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Owner Renee Rassilyer-Bomers: Division Chief Nursing Officer - North  
Area Clinical  
Applicability WA - SMC + SMG  
Document Types Administrative and Clinical Policy and Procedure



## Death with Dignity Act – RCW 70.245

<b>Clinical Area:</b> All clinical areas
<b>Population Covered:</b> All patients
<b>Licensed Hospitals:</b> Swedish Medical Center (First Hill, Ballard, Mill Creek, Redmond) Swedish Medical Center / Cherry Hill (Cherry Hill) Swedish Medical Center / Issaquah (Issaquah) Swedish Edmonds (Edmonds)

### ***Related Policies and Procedures:***

[Transfers: Intercampus, Emergency Department and Transfers to Other Healthcare Organizations](#)  
[PSJH-CLIN-1214 Policy on Care Through the End of Life: Responding to Requests for Provider-Hastened Death](#)

### **Purpose**

To define the level of participation of Swedish employees and providers permissible regarding the Death with Dignity Act ("Act").

### **Policy Statement**

Swedish recognizes and respects the right of patients to make choices related to their care at the end of life. Swedish will continue to provide compassionate, high-quality care to all our patients regardless of their participation or non-participation with the Act.

Swedish recognizes and respects the right of any health care team member to counsel patients on their options and to participate, if they so choose, in activities under the Act. Swedish also recognizes and respects the right of any health care team member to decline to participate in activities specific to the Act.

All health care team members at Swedish will respond to any patient's query about life-ending medication with openness and compassion. Swedish believes our health care team members have an obligation to openly discuss a patient's concerns, unmet needs, feelings, and desires about the dying process, and options available. Physicians on Swedish's medical staff will make an individual decision to participate or not participate in the Act, either as an attending physician or a consulting physician, as those terms are defined in the Act.

Swedish clinical facilities are not the appropriate settings for ingesting life-ending medications. Patients who wish to ingest life-ending medication at the hospital, should be transferred to another location that can accommodate this request.

## Responsible Persons

All health care team members.

## Prerequisite Information

Washington law recognizes certain rights and responsibilities of qualified patients and health care providers under RCW 70.245, the Death with Dignity Act ("Act"). However, health care providers, including Swedish's acute care hospitals, are not required to assist a qualified patient in ending that patient's life.

## Procedure

Responsible Person	Steps
All Care Providers	<ol style="list-style-type: none"> <li>1. Education materials related to end-of-life options, including the Act (See Attachments for <i>Washington State Death with Dignity Act</i>) and information about the level of participation by Swedish staff (See Attachments for <i>Initiative 1000 Position Statement - Washington Version of the Death with Dignity Act</i>) are available to patients.</li> <li>2. If the patient wishes to have their care transferred to another hospital, staff will refer to <a href="#"><u>Transfers: Intercampus, Emergency Department and Transfers to Other Healthcare Organizations</u></a>.</li> <li>3. If the patient wishes to remain at Swedish, the health care team will discuss what end of life care will be provided consistent with hospital policy.</li> </ol>
LIP	<ol style="list-style-type: none"> <li>1. If a patient requests a referral to a physician who will fully participate under the Act or expresses the desire to take medication that will result in the patient's death, the provider may choose to provide the patient</li> </ol>

Responsible Person	Steps	
	<p>with a referral, or may instruct the patient that they must find a participating provider on their own.</p> <p>2. The physician or provider may participate in an initial determination that the patient has a terminal disease and inform the patient of their prognosis.</p>	
Levels of Participation		
Acceptable	Prohibited	
<ul style="list-style-type: none"> <li>• All healthcare team members may share information related to the Act with patients as an option that is available to them in the State of Washington.</li> <li>• All health care team members may discuss a patient's concerns, unmet needs, beliefs, feelings, and desires about the dying process. The values of the patient will be supported in this process.</li> <li>• Physicians are permitted to write the prescriptions for a patient under this Act should they choose to participate at this level (they are not required to do so).</li> </ul>	<ul style="list-style-type: none"> <li>• Swedish pharmacies are not permitted to dispense medications for the purpose of this Act.</li> <li>• Swedish cannot have patients take medications prescribed under the Act within a Swedish facility.</li> <li>• Swedish employees, while acting in the capacity of an employee, may not be present when the medications are ingested for this purpose.</li> </ul>	

## Definitions

*Death with Dignity Act, RCW 70.245.* Passed in 2008, enacted in 2009, allows terminally ill adults seeking to end their life to request lethal doses of medication from medical and osteopathic physicians. These terminally ill patients must be Washington residents who have less than six months to live.

*Attending physician* means the physician who has primary responsibility for the care of the patient and treatment of the patient's terminal disease.

*Consulting physician* means a physician who is qualified by specialty or experience to make a professional diagnosis and prognosis regarding the patient's disease.

*Health care team member* means a person licensed, certified, or otherwise authorized or permitted by law to administer health care or dispense medication in the ordinary course of business or practice of a profession, and includes a health care facility.

# Forms

None.

# Addenda

See Attachments

End of Life - Washington Death with Dignity Act: An Overview for Patients and Families - Washington Hospital Association

Initiative 1000 Position Statement – Washington Version of Death with Dignity Act

# Regulatory Requirement

[RCW 70.245.](#)

[WAC 246-978.](#)

NOTE: Per WA DOH requirements, this policy needs to be posted on the DOH website and Swedish external website within 30 days of any changes to the policy.

# References

[End of Life Washington](http://www.endoflifewa.org) (www.endoflifewa.org) – Website of an organization dedicated to supporting patients and families seeking end of life care and effective symptom management, while upholding their right to explore end of life options.

[Washington State Department of Health - Death with Dignity Act](http://www.doh.wa.gov/data-and-statistical-reports/health-statistics/death-dignity-act) (www.doh.wa.gov/data-and-statistical-reports/health-statistics/death-dignity-act) - Information from the DOH about the Death with Dignity Act including the law, regulation, and frequently asked questions.

# Stakeholders

## Author/Contact

Renee Rassilyer-Bomers, Chief Nursing Officer Swedish System

## Co-Authors

Swedish Health Service Ethics Committee

## Expert Consultants

Swedish Health Services Ethics Committee (August 2024)

Accreditation

Risk Management

Policy/procedure first created to reflect Medical Staff Bylaws changes; reviewed and approved: Medical Executive Committee

**Sponsor**

Swedish Health Service Ethics Committee

Stellent: SWED\_018615

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**Attachments**

[Death with Dignity Act - Washington State Hospital Association](#)

[Initiative 1000 Position Statement - Washington Version of Death with Dignity Act](#)

**Approval Signatures**

Step Description	Approver	Date
	Mary Alice Duthie: Clinical Program Manager RN	10/2024
	Lisa Hawley: Chief Mission Officer Service Area	09/2024

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**Applicability**

WA - Swedish Medical Center, WA - Swedish Medical Group

**Standards**

No standards are associated with this document