AID IN DYING IN OHIO
Fact Sheet

WHAT IS THE OHIO AID-IN-DYING ACT?
INTRODUCED: January 2018 by Senator Charleta Tavares
MODEL: Oregon and Washington Death with Dignity Acts, California End of Life Option Act, and Colorado End of Life Options Act with a combined 30+ years of flawless implementation
WHAT IT WILL DO: Allow a qualified terminally ill person to obtain prescription medications to hasten their imminent death using a strict process with multiple safeguards.

HOW WILL THE OHIO AID-IN-DYING ACT WORK?

ELIGIBILITY REQUIREMENTS:
• Mentally competent adult resident of Ohio
• Diagnosed to have a terminal illness that will lead to death within 6 months
• Capable of taking the medication without assistance.

SAFEGUARDS:
• Using the law is voluntary for patients, physicians, and pharmacists.
• The patient is always in control of the process. Only the patient can make the request for medication and cannot use an advance directive to do so. The patient can rescind the request at any time.
• The patient must make two oral requests in person, at least 15 days apart, and also a written request, witnessed by two people, one of whom is not an heir.
• Two licensed physicians must verify the patient’s eligibility. If a mental disorder or depression causing impaired judgment is suspected, the patient must undergo a mental health evaluation.
• Physicians and pharmacists must meet strict reporting requirements for each request.
• The attending physician must mail or hand-deliver the prescription to the pharmacy.
• The request process must stop immediately if there is any suspicion or evidence of coercion.
• No one qualifies solely based on age or disability.
• There are criminal penalties for any violations.

BENEFITS OF AID-IN-DYING LEGISLATION
AUTONOMY AND CONTROL: The patient decides for themself what’s best for them; they regain control over their illness and the conditions of their death.
PEACE OF MIND: The option to die a peaceful death at a time and place of their choosing provides the patient with invaluable peace of mind at an extremely private time of their life.
RESPECTING END-OF-LIFE WISHES: While nationally only 20% of people die at home, 93% of people using Death with Dignity laws do.

Learn More at OhioOptions.org or Contact Us at info@ohiooptions.org.
I was first diagnosed with a rare autoimmune disease while working as a school administrator in 2001 and then diagnosed with a rare form of cancer in 2009. I am pursuing all treatment options available to me. My goal is to live long enough to outlive my parents because I worry that my death would literally kill my father. I don’t want my mother to have to bury one of her children.

My husband has been with me through every stage of my illnesses. I don’t want him to have to watch me die slowly in agonizing pain or to be so scarred by my death that he can’t go on living.

I don’t want to stop what I’ve been doing; I still have so much left to do. I want to live my life until I can’t for another moment. I want quality for as long as I can have it and then I want to stop putting the people I love through this pain.

It is as important to choose the way we die as it is to choose the way we live.

I don’t believe there are many who would choose to struggle through those last horrible days, weeks or months while our loved ones feel obligated to visit us in places that feel and smell like death. These are some of the reasons that the Death with Dignity law is so very important to me.

Opponents believe that it’s the depressed and weary who are convinced Death with Dignity is the only option. That’s not the case for me. I have been in control of the way I lead my life, as much as I am allowed by my illnesses.

I believe I should have control over my death.

© 2018 Ohio End of Life Options. Developed in collaboration with Death with Dignity National Center.