

FIRST REGULAR SESSION

HOUSE BILL NO. 138

100TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE KIDD.

0082H.011

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To amend chapter 191, RSMo, by adding thereto one new section relating to life-sustaining treatment policies of health care facilities.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 191, RSMo, is amended by adding thereto one new section, to be known as section 191.250, to read as follows:

191.250. 1. This section shall be known and may be cited as "Simon's Law".

2. As used in this section, the following terms shall mean:

(1) "End-of-life medical decision order for a child under juvenile or family court jurisdiction", a decision issued by a juvenile or family court pertaining to life-sustaining treatment, including do-not-resuscitate orders, provided on behalf of and in the best interests of a child under juvenile or family court jurisdiction under section 211.031;

(2) "Reasonable medical judgment", a medical judgment that would be made by a reasonably prudent physician who is knowledgeable about the case and the treatment possibilities with respect to the medical conditions involved.

3. For a child who is not under juvenile or family court jurisdiction under section 211.031, no health care facility, nursing home, physician, nurse, or medical staff shall institute a do-not-resuscitate order or similar physician's order, either orally or in writing, without the written or oral consent of at least one parent or legal guardian of the patient or resident under eighteen years of age who is not emancipated. If consent to implement a do-not-resuscitate order or similar physician's order is granted orally, two witnesses other than the parent, legal guardian, or physician shall be present and willing to attest to the consent given by the legal guardian of the patient or at least one parent of the patient.

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 The provision of such consent shall be immediately recorded in the patient's medical
19 record, specifying who provided the information, to whom the information was provided,
20 which parent or legal guardian gave the consent, who the witnesses were, and the date and
21 time the consent was obtained.

22 4. The requirements of subsection 3 of this section shall not apply if a reasonably
23 diligent effort of at least forty-eight hours without success has been made to contact and
24 inform each known parent or legal guardian of the intent to implement a do-not-resuscitate
25 order or similar physician's order.

26 5. Consent previously given under subsection 3 of this section may be revoked
27 orally or in writing by the parent or legal guardian of the patient or resident who granted
28 the original permission. Such revocation of prior consent shall take precedence over any
29 prior consent to implement a do-not-resuscitate order or similar physician's order and
30 shall be immediately recorded in the patient's or resident's medical records, specifying who
31 provided the information, to whom the information was provided, which parent or legal
32 guardian revoked consent, who the witnesses were, and the date and time the revocation
33 was obtained.

34 6. For a child under juvenile court jurisdiction under section 211.031, a juvenile or
35 family court may issue an end-of-life medical decision order, a physician's order, or any
36 other medical decision order; or may appoint a guardian for the child for that purpose.
37 The children's division shall not be appointed as guardian for a child to make end-of-life
38 medical decisions, including do-not-resuscitate orders. In the event a child under the
39 jurisdiction of a juvenile or family court under section 211.031 is returned to the custody
40 of the legal guardian or parent, the legal guardian or parent may revoke the consent for
41 the end-of-life medical decisions or similar physician's orders ordered by the court,
42 including do-not-resuscitate orders for the child. Revocation may be orally or in writing
43 and shall be immediately recorded in the patient's medical records, specifying who
44 provided the information, to whom the information was provided, which parent or legal
45 guardian revoked consent, who the witnesses were, and the date and time the revocation
46 was obtained.

47 7. For the purposes of this section, a relative caregiver under the provisions of
48 section 431.058 shall have the same authority given to a parent or legal guardian of a
49 nonemancipated patient or resident under eighteen years of age, provided that such a
50 patient or resident is not under juvenile or family court jurisdiction under section 211.031.

51 8. Nothing in this section shall be construed to require any health care facility,
52 nursing home, physician, nurse, or medical staff to provide or continue any treatment,

53 including resuscitative efforts, food, medication, oxygen, intravenous fluids, or nutrition,
54 that would be:

55 (1) Medically inappropriate because, in reasonable medical judgment, providing
56 such treatment would create a greater risk of causing or hastening the death of the patient;
57 or

58 (2) Medically inappropriate because, in reasonable medical judgment, providing
59 such treatment would be potentially harmful or cause unnecessary pain, suffering, or
60 injury to the patient.

61 9. Nothing in this section shall require health care providers to continue
62 cardiopulmonary resuscitation or manual ventilation beyond a time in which, in their
63 reasonable medical judgment, there is no further benefit to the patient or likely recovery
64 of the patient.

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