

# **Assisted suicide law now in effect**

Washington measure patterned after one from Oregon

By Brandon Macz of the Tribune

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The Death with Dignity Act takes effect in Washington today, but language in the law could turn local patients toward private practitioners and away from hospitals in the Lewiston-Clarkston Valley and on the Palouse.

Similar to Oregon's Right-to-Die law, which was implemented nearly 11 years ago and upheld by the U.S. Supreme Court in 2006, the Death with Dignity Act allows terminal patients with six months or less to live to request fatal medications.

It was placed on Washington ballots last year and received about 60 percent approval statewide. About 56 percent of Asotin County residents voted in favor of the initiative.

Assisting in drafting Initiative 1000 or the Death with Dignity Act was the advocacy group Compassion and Choices of Washington, which promotes choices for terminally ill patients in the state.

Because of the struggles Oregon overcame to continue its right to prescribe medication for assisted suicide, Compassion and Choices believes those same legal complications will not arise in Washington, board president Terry Barnett said.

Complications that could arise in the early stages of implementing the Death with Dignity Act, he said, come from language specifying physicians and pharmacists can oppose the law in their own practices.

"Some people's value systems would make aid in dying unacceptable," Barnett said. "The state law respects those people's choice."

Washington hospitals can also choose a stance on the issue, which could prohibit their doctors from participating on hospital property, though they could assist patients outside their employment, Barnett said.

Tri-State Memorial Hospital in Clarkston has chosen not to participate, but will provide referrals for patients requesting fatal medications, and physicians will be able to make recommendations outside of their employment with the hospital, Kathy Reichow said.

"It's kind of a time span where we won't have patients that long," the diabetic education coordinator for Tri-State said. "So, we opted not to participate. The physicians working at the hospital can opt to or not as they see fit."

Washington law states a patient requesting fatal medication must be a state resident, deemed mentally competent and at least 18 years old. Two oral requests will be required 15 days apart and one written request will require two witnesses, one not being a relative, heir, attending doctor or connected with a health facility where the requester lives.

Patients requesting fatal medications will be denied at the Whitman Hospital and Medical Center in Colfax, CEO Jon Davis said. The hospital's board of directors have chosen to opt out of participation.

"We don't feel we're the place for people to have that act taken," Davis said. "As a hospital, we feel this is not a place this should be for."

Board members for the Garfield County Hospital District will be considering the hospital's stance, but a conclusive opinion may take as long as a month, CEO Andrew Craigie said.

"We've been reviewing the issue with our medical staff," Craigie said. "We're probably not going to make a decision by the Thursday (today) deadline. Obviously, it's a sensitive issue, and not something we want to rush into."

A final decision at Pullman Regional Hospital may be on hold until April, administrator Scott Adams said.

"We've been gathering information and getting input from different groups," he said, including staff, leadership groups and hospital board members. "There's obviously varied opinions on the subject and the board's going to take those into consideration."

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