

	Effective Date: 3/25/2014 Revision Date: 5/19/17 New <input type="checkbox"/> Revised <input checked="" type="checkbox"/>	Page 1 of 2
Subject: Physician-Assisted Suicide	Authorization: EVP Chief Executive Eastern WA and SVP of Mission	

Purpose:

To describe the position of Providence Health & Services (“Providence”) regarding physician assisted suicide under the Washington Death with Dignity Act (the “Act”) in Providence facilities, programs and services in the State of Washington and to provide guidance in caring for patients who express interest in ending their life under the Act.

Scope:

Providence specializes in end-of-life and palliative care services to ease patient and family suffering. This policy is limited to assisted suicide, physician assisted suicide, or self-administered life-ending medication and does not cover the many end-of-life care services Providence provides. This policy applies to Providence ministries and partners, employees and volunteers, including all employed and contracted physicians and other professional health care providers while carrying out work-related duties for Providence either within or outside its facilities.

End-of-life care:

Providence provides end-of-life care that takes care of the physical, emotional, social and spiritual needs of the patient and his or her family. The end-of-life care Providence provides is grounded in the values of respecting the sacredness of life, providing compassionate care to dying and vulnerable persons, and respecting the integrity of health care providers. Providence believes that compassionate, end-of-life care should neither prolong nor hasten the natural dying process. Providence will not abandon dying patients or their families and is committed to providing appropriate support for dying persons and their families through the final stages of life by supporting patient self-determination through the use of advance care planning, offering hospice, palliative and other supportive care, and providing effective pain and symptom management and other social, spiritual, and pastoral care support and services.

Policy:

- A. Patients, families, nurses, physicians and other providers are encouraged to explore fully and discuss care and treatment options for terminally ill patients. As part of that discussion, requests for physician assisted suicide or self-administered life-ending medication may occur. We respect the rights of patients and their care team to discuss and explore all treatment options, but Providence, its facilities, programs and caregivers do not participate in assisted suicide. Any member of a patient care team may respond to

questions from a patient and family, but any request for planning of physician assisted suicide must be referred to an “attending” physician, as defined in the Act.

- B. Providence physicians, employees and volunteers may not knowingly directly participate in or facilitate physician assisted suicide and may not provide, deliver, administer, or assist with the administration of any medication intended for physician assisted suicide, or be present when a patient ingests medications with the intent of completing physician assisted suicide.
- C. When a patient expresses intent to pursue physician assisted suicide, the patient will be informed that Providence will not participate or assist in that act and its physicians, employees and volunteers will not provide, deliver, administer or assist the patient with the lethal prescription. Providence caregivers will still provide all other requested end-of-life and palliative care and other services to patients and families.
- D. Consistent with this policy, Providence will continue to provide care to patients who qualify for and request services, regardless of their stated interest in seeking physician assisted suicide.