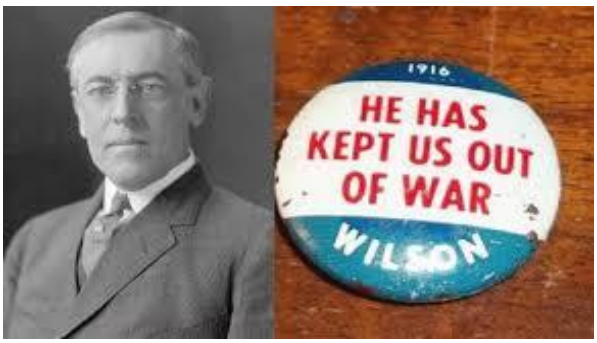
normally, we **don't** look to global trends

537



538

539



540

but

541

542

543

544

what is happening to **MAID** around the world

545

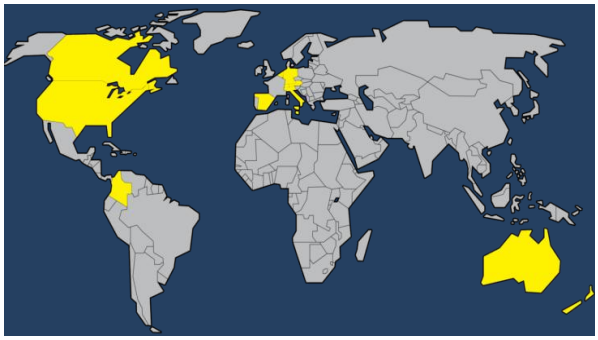
pediatric Pt
inmate Pt
organ donation

546

change 3

547

548



549

safer & faster

550

OREGON HEALTH AUTHORITY
Public Health Division
Center for Health Statistics

2024
Oregon Death with Dignity Act
Data Summary

551

552

8%

553

difficulty ingesting regurgitation

1 in 20

554

seizures + other complications

1 in 36

555

556

AMENDED IN SENATE MARCH 19, 2024

SENATE BILL **No. 1196**

Introduced by Senator Blakespear

February 14, 2024

557

A Better Exit

BROADENING CALIFORNIA'S END OF LIFE OPTION ACT (EOLOA)

558

559

560

that's
change #3

561

allow IV
self- administration

562

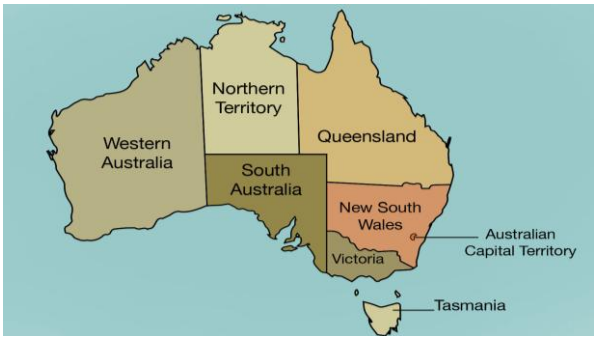
change 4

563

~~terminal illness~~

564

565



566

Vic	2017	TI
WA	2019	TI
Tas	2021	TI
SA	2021	TI
Qld	2021	TI
NSW	2022	TI

567

568

advanced & progressive medical condition

569

we will likely **follow**

570

571

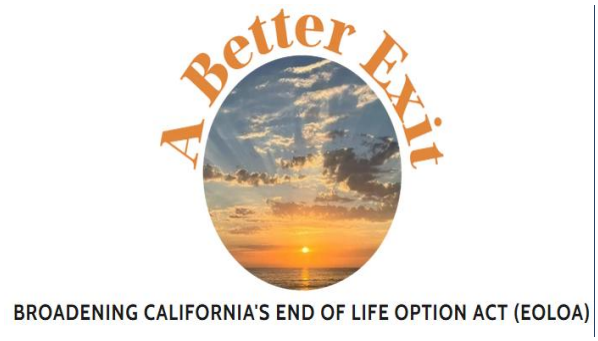
AMENDED IN SENATE MARCH 19, 2024

SENATE BILL No. 1196

Introduced by Senator Blakespear

February 14, 2024

572



573

574

575

576

that's
change #4

577

expand
6-month prognosis

578

change 5

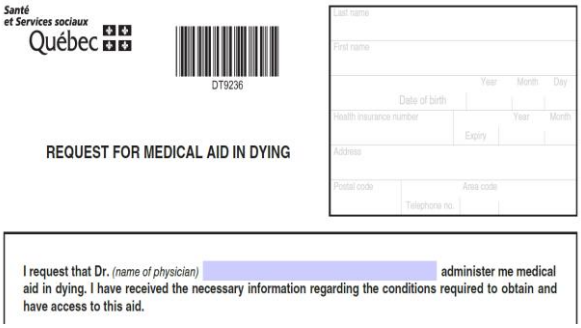
579

MAID by AD

580

581

582


Santé et Services sociaux Québec

DT9236

REQUEST FOR MEDICAL AID IN DYING

Last name
First name
Year Month Day
Date of birth
Health insurance number
Year Month
Expiry
Address
Postal code
Area code
Telephone no.

I request that Dr. *(name of physician)* _____ administer me medical aid in dying. I have received the necessary information regarding the conditions required to obtain and have access to this aid.

583

get MAID in the **future**

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when **your** triggering conditions met

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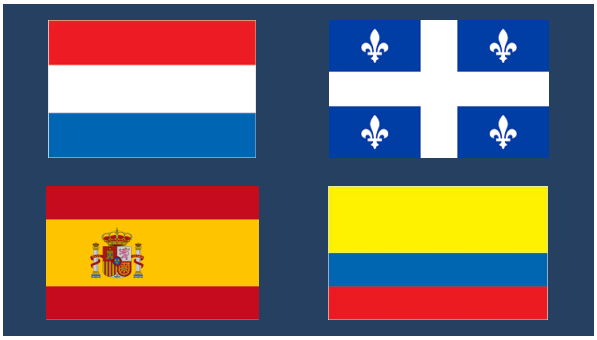

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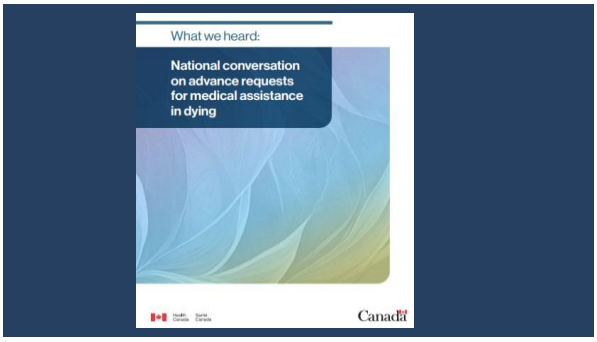

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79th OREGON LEGISLATIVE ASSEMBLY--2017 Regular Session

Senate Bill 893

Sponsored by Senators DEMBROW, STEINER HAYWARD, Representative GREENLICK; Senator MONNES ANDERSON, Representatives KENY-GUYER, MALSTROM, NOSSE

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as **introduced.**

Permits expressly identified agent, pursuant to lawfully executed advance directive and in accordance with Oregon Death with Dignity Act, to collect and administer prescribed medication for purpose of ending patient's life in humane and dignified manner if patient ceases to be capable after having received prescription for life-ending medication.

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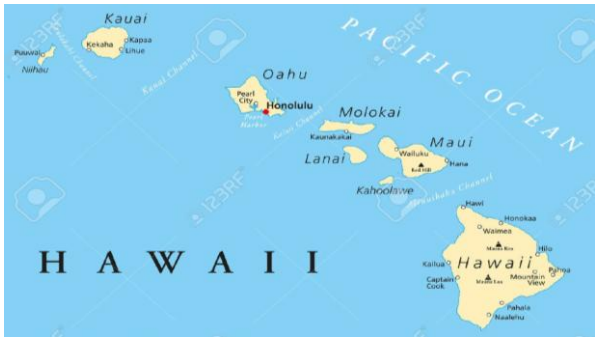

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that's

change #5

593

permit

MAID by AD

594

conclusion

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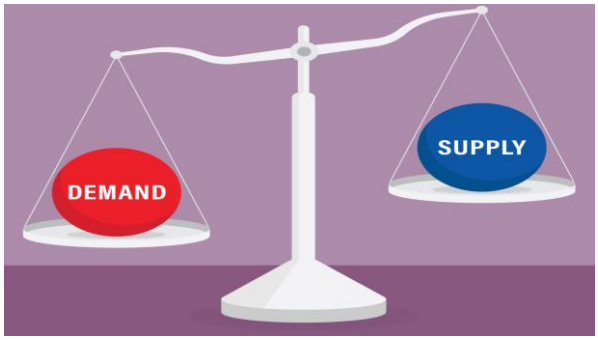

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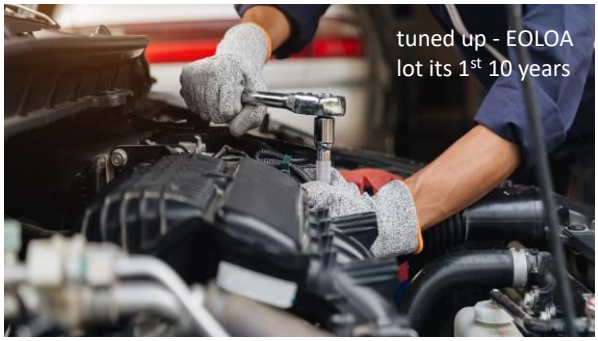

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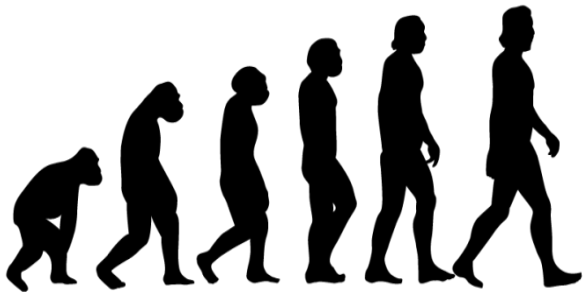

EOLOA continue -- to evolve over next - 10 years

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Thank you!

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