



## Legislative Endorsement

Bill No.	Bill Title	Sponsor(s)	Committee	Legislative history
H 2259	An Act relative to Do-Not-Resuscitate Orders	Rep. Campbell	Public Health	Hearing:

**Endorsed by 38 members of Dignity Alliance Massachusetts including:**

<ul style="list-style-type: none"> <li>• Boston Center for Independent Living</li> <li>• Center for Living and Work, Inc.</li> <li>• COP Amputee Association –COPAA</li> <li>• Disability Policy Consortium</li> <li>• Disability Resource Center</li> <li>• Easterseals Massachusetts</li> <li>• John Ford, Esq.</li> <li>• Lachan Farrow, MD</li> <li>• Judi Fonsh, LCSW, MSW</li> <li>• Wynn Gerhard</li> </ul>	<ul style="list-style-type: none"> <li>• Pamela Goodwin</li> <li>• Greater Boston Chapter of United Spinal Association</li> <li>• Fred Gross</li> <li>• Jerry Halberstadt, Stop Bullying Coalition</li> <li>• Sandy Hovey</li> <li>• Anne Johansen</li> <li>• James Lomastro, PhD</li> <li>• Paul J. Lanzikos</li> </ul>	<ul style="list-style-type: none"> <li>• Massachusetts Advocates for Nursing Home Reform, Arlene Germain, Policy Director</li> <li>• Massachusetts Aging and Mental Health Coalition</li> <li>• Massachusetts Law Reform Institute</li> <li>• MetroWest Center for Independent Living, Paul Spooner, Executive Director</li> <li>• Richard T. Moore</li> <li>• SeniorCare, Scott Trenti, CEO</li> </ul>
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**Contact: Richard Moore, Dignity Alliance Massachusetts Legislative Chair, [rmoores8743@charter.net](mailto:rmoores8743@charter.net)**

<https://malegislature.gov/Bills/192/H2259>

SECTION 1. Chapter 112 of the General Laws is hereby amended by inserting after section 12V 1/2 the following section:-

Section 12V 3/4. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:-

“Authorized representative”, (i) an agent to whom authority to make health care decisions on behalf of a person is delegated under a health care proxy; or (ii) a guardian appointed pursuant to part 3 of article V of the Massachusetts Uniform Probate Code to act on behalf of a person who is incapacitated; provided, however, a guardian appointed pursuant to said part 3 of said article V shall not be considered an authorized representative if an agent has been granted authority to make health care decisions on behalf of the incapacitated person under a valid health care proxy; provided, further that for the purposes of this section a guardian appointed pursuant to said part 3 of said article V shall not be considered an authorized representative if they are not a family member, relation or spouse of the person they have been appointed to act on behalf of.

“Cardiopulmonary resuscitation”, measures used to restore or support cardiac or respiratory function in the event of a cardiac or respiratory arrest, including chest compressions, cardiac drugs, intubation or the placement of any breathing tube.

“Do-not-resuscitate order”, a medical order that cardiopulmonary resuscitation should not be administered to a particular patient signed by a licensed physician, nurse practitioner or physician assistant verifying that a patient, an authorized person of a patient who is an incapacitated person or a parent or guardian of a patient who is a minor, consented to the order.

“Health care facility”, any hospital, nursing home, extended care facility, state health or mental institution, clinic, physician's office or health maintenance organization licensed or otherwise operating legally within the commonwealth.

“Health care provider” or “provider”, an individual licensed, certified or otherwise authorized or permitted by law to administer health care in the ordinary course of business or professional practice.

“Health care proxy”, a document delegating to an agent the authority to make health care decisions, executed in accordance with the requirements of chapter 201D.

“Incapacitated person”, an adult who has a clinically diagnosed condition that results in an inability to receive and evaluate information or make or communicate decisions to such an extent that the individual lacks the ability to meet essential requirements for physical health, safety or self-care, even with appropriate technological assistance.

(b) The department of public health shall provide health care providers with a standardized medical form whereby a patient, an authorized representative of a patient who is an incapacitated person or a parent or guardian of a patient who is a minor, may consent in writing to a do-not-resuscitate order. Health care providers shall provide the form upon the request of a patient, an authorized representative of a patient who is an incapacitated person or a parent or guardian of a patient who is a minor. The form shall not constitute a valid order unless a licensed physician, nurse practitioner or physician assistant verifies by signature that the patient consented to the do-not-resuscitate order; provided, however, that the licensed physician, nurse practitioner or physician assistant who verifies the patient’s consent for a do-not-resuscitate order shall record the do-not-resuscitate order on the patient’s electronic medical record; provided, further, that in the case of a patient who is an incapacitated person, the form shall not constitute a valid order unless a licensed physician, nurse practitioner or physician assistant verifies by signature that an authorized representative of the patient consented to the do-not-resuscitate order; and provided further, that in the case of a minor, the form shall not constitute a valid order unless a licensed physician, nurse practitioner or physician assistant verifies by signature that a parent or guardian of the patient consented to the do-not-resuscitate order.

(c) A health care provider shall not perform cardiopulmonary resuscitation on a patient the provider knows to be subject to a current and valid do-not-resuscitate order notwithstanding the fact that the order may have been issued by a different provider or may have originated at a different health care facility; provided, however, if the patient consents to cardiopulmonary resuscitation during cardiac or respiratory arrest, the provider shall disregard the do-not-resuscitate order.

(d) After a hearing pursuant to chapter 30A, a regulating board established pursuant to this chapter, upon satisfactory proof to a majority of that board that a provider licensed by that board knowingly violated subsection (c), the department of public health shall enforce penalties, rules and regulations determined by the department of public health that are necessary to enforce subsection (c).

(e) Health care facilities shall adopt policies to ensure that providers are made aware of patients subject to do-not-resuscitate orders that are being treated within the facility.

(f) The department of public health shall promulgate rules and regulations necessary to carry out this section.