

Sec. 19a-580h. Medical orders for life-sustaining treatment program.

Regulations. (a) As used in this section:

(1) “Medical order for life-sustaining treatment” means a written medical order by a physician, advanced practice registered nurse or physician assistant to effectuate a patient’s request for life-sustaining treatment when the patient has been determined by a physician or advanced practice registered nurse to be approaching the end stage of a serious, life-limiting illness or is in a condition of advanced, chronic progressive frailty;

(2) “Health care provider” means any person, corporation, limited liability company, facility or institution operated, owned or licensed by this state to provide health care or professional medical services; and

(3) “Legally authorized representative” means a minor patient’s parent, guardian appointed by the Probate Court or a health care representative appointed in accordance with sections 19a-576 and 19a-577.

(b) The Commissioner of Public Health shall establish a state-wide program to implement the use of medical orders for life-sustaining treatment by health care providers. Patient participation in the program shall be voluntary. An agreement to participate in the program shall be documented by the signature of the patient or the patient’s legally authorized representative on the medical order for life sustaining treatment form and verified by the signature of a witness.

(c) Notwithstanding the provisions of sections 19a-495 and 19a-580d and the regulations adopted thereunder, the Commissioner of Public Health shall adopt regulations, in accordance with the provisions of chapter 54, for the program established in accordance with this section to ensure that: (1) Medical orders for life-sustaining treatment are transferrable among, and recognized by, various types of health care institutions subject to any limitations set forth in federal law; (2) any procedures and forms developed for recording medical orders for life-sustaining treatment require the signature of the patient or the patient’s legally authorized representative and a witness on the medical order for life-sustaining treatment and the patient or the patient’s legally authorized representative is given the original order immediately after signing such order and a copy of such order is immediately placed in the patient’s medical record; (3) prior to requesting the signature of the patient or the patient’s legally authorized representative on such order, the physician, advanced practice registered nurse or physician assistant writing the medical order discusses with the patient or the patient’s legally authorized representative the patient’s goals for care and treatment and the benefits and risks of various methods for documenting the patient’s wishes for end-of-life treatment, including medical orders for life-sustaining treatment; and (4) each physician, advanced practice registered nurse or physician assistant that intends to write

a medical order for life-sustaining treatment receives training concerning: (A) The importance of talking with patients about their personal treatment goals; (B) methods for presenting choices for end-of-life care that elicit information concerning patients' preferences and respects those preferences without directing patients toward a particular option for end-of-life care; (C) the importance of fully informing patients about the benefits and risks of an immediately effective medical order for life-sustaining treatment; (D) awareness of factors that may affect the use of medical orders for life-sustaining treatment, including, but not limited to, advanced health care directives, race, ethnicity, age, gender, socioeconomic position, immigrant status, sexual minority status, language, disability, homelessness, mental illness and geographic area of residence; and (E) procedures for properly completing and effectuating medical orders for life-sustaining treatment.

(d) Nothing in this section shall be construed to limit the authority of the Commissioner of Developmental Services under subsection (g) of section 17a-238 concerning orders applied to persons receiving services under the direction of said commissioner.

(e) The Commissioner of Public Health may implement policies and procedures necessary to administer the provisions of this section until such time as regulations are adopted pursuant to subsection (c) of this section.

(P.A. 17-70, S. 1.)

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Sec. 19a-580i. Medical orders for life-sustaining treatment advisory council. There is established, within available appropriations, a medical orders for life-sustaining treatment advisory council. The advisory council shall consist of health care providers, public health professionals and consumer advocates and shall make recommendations to the Commissioner of Public Health concerning the requirements prescribed in section 19a-580h. The advisory council shall consist of the following members, who shall be appointed by the commissioner not later than January 1, 2018: (1) A public health practitioner; (2) two physicians, one of whom shall be an emergency department physician; (3) an advanced practice registered nurse; (4) a physician assistant; (5) an emergency medical service provider; (6) two patient advocates, one of whom shall be an advocate for persons with disabilities; (7) a hospital representative;

(8) a long-term care facility representative; and (9) any person or a representative from any other organization who, as determined by the commissioner, possesses familiarity with the issues concerning medical orders for life-sustaining treatment. The advisory council shall meet at least annually to be updated on the status of the program and advise the department on matters related to improving the program established pursuant to section 19a-580h.