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HOUSE BILL NO. 2068

Offered January 12, 2011

Prefiled January 11, 2011

A BILL to amend and reenact § 54.1-2990 of the Code of Virginia, relating to medically or ethically inappropriate treatment.

 Patron—Bell, Robert B.

 Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:**1. That § 54.1-2990 of the Code of Virginia is amended and reenacted as follows:**

§ 54.1-2990. Medically unnecessary health care not required; procedure when physician refuses to comply with an advance directive or a designated person's health care decision; mercy killing or euthanasia prohibited.

A. ~~Nothing~~ *Subject to subsection B, nothing* in this article shall be construed to require a physician to prescribe or render health care to a patient that the physician determines to be medically or ethically inappropriate. However, in such a case, if the physician's determination is contrary to the request of the patient, the terms of a patient's advance directive, the decision of an agent or person authorized to make decisions pursuant to § 54.1-2986, or a Durable Do Not Resuscitate Order, the physician shall make a reasonable effort to inform the patient or the patient's agent or person with decision-making authority pursuant to § 54.1-2986 of such determination and the reasons for the determination. If the conflict remains unresolved, the physician shall make a reasonable effort to transfer the patient to another physician who is willing to comply with the request of the patient, the terms of the advance directive, the decision of an agent or person authorized to make decisions pursuant to § 54.1-2986, or a Durable Do Not Resuscitate Order. The physician shall provide the patient or his agent or person with decision-making authority pursuant to § 54.1-2986 a reasonable time of not less than fourteen days to effect such transfer. During this period, the physician shall continue to provide any life-sustaining care to the patient which is reasonably available to such physician, as requested by the patient or his agent or person with decision-making authority pursuant to § 54.1-2986.

B. *For purposes of this section, medical treatment shall not be deemed medically or ethically inappropriate on the basis of a view (i) that values extending the life of a younger, nondisabled individual who is not terminally ill more than extending the life of an elderly, disabled, or terminally ill individual or (ii) different from that of the patient, or the individual authorized to act on the patient's behalf, on the tradeoff between extending the length of the patient's life and the risk of disability.*

C. For purposes of this section, "life-sustaining care" means any ongoing health care that utilizes mechanical or other artificial means to sustain, restore or supplant a spontaneous vital function, including hydration, nutrition, maintenance medication, and cardiopulmonary resuscitation.

~~CD.~~ Nothing in this section shall require the provision of health care that the physician is physically or legally unable to provide, or health care that the physician is physically or legally unable to provide without thereby denying the same health care to another patient.

~~DE.~~ Nothing in this article shall be construed to condone, authorize or approve mercy killing or euthanasia, or to permit any affirmative or deliberate act or omission to end life other than to permit the natural process of dying.

INTRODUCED

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