1. The Act

The Act legalizes "aid in dying," a traditional euphemism for active euthanasia. The Act is based on similar laws in Oregon and Washington State.

2. Pushback Against Assisted Suicide and Euthanasia

In the last ten years, nine states have strengthened their laws against assisted suicide/euthanasia: Alabama, Arizona, Georgia, Idaho, Louisiana, New Mexico, Ohio, South Dakota and Utah.

3. "Eligible" Persons May Have Years or Decades to Live

The Act applies to people who are "terminally ill," meaning:

[T]he patient is in 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.

Oregon’s law has a similar criteria, which is interpreted to include chronic conditions such as diabetes. This is because the six months to live is determined without treatment. With treatment (insulin), such persons can have years or decades to live.

4. Assisting Persons Can Have an Agenda

Persons assisting a suicide or performing a euthanasia can have an agenda. Consider Tammy Sawyer, trustee for Thomas Middleton in Oregon. Two days after his death by legal assisted
suicide, she sold his home and deposited the proceeds into bank accounts for her own benefit. Consider also Graham Morant, recently convicted of counseling his wife to kill herself in Australia, to get the life insurance. The Court found:

[Y]ou counselled and aided your wife to kill herself because you wanted ... the 1.4 million.

Medical professionals too can have an agenda. Michael Swango, MD, now incarcerated, got a thrill from killing his patients. Consider also Harold Shipman, a doctor in the UK, who not only killed his patients, but stole from them and in one case made himself a beneficiary of the patient’s will.

5. **“Even If the Patient Struggled, Who Would Know?”**

The Act has no required oversight over administration of the lethal dose, not even a witness is required to be present at the death. The drugs used are water or alcohol soluble, such that they can be injected into a sleeping or restrained person without consent. Alex Schadenberg, Executive Director for the Euthanasia Prevention Coalition, puts it this way:

With assisted suicide laws in Washington and Oregon [and with the proposed Act], perpetrators can ... take a “legal” route, by getting an elder to sign a lethal dose request. Once the prescription is filled, there is no supervision over administration. Even if a patient struggled, “who would know?” (Emphasis added).

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11 In Oregon, the drugs used include Secobarbital, and Pentobarbital (Nembutal), which are water and alcohol soluble. See http://www.drugs.com/pr/seconal-sodium.html and http://www.drugs.com/pro/nembutal.html.

12 *The Advocate*, Idaho State Bar, Letters to the Editor.
6. The Death Certificate Will Report a Death Due to Terminal Illness

Persons using the act are described as “terminally ill.”13 The Act also states:

Any action taken in accordance with the provisions of ... [this bill] shall not constitute patient abuse or neglect, suicide, assisted suicide, mercy killing,’ euthanasia,’ or homicide under any law of this State. (Emphasis added).14

With these provisions, actions taken by a family member, doctor, or other person, to cause a patient’s death in accordance with the Act will not be “patient abuse or neglect, suicide, assisted suicide, mercy killing, ’ euthanasia,’ or homicide,” as a matter of law. The death, as a matter of law, will be due to a terminal illness. This will create a legal inability to prosecute criminal behavior, for example, in the case of an outright murder for the money. The Act will create a perfect crime.

7. Dr. Shipman and the Call for Death Certificate Reform

According to a 2005 article in the UK’s Guardian newspaper, there was a public inquiry regarding Dr. Shipman’s conduct, which determined that he had “killed at least 250 of his patients over 23 years.”15 The inquiry also found:

that by issuing death certificates stating natural causes, the serial killer [Shipman] was able to evade investigation by coroners.16

According to a subsequent article in 2015, proposed reforms included having a medical examiner review death certificates, so as to improve patient safety.17 Instead, the instant Act moves in the opposite direction to require a legal coverup as a matter of law.

8. Euthanasia Will Be Allowed

The Act repeatedly describes the lethal dose as “medication.” Generally accepted medical practice allows a doctor, or a person acting under the direction of a doctor, to administer medication. This will be euthanasia as traditionally defined.

13 See e.g., A. 1504 [2R], § 3 (describing “qualified terminally ill patient”).
14 A. 1504 [2R], § 17a. (2).
15 David Batty, supra id., second paragraph, “What are its findings?”
16 Id., second paragraph, “What are its findings?”