FAMILY ISSUE FACT SHEET

No. 2019-09 (February 2019)

HB 2122 SIMON'S LAW: DO-NOT-RESUSCITATE ORDERS; MINORS; PARENTAL CONSENT

EXECUTIVE SUMMARY

HB 2122 requires parental consent before a do-not-resuscitate order is placed on a minor's medical chart. The bill also establishes requirements for revocation of consent and a process for resolving a conflict if the parents are unable to agree on whether to implement or revoke a do-not-resuscitate order.

OVERVIEW

Simon Crosier was born on September 7, 2010, in St. Louis, Missouri. He was diagnosed with Trisomy 18, and lived for three months before passing away in December 2010. As his oxygen saturation levels dropped in the hospital, his parents were told that nothing could be done. His parents watched as he took his last breaths.

After Simon passed away, his parents found out that because of Simon's medical condition a do-not-resuscitate (DNR) order had been placed on his medical file, and that the medical staff had only been feeding him drops of sucrose. All of this without their knowledge.

In response to this tragedy, Simon's mother wrote a book to recount her son's story and began advocating for "Simon's law," which requires parental consent before a DNR is placed on a minor's chart.

In 2017, Kansas was the first state to pass "Simon's law" (38-150). The Missouri and New Mexico legislatures are currently considering Simon's law as well.

HB 2122 protects parental rights in this critical area in several ways:

- Requires both parents (unless one has sole legal decision-making authority) to consent before implementing a DNR on a minor's medical chart.
- If the parents orally consent to implement a DNR order, two witnesses other than the parent, guardian, or physician must be present and willing to attest to the consent.
- It establishes requirements for a parent to revoke consent for the DNR.
- If parents are unable to agree, either of the parents may institute a proceeding to resolve the conflict. The presumption is in favor of providing cardiopulmonary resuscitation.
- Either parent may institute a proceeding in court if they believe there is a violation or threatened violation of the statute.

Contact: Cathi Herrod, President, Center for Arizona Policy, Inc. This Fact Sheet may be reproduced without change and in its entirety for non-commercial purposes without prior permission from Center for Arizona Policy, Inc. © 2018 CAP. All rights reserved.

- In the case of a child under juvenile court jurisdiction, the court may issue an end-of-life medical decision order or may appoint a guardian to do so. The court may not grant the Department of Child Safety this authority. If parents regain custody, they may revoke any order by the court or guardian.
- On request from a patient or prospective patient, a medical facility must disclose in writing any policies relating to resuscitation or life-sustaining measures. However, this statute does not require medical facilities to have such policies.

TALKING POINTS

1. HB 2122 is a commonsense piece of legislation that ensures parents are involved in this critical medical decision.
2. Under Arizona law (ARS 1-601), parents have a fundamental right to direct the health care of their children. Surely, this right applies in the case of a do-not-resuscitate order.
3. Regardless of the severity of a child's medical condition, parents nonetheless need to consent when a DNR is being considered.

CONCLUSION

HB 2122 is a commonsense piece of legislation that requires parental consent before a do-not-resuscitate order is placed on a minor's medical chart. Under Arizona law (ARS 1-601), parents have a fundamental right to direct the health care of their children. Surely, this right applies in the case of a do-not-resuscitate order.

Contact: Cathi Herrod, President, Center for Arizona Policy, Inc. This Fact Sheet may be reproduced without change and in its entirety for non-commercial purposes without prior permission from Center for Arizona Policy, Inc. © 2018 CAP. All rights reserved.