

INSTRUCTIONS FOR PATIENTS FILLING OUT “REQUEST FOR MEDICATION TO END MY LIFE IN A HUMANE AND PEACEFUL MANNER” FORM

It is important to discuss your end of life wishes with your physician. The Patient Education Module outlines the process of obtaining covered prescribed medications. Please review the Patient Education Module to become familiar with the process and your responsibilities prior to completing the Request for Medication to End My Life in a Humane and Peaceful Manner form.

DO NOT sign this form until you have communicated with a Treating Physician (prescribing/attending physician) who has agreed to participate in the District of Columbia Death with Dignity Act. If you are unable to sign your name, you may sign an alternative mark, as long as witnesses recognize that it represents your signature. A common alternative mark is an “X”. Please read the note on the form about who may, and may not, be a witness. Both witnesses must see you sign this form. All dates on this form must be identical, or the form is invalid.

- “Request for Medication to End My Life in a Humane and Peaceful Manner” form goes to your Treating (prescribing/attending) Physician.
- It is recommended that you keep one copy for your records and display in an area that is readily accessible, such as refrigerator, bedside table or dining table.
- It is recommended that you designate a person to safely dispose of any unused covered medication.
- Resources for safe disposal of covered medications can be found online at <https://doh.dc.gov/page/death-dignity-act-2016>.

Only District of Columbia qualified patients can elect to participate in the Death with Dignity Act of 2016, in accordance with D.C. Official Code 7-661-01 *et seq.*

If you rescind your request to participate in the Death with Dignity program, contact your treating physician to discuss.

If you rescind from the Death with Dignity Program notify District of Columbia Department of Health via email at deathwithdignitydc@dc.gov.

Confidentiality is strictly protected.