
A BILL FOR AN ACT

RELATING TO PHYSICIAN ORDERS FOR LIFE SUSTAINING TREATMENT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that it is important for
2 people to make their preferences known regarding end-of-life
3 treatment. Health care planning is a process, rather than a
4 single decision, that helps individuals think about the kind of
5 care they would want if they become seriously ill or
6 incapacitated, and encourages them to talk with their loved ones
7 and physicians. Advance health care directives allow
8 individuals to put their health care wishes in writing and to
9 identify the person to represent them should they become unable
10 to speak for themselves.

11 The legislature finds that a physician orders for life
12 sustaining treatment program complements an advance health care
13 directive by taking the individual's wishes regarding life-
14 sustaining treatment, such as those set forth in the advance
15 health care directive, and converting those wishes into a
16 medical order. The hallmarks of a physician orders for life
17 sustaining treatment form are that:



- 1 (1) The orders contained in the standardized form are
2 immediately actionable, signed medical orders;
- 3 (2) The orders address a range of life sustaining
4 interventions as well as the patient's preferred
5 intensity of treatment for each intervention;
- 6 (3) The form is clearly identifiable and is available in
7 an electronic form;
- 8 (4) The form is recognized, adopted, and honored across
9 various treatment settings; and
- 10 (5) The form is particularly useful for individuals who
11 are frail and elderly or who have a compromised
12 medical condition, a prognosis of one year of life, or
13 a terminal illness.

14 The purpose of this Act is to implement the use of a
15 standardized physician orders for life sustaining treatment form
16 that states an individual's wishes regarding end-of-life
17 treatment in all pre-hospital and health care settings.

18 SECTION 2. The Hawaii Revised Statutes is amended by
19 adding a new chapter to be appropriately designated and to read
20 as follows:



1 **"CHAPTER**

2 **PHYSICIAN ORDERS FOR LIFE SUSTAINING TREATMENT**

3 § **-1 Definitions.** As used in this chapter:

4 "Department" means the department of health.

5 "Form" means a physician orders for life sustaining
6 treatment form.

7 "Physician orders for life sustaining treatment form" means
8 a form designed by the department and signed by a patient, or if
9 incapacitated, by the patient's surrogate as defined in section
10 327E-2, and the patient's physician, that records the patient's
11 wishes and that directs a health care provider regarding the
12 provision of resuscitative and life sustaining measures. A
13 physician orders for life sustaining treatment form is not an
14 advance health care directive.

15 § **-2 Physician orders for life sustaining treatment**

16 **form; execution; explanation; compliance; revocation.** (a) The
17 following may execute a form:

18 (1) A patient; and

19 (2) A patient's surrogate as defined in section 327E-2,
20 but only if the patient:

21 (A) Lacks capacity; or



1 (B) Has designated that the patient's surrogate is
2 authorized to execute the form.

3 The patient's physician may medically evaluate the patient and,
4 based upon the evaluation, may recommend new orders consistent
5 with the most current information available about the
6 individual's health status and goals of care. The physician
7 shall consult with the patient or the patient's surrogate before
8 issuing any new orders on a form. The patient or the patient's
9 surrogate may choose to execute or not execute any new form. If
10 a patient is incapacitated, the patient's surrogate shall
11 consult with the patient's physician and the patient's treating
12 physician, if not the same, before requesting the physician to
13 modify treatment orders on the form. To be valid, a form shall
14 be signed by the patient's physician and the patient or the
15 patient's surrogate. At any time, a patient, or if
16 incapacitated, the surrogate, may request alternative treatment
17 that differs from the treatment indicated on the form.

18 (b) The patient's physician, treating physician, or a
19 health care provider shall explain to the patient the nature and
20 content of the form, including any medical intervention or
21 procedures, and shall also explain the difference between an
22 advance health care directive and the form. The form shall be



1 prepared by the patient's physician, treating physician, or a
2 health care provider based on the patient's preferences and
3 medical indications.

4 (c) Any health care provider, including the patient's
5 physician and treating physician, if not the same, shall comply
6 with a properly executed and signed form and treat the patient
7 according to the orders on the form; provided that compliance
8 shall not be required if the orders on the form request
9 medically ineffective health care or health care that is
10 contrary to generally accepted health care standards.

11 (d) A patient having capacity may revoke a form at any
12 time and in any manner that communicates intent to revoke.

13 § -3 **Immunity.** (a) No physician, health care
14 professional, nurse's aide, hospice provider, home care
15 provider, including private duty and medicare home health
16 providers, emergency medical services provider, adult
17 residential care home operators, skilled nursing facility
18 operator, hospital, or person employed by or under contract with
19 a hospital shall be subject to criminal prosecution, civil
20 liability, or be deemed to have engaged in unprofessional
21 conduct for:



1 (1) Carrying out in good faith pursuant to this chapter a
2 decision regarding treatment orders, including
3 cardiopulmonary resuscitation by or on behalf of a
4 patient or for those actions taken in compliance with
5 the standards and procedures set forth in this
6 chapter; or

7 (2) Providing cardiopulmonary resuscitation to a patient
8 for whom an order not to resuscitate has been issued
9 on a form; provided the person reasonably and in good
10 faith:

11 (A) Was unaware of the issuance of an order not to
12 resuscitate; or

13 (B) Believed that consent to treatment orders,
14 including the order not to resuscitate, had been
15 revoked or canceled.

16 (b) No person shall be subject to criminal prosecution or
17 civil liability for consenting or declining to consent, in good
18 faith and on behalf of a patient, to the issuance of an order
19 not to resuscitate pursuant to this chapter.

20 § -4 Rules. The director of health shall adopt rules in
21 accordance with chapter 91 to carry out this chapter."



1 SECTION 3. Chapter 321, Hawaii Revised Statutes, is
2 amended by adding a new section to be appropriately designated
3 and to read as follows:

4 "§321- Physician orders for life sustaining treatment;
5 design of form; rules. (a) Pursuant to chapter , the
6 department shall require all private health care facilities and
7 hospitals in the state to adopt the use of a standardized
8 physician orders for life sustaining treatment form pursuant to
9 chapter . The department shall design a standardized form
10 to be used statewide.

11 (b) The director of health shall adopt rules in accordance
12 with chapter 91 to carry out this section."

13 SECTION 4. Chapter 323F, Hawaii Revised Statutes, is
14 amended by adding a new section to be appropriately designated
15 and to read as follows:

16 "§323F- Physician orders for life sustaining treatment
17 form; rules. (a) Pursuant to chapter , the corporation
18 shall require all health care facilities and community hospitals
19 within the Hawaii health systems corporation to adopt the use of
20 a standardized physician orders for life sustaining treatment
21 form designed by the department of health.



1 (b) The corporation shall adopt rules in accordance with
2 chapter 91 to carry out this section."

3 SECTION 5. New statutory material is underscored.

4 SECTION 6. This Act shall take effect on January 1, 2046.



Report Title:

Physician Orders for Life Sustaining Treatment

Description:

Creates a process for a patient to direct end-of-life treatment in a standardized physician orders for life sustaining form.

(HB1379 HD1)

