Medical Aid in Dying for the Terminally III in Ohio



Ohio End of Life Options' mission is to raise awareness about Medical Aid in Dying and provide fact-based education while working with our partner organization, Ohio End of Life Options Political Fund, toward enactment of a law in Ohio.

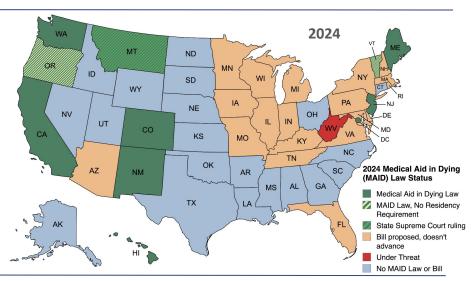
Healthcare organizations across the country are studying the issue, please contact <u>Lisa Vigil Schattinger, MSN, RN at Info@OhioOptions.org for information.</u>



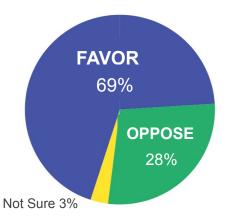
"As a (retired) family physician, and having "stood vigil" with many friends and family members at the end of life, I am totally in support of a Medical Aid in Dying law in Ohio. It is complicated - but then, everything about choices at the end of life is complicated. It is important for patients and their families to have access to ALL end-of-life options."

Mary Jane Elam, MD, Columbus, 2022

- Ten states and DC allow access to MAID for the terminally ill.
- OR and VT no longer have residency requirements.
- APRNs may act as providers in CO, HI, NM and WA.
- Any provider may opt not to participate.
- More states are considering legislation.



Ohio Voters Support MAID Legislation



May 2018 Public Policy Polling. N=645 OH voters, margin of error is +/- 3.9%

National Healthcare Organizational Stances

Supportive

American College of Legal Medicine
American Medical Student Association
American Medical Women's Association
American Public Health Association
GLMA: Health Professionals Advancing LGBTQ Equality

Neutral

American Academy of Family Physicians
American Academy of Hospice & Palliative Medicine
American Academy of Neurology
American Nurses Association
Hospice and Palliative Nurses Association

Healthcare Professional Associations that Recognize Medical Aid in Dying, Compassion & Choices, Revised 10/3/2024

The Facts About Medical Aid in Dying for the Terminally III





Medical Aid in Dying (MAID) laws provide the option for a terminally ill, mentally capable adult to end their life when and where they choose by requesting a prescription from their

doctor. The laws define a strict, voluntary, multi-step eligibility process with multiple safeguards. It is not legal in Ohio.



The vast majority of patients who have obtained a prescription were also enrolled in hospice care.



Medical Aid in Dying laws are referred to by the acronym MAID and are also known as Death with Dignity laws. In

the U.S., these laws always apply <u>only</u> to mentally capable adults with terminal illnesses.



There are strict requirements. The person making the request must be:

- an adult
- have six months or less to live
- be able to make informed health care decisions
- be able to ingest the medication themselves.

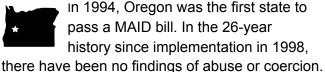
Two providers must agree that the patient is mentally capable of making the decision.

Medical Aid In Dying is optional. It is optional for patients and healthcare providers. No person is required to use it and no doctor is mandated to prescribe the medication. All healthcare providers may opt out of participation.



Only the patient can request the prescription and the patient alone decides if and when to take the

medication. The patient must be able to take the medication themselves. **Those with Alzheimer's or dementia may not qualify** because by the time they are terminally ill, they are not capable of making decisions.



There are now decades of experience with these laws in 9 states and Washington D.C.



Medical Aid in Dying can provide comfort and control when a patient faces the uncertainties and suffering

of a terminal illness. Patients report that just having this option relieves fear and anxiety — even for those who never choose to use it.

Current Options for End of Life Care in Ohio:

- When diagnosed with serious or terminal illness, people may opt to start, stop or not start treatments.
- Palliative care for serious and terminal illness includes focus on quality of life and symptom management.
- Hospice is for the terminally ill with six months or less to live and no curative treatments.
 - Also focuses on quality of life and symptom management.
 - Voluntarily Stopping Eating and Drinking (VSED)
 - Palliative Sedation in an inpatient setting
- Advance Directive: Appoint Health Care Proxy and direct care if terminally ill AND not capable of making decisions OR in a permanently unconscious state.







