May 29, 2017

Nevada Assembly
Committee HHS

Re: Vote “No” on SB 261 (Assisted Suicide)

The bill merely requires that actions be done in “accordance” with its provisions. This renders ALL patient protections (safeguards) unenforceable.

Dear Members of the Committee:

I am a lawyer in Washington State, where assisted suicide is legal. Our law is based on a similar law in Oregon. Both laws are similar to SB 261.

SB 261 sets forth patient protections in sections 3 through 26.\(^1\) The bill also repeatedly says that actions are to be done in “accordance” with sections 3 through 26.\(^2\) For example, the bill states:

Death resulting from a patient self-administering a controlled substance that is designed to end his or her life in accordance with the provisions of sections 3 to 26, inclusive, of this act does not constitute suicide or homicide. (Emphasis added).\(^3\)

\(^1\) SB 261, § 10.5.4, attached hereto at A-1.
\(^2\) Id., §§ 1.3, 22.1, 23.2, 29.2, 30.4, 36, and 37 (all use in “accordance”), attached at A-3 to A-8
\(^3\) Id., § 22.1, attached hereto at A-4.
The bill does not define “accordance.” Dictionary definitions include “in the spirit of,” meaning in thought or intention. A mere thought to comply with patient protections is good enough. Actual compliance is not required.

More to the point, this situation renders all bill protections (“safeguards”) unenforceable. For this reason alone, the bill must be rejected.

Sincerely,

/s/

Margaret K. Dore, Esq.
Unpaid Volunteer Lobbyist

Attachments: As stated