

## Overview of the Washington Death With Dignity Act

### Eligibility:

- ◆ Must be an adult Washington State resident.
- ◆ Diagnosed as terminally ill (diagnosed with a disease or condition that will cause death within six months) by a treating physician.
- ◆ Capable of making an informed decision and not impaired by mental illness, dementia, or depression.
- ◆ Able to self-administer the prescribed dose of life-ending medication.

### Patient Procedures for Requesting Life-Ending Medication:

1. Ask your primary care physician or specialist if he/she will support your decision to obtain life-ending medication and write the prescription. Compassion & Choices (C&C) can help you locate a physician who is willing to honor your choice. The physician who writes your prescription is called the “Attending Physician.”
2. Make a first oral request for the written prescription, to be documented in your medical chart.
3. Ask your Attending Physician to refer you to a consulting physician, who will discuss your decision with you, examine you, and confirm your diagnosis.
4. After you have seen both the attending and consulting physicians, complete a “Request for Medication” form. This form must be signed by two qualified witnesses. One witness can be a family member; one can be an employee of your doctor; or both witnesses can be bystanders. When the form is completed, give it to your Attending Physician.
5. Make a second oral request to the physician, no sooner than 15 days after the first oral request.
6. Obtain the prescribed medication(s) from your physician or a pharmacy recommended by C&C. You or someone you designate may pick up the prescription.
7. Decide the date, location, time of death, and who you want to be with you when you die. If you are a client of C&C, client support volunteers can be present with you at the time of death (highly recommended).

### Recommendations to Patients:

- ◆ When you have a life expectancy of six months or less, request a referral to hospice from your physician.
- ◆ Complete your Will, Living Will (Health Care Directive), Durable Power of Attorney for Health Care, and Physician Orders for Life-Sustaining Treatment (POLST) form.
- ◆ Talk to your family and loved ones about your decision.
- ◆ We recommend you keep your decision private and only share it with your inner circle of family and friends. You do not need to tell your hospice caregivers or other medical providers about your decision. If you do talk about it, please do not reveal the identities of participating physicians and pharmacists.

If you are not already a client of C&C, call C&C for information and support for all your end-of-life choices. There is never a fee or charge for C&C's services. For more information, call 206.256.1636, 1.877.222.2816 toll-free, email [info@CandCofWA.org](mailto:info@CandCofWA.org), or go to [www.CandCofWA.org](http://www.CandCofWA.org).