

**SENATE, No. 3588**

**STATE OF NEW JERSEY**

**221st LEGISLATURE**

INTRODUCED SEPTEMBER 19, 2024

**Sponsored by:**

**Senator JOHN J. BURZICHELLI**

**District 3 (Cumberland, Gloucester and Salem)**

**Senator PATRICK J. DIEGNAN, JR.**

**District 18 (Middlesex)**

**SYNOPSIS**

Waives 15 day waiting period for medical aid in dying under certain circumstances.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 9/26/2024)**

1 AN ACT concerning medical aid in dying and amending P.L.2019,  
2 c.59.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

6

7 1. Section 10 of P.L.2019, c.59 (C.26:16-10) is amended to read  
8 as follows:

9 10. a. In order to receive a prescription for medication that a  
10 qualified terminally ill patient may choose to self-administer  
11 pursuant to P.L.2019, c.59 (C.26:16-1 et al.), the patient shall make  
12 two oral requests and one written request for the medication to the  
13 patient's attending physician, subject to the following requirements:

14 (1) at least 15 days shall elapse between the initial oral request  
15 and the second oral request unless, within reasonable medical  
16 certainty, the patient is not expected to survive for 15 days, in  
17 which case the requirement for a second oral request may be  
18 waived;

19 (2) at the time the patient makes a second oral request, the  
20 attending physician shall offer the patient an opportunity to rescind  
21 the request;

22 (3) the patient may submit the written request to the attending  
23 physician when the patient makes the initial oral request or at any  
24 time thereafter;

25 (4) the written request shall meet the requirements of section 5  
26 of P.L.2019, c.59 (C.26:16-5);

27 (5) at least 15 days shall elapse between the patient's initial oral  
28 request and the writing of a prescription pursuant to P.L.2019, c.59  
29 (C.26:16-1 et al.) unless, within reasonable medical certainty, the  
30 patient is not expected to survive for 15 days, in which case at least  
31 48 hours shall elapse between the patient's initial oral request and  
32 the writing of a prescription pursuant to P.L.2019, c.59 (C.26:6-1 et  
33 al.); and

34 (6) at least 48 hours shall elapse between the attending  
35 physician's receipt of the patient's written request and the writing of  
36 a prescription pursuant to P.L.2019, c.59 (C.26:16-1 et al.).

37 b. A qualified terminally ill patient may rescind the request at  
38 any time and in any manner without regard to the patient's mental  
39 state.

40 c. At the time the patient makes an initial oral request for  
41 medication that the patient may choose to self-administer pursuant  
42 to P.L.2019, c.59 (C.26:16-1 et al.), the patient's attending  
43 physician shall recommend to the patient that the patient participate  
44 in a consultation concerning concurrent or additional treatment  
45 opportunities, palliative care, comfort care, hospice care, and pain

**EXPLANATION** – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

1 control options, and provide the patient with a referral to a health  
2 care professional qualified to discuss these options with the patient.  
3 If the patient chooses to participate in such consultation, the  
4 consultation shall include, to the extent the patient consents to share  
5 such information, consideration of: the patient's terminal illness; the  
6 patient's prognosis; current and past courses of treatment prescribed  
7 for the patient in connection with the patient's terminal illness,  
8 including the results of any such treatment; and any palliative care,  
9 comfort care, hospice care, and pain control treatment the patient is  
10 currently receiving or has received in the past.

11 d. The attending physician shall ensure that the following items  
12 are included in the patient's medical record:

13 (1) the determination that the patient is a qualified terminally ill  
14 patient and the basis for that determination;

15 (2) all oral and written requests by the patient to the attending  
16 physician for medication that the patient may choose to self-  
17 administer pursuant to P.L.2019, c.59 (C.26:16-1 et al.);

18 (3) the attending physician's diagnosis and prognosis, and  
19 determination that the patient is capable, is acting voluntarily, and  
20 has made an informed decision;

21 (4) the consulting physician's diagnosis and prognosis, and  
22 verification that the patient is capable, is acting voluntarily, and has  
23 made an informed decision;

24 (5) if applicable, a report of the determination made by a mental  
25 health care professional as to whether the patient is capable  
26 pursuant to section 8 of P.L.2019, c.59 (C.26:16-8);

27 (6) the attending physician's recommendation that the patient  
28 participate in a consultation concerning concurrent or additional  
29 treatment opportunities, palliative care, comfort care, hospice care,  
30 and pain control options; the referral provided to the patient with a  
31 referral to a health care professional qualified to discuss these  
32 options with the patient; an indication as to whether the patient  
33 participated in the consultation; and an indication as to whether the  
34 patient is currently receiving palliative care, comfort care, hospice  
35 care, or pain control treatments;

36 (7) the attending physician's offer to the patient to rescind the  
37 patient's request at the time of the patient's second oral request, as  
38 applicable; [and]

39 (8) a note by the attending physician indicating that all  
40 requirements under P.L.2019, c.59 (C.26:16-1 et al.) have been met  
41 and indicating the steps taken to carry out the patient's request for  
42 medication, including a notation of the medication prescribed; and

43 (9) if the requirements for a second oral request pursuant to  
44 paragraph (1) of subsection a. of this section and for a 15-day  
45 waiting period pursuant to paragraph (5) of subsection a. of this  
46 section are waived based on a determination that the patient is not

1 expected to survive for 15 days, documentation of the medical basis  
2 for that determination.

3 (cf: P.L.2019, c.59, s.10)

4

5 2. This act shall take effect immediately.

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STATEMENT

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10 This bill waives the 15 day waiting period for medical aid in  
11 dying under certain circumstances.

12 Under current law, in order to receive a prescription for  
13 medication that a qualified terminally ill patient may choose to self-  
14 administer pursuant to P.L.2019, c.59 (C.26:16-1 et al.), the patient  
15 is to make two oral requests and one written request for the  
16 medication to the patient's attending physician, subject to the  
17 following requirements, with at least 15 days elapsing between the  
18 first and second oral requests, and between the first oral request and  
19 the issuance of a prescription for the medication. Additionally, at  
20 least 48 hours must elapse between the receipt of the written  
21 request, which may be submitted at any time, and issuance of the  
22 prescription.

23 This bill waives the 15-day waiting periods in the case of a  
24 patient who, based on reasonable medical certainty, is not expected  
25 to survive for 15 days. The attending physician will be required to  
26 document the medical basis for the determination that the patient is  
27 not expected to survive for 15 days. The bill retains the 48-hour  
28 waiting period between submission of a written request and the  
29 issuance of a prescription for medical aid in dying medication.