

New Jersey

Medical Aid in Dying for the Terminally Ill Act

2019 Data Summary

Prepared by:

The Office of the Chief State Medical Examiner



Executive Summary

The New Jersey Medical Aid in Dying for the Terminally Ill Act (P.L. 2019, c. 59) permits an attending physician to write a prescription for medication that would enable a qualified terminally ill patient to end his or her life. This Act was approved April 12, 2019 and went into effect August 1, 2019.

The Act defines “terminally ill” as “the terminal stage of an irreversibly fatal illness, disease, or condition with a prognosis, based upon reasonable medical certainty, of a life expectancy of six months or less. The Act defines an “attending physician” as a “physician who has primary responsibility for the care of the patient and treatment of a patient’s terminal disease.”

The Act requires a qualified terminally ill patient to be a capable adult resident of New Jersey who has been determined to be terminally ill by his or her attending physician and a consulting physician. A patient can obtain a prescription for medication to end his or her life only if he or she has made an informed decision. A request for medication must be made twice orally and once in writing. The oral requests must be separated by at least 15 days. The written request would have to be signed and dated by the patient and witnessed by at least two people who attest that the patient is capable and acting voluntarily. One of these witnesses would have to be a person who is not:

- Related to the patient;
- Entitled to any portion of the patient’s estate;
- An owner, operator, employer, or resident of a health care facility at which the patient is receiving medical treatment; or
- The patient’s attending physician

At the time of the initial oral request, an attending physician would have to recommend that the patient take part in consultations on treatment opportunities. At the time of the second oral request, the attending physician must offer the patient the opportunity to rescind the request. At least 15 days would have to elapse between the initial oral request and the writing of the prescription and 48 hours would have to elapse between a patient signing the written request and the writing of the prescription. A consulting physician must also confirm the diagnosis and that the patient is capable and acting voluntarily. If indicated, the patient may also be referred to a psychiatrist, psychologist, or clinical social worker to determine whether the patient is capable.

The attending physician is required to dispense medications directly to the patient or to contact a pharmacist and transmit the prescription to the pharmacist. A pharmacist may only dispense medications directly to the patient, the attending physician, or an identified agent of the patient. Medications cannot be dispensed to the patient by mail or other form of courier.

The Commissioner of Health shall require the physician and pharmacist who dispensed the medication to file a copy of the dispensing record with the department no later than 30 days after dispensing the medication. The attending physician and consulting physician shall also file required documentation with the department no later than 30 days after the qualified terminally ill patient's death. The Office of the Chief State Medical Examiner (OCSME) has been tasked with documentation of each event and the creation of an annual report.

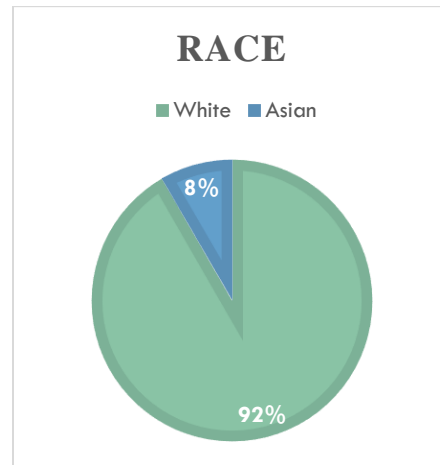
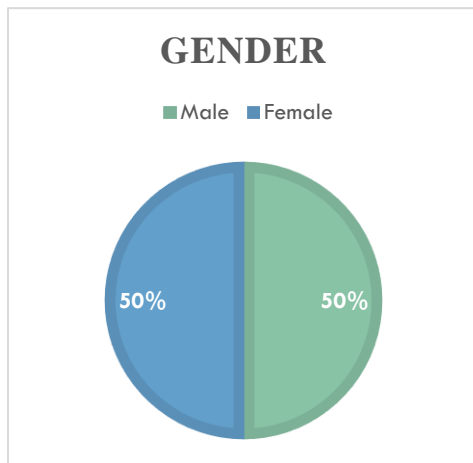
The required forms can be found at:

<https://www.nj.gov/health/advancedirective/maid/>

Participation Summary and Trends

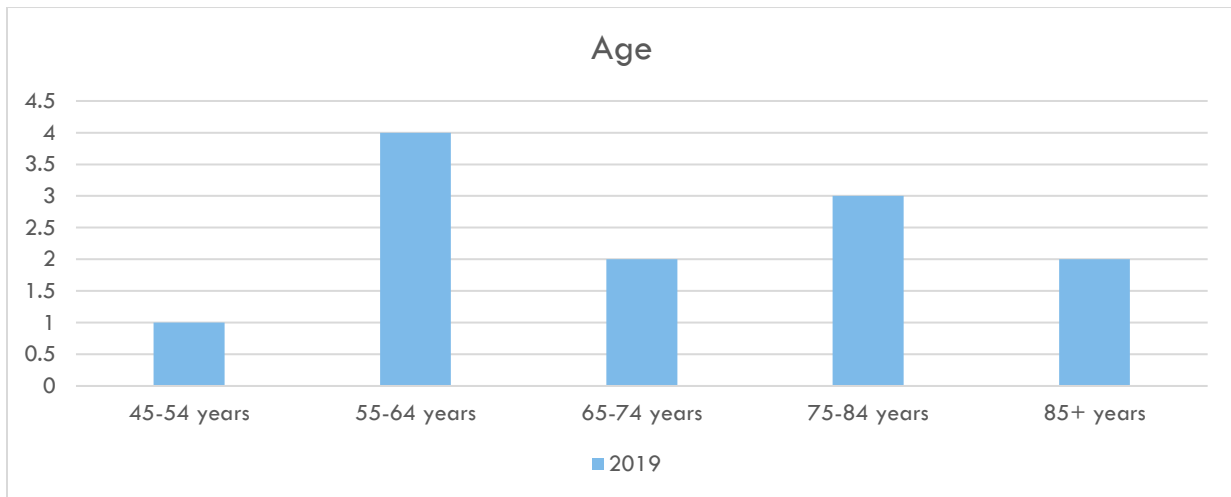
During the period between August 1st and December 31st of 2019, twelve (12) Medical Aid in Dying cases were filed with the Office of the Chief State Medical Examiner (OCSME).

	2019 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Gender		
Male	6	50%
Female	6	50%
Race		
White	11	92%
Black	-	-
Hispanic	-	-
Asian	1	8%
Native Hawaiian/Pacific Islander	-	-
American Indian	-	-
Other single race	-	-
Two or more races	-	-

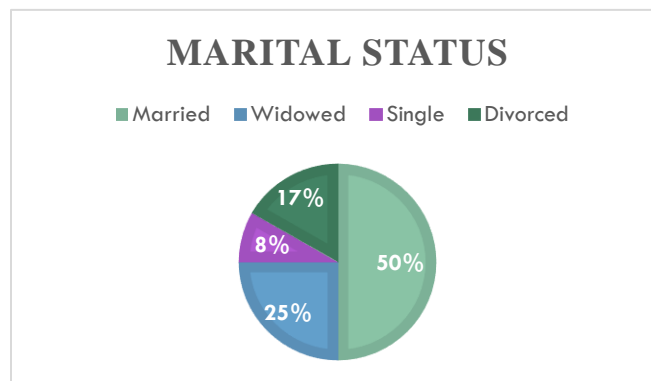


2019 MAiD Cases		
	Number of Cases	Percentage of Total Cases
Age		
45-54 years	1	8%
55-64 years	4	33%
65-74 years	2	17%
75-84 years	3	25%
85+ years	2	17%

Of the twelve MAiD cases, the age of patients reported was between 50 and 93. The mean and median ages were both 71 years.



2019 MAiD Cases		
	Number of Cases	Percentage of Total Cases
Marital Status		
Married	6	50%
Widowed	3	25%
Single	1	8%
Divorced	2	17%
Unknown	-	-



	2019 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Education		
Unknown	-	-
8 th Grade or Less	-	-
9 th to 12 th Grade, No Diploma	-	-
High school/ GED	2	16%
Some college credit but no degree	1	8%
Associate degree	-	-
Bachelor's degree	4	34%
Master's degree	4	34%
Doctorate or Professional degree	1	8%

It is recommended that when the patient takes the prescribed medication, they leave a copy of the required paperwork in plain view.

- In 67% of cases, the OCSME was notified of the death via mailing-in of required forms.
- In 33% of cases, the OCSME was notified of the death via a phone call

In 2018, heart disease was the leading cause of death in New Jersey, accounting for 25.1% of all deaths, followed closely by cancer at 21.1%. However, for those participating in the Medical Aid in Dying program in New Jersey, cancer is the leading underlying illness. All recorded cases of neuro-degenerative disease consisted of Amyotrophic Lateral Sclerosis (ALS).

	2019 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Underlying Illness		
Cancer	7	59%
Neuro-degenerative disease	3	25%
Pulmonary disease	1	8%
Gastrointestinal disorder	1	8%

The New Jersey Medical Aid in Dying for the Terminally Ill Act does not make recommendations for any specific medications that should be prescribed for a patient, but it does state the patient must be able to self-administer the medication. If medication is dispensed and for whatever reason the patient decides not to self-administer the medication, it must be disposed of by lawful means, including but not limited to, disposing of the medication in a way consistent with State and Federal guidelines concerning disposal of prescription medications, or by surrendering the medication to a prescription medication drop-off receptacle.

	2019 MAiD Cases
Medication Prescribed	
Ondansetron, Metoclopramide, Digoxin, Diazepam, Amitriptyline, & Morphine Sulfate	6
Metoclopramide, Zofran – ODT, Digoxin Powder, Morphine Sulfate Powder, Diazepam Powder, & Amitriptyline Powder	2
Metoclopramide, Digoxin Powder, Morphine Sulfate Powder, Diazepam Powder, & Amitriptyline Powder	1
Diazepam Powder, Digoxin Powder, Morphine Powder, & Propranolol Powder	1
Unknown	2

	2019 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Disposition		
Buried	2	17%
Cremated	10	83%
Donation	-	-
Entombment	-	-
Other	-	-
Removal from State	-	-
County of Residence		
Atlantic	-	-
Bergen	1	8%
Burlington	1	8%
Camden	-	-
Cape May	-	-
Cumberland	-	-
Essex	1	8%
Gloucester	-	-
Hudson	-	-
Hunterdon	2	17%
Mercer	4	34%
Middlesex	-	-
Monmouth	1	8%
Morris	-	-
Ocean	-	-
Passaic	-	-
Salem	1	8%
Somerset	-	-
Sussex	-	-
Union	1	8%
Warren	-	-
Place of Death		
Home	10	84%
Others Home	1	8%
Nursing Home	1	8%

References

<https://nj.gov/health/advancedirective/maid/>

<https://www-doh.state.nj.us/doh-shad/query/builder/mort/MortStateICD10/Count.html>