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Senate Bill 210

SENATE JUDICIARY
Exhibit No. 4
Date: 2.1.23
BIII 16 SB210

Background

- A 2009 Montana Supreme Court ruling in the case Baxter v. Montana held there was nothing
 in Montana Supreme Court precedent or Montana statutes indicating that physician aid in
 dying is against public policy.
- It offered a possible defense to a charge of homicide could be consent to physician aid in dying.

Quick Points

- Physician-assisted suicide occurs when a physician facilitates a patient's death by providing the necessary means and/or information to enable the patient to perform the life-ending act (e.g., the physician provides sleeping pills and information about the lethal dose, while aware that the patient may commit suicide).
- There are medical standards for this practice. Consent is the standard for the practice of medicine.

SB 290 Amendments

- Strengthening of the language within the definitions **provides needed clarity**.
- Additional language clarifies what is not "physician aid in dying," include providing comfort care medication or treatment.

POSITION STATEMENT OF MONTANA MEDICAL ASSOCIATION ON PHYSICIAN-ASSISTED SUICIDE

The Montana Medical Association does not condone the deliberate act of precipitating the death of a patient. This does not imply, however, that a physician using his or her best judgment should not allow a patient to die with dignity.

MMA supports and advocates for compassionate and competent palliative care at the end of life and, furthermore, acknowledges that medical efforts to eliminate irreversible and extreme pain and suffering at the end of life are an appropriate medical response that may result in hastening the patient's death. MMA acknowledges the patient's legitimate right to autonomy at the end of life, but does not accept the proposition that death with dignity may be achieved only through physician assisted suicide.