

**The American Geriatrics Society is considering revising its position statement on physician assisted suicide, but is also considering that the Society may not want to have an active statement on the issue. Before moving forward, we want to better understand membership's views on this issue. This is important because physician assisted suicide is legal in several states and legalizing it is under consideration in many others. Physician assisted suicide is defined as a physician providing a terminally ill patient, at the patient's request, a lethal medication that the patient can take by his or her own hand to end their life. Other terminology indicating the same event includes physician assisted death, (physician) aid in dying, death with dignity, etc.**

**The 1995 position statement**

- a) cited the historical goal of physicians to comfort and to cure**
- b) supported that both physician assisted suicide and voluntary active euthanasia (VAE: when, at the request of a patient, a physician administers a medication or treatment with the sole intent to end the patient's life) remain illegal**
- c) encouraged clarification of PAS's legal status in States where it remained unclear**
- d) supported prohibiting professional caregivers from receiving compensation for assisting with either PAS or VAE**
- e) acknowledged that limiting patient autonomy is an unintended consequence in objecting to (legality of) PAS and VAE.**

**This survey is being distributed to a limited number of members, so your response is extremely important and will help to guide the Society's position on physician assisted suicide. Your individual responses are anonymous and any results from this survey, if published, will only be done so in the aggregate.**

1. Should physicians have as an option for their patients with terminal illness the ability to provide or prescribe a lethal medication that the patient can take to end their life by their own hand?

- Yes
- No

2. Which statement best describes your sentiment on high quality palliative care and assisted suicide/death (all statements refer to terminally ill patients)?

- Assisted suicide/dying is not necessary/appropriate if high quality palliative care is provided.
- Assisted suicide/dying may be necessary/appropriate if high quality palliative care is not available.
- Assisted suicide/dying may be necessary/appropriate even if high quality palliative care is available.

3. Is respect for patient autonomy alone enough to justify provision of lethal medication to a terminally ill patient who has requested such, in order they that end their life by their own hand?

Yes

No

4. What terminology do you think the AGS should adopt to describe the act of a physician providing, at the request of a terminally ill patient, a lethal medication that the patient can take by his or her own hand to end their life? (Note: These are in alphabetical order.)

Death with dignity

Patient directed aid in dying

Physician aid in dying

Physician assisted death

Physician assisted suicide

Other (please specify)

5. Have you ever provided, prescribed or otherwise supported for a patient with a terminal illness, at the patient's request, a medication that the patient can take by their own hand to end their life? (Select all that apply.)

I have prescribed or provided the means for a patient with terminal illness to end their life

I have supported such a patient by verbally making it clear that I support their decision

I have supported such a patient by referring them to a provider who may be better able to assist them

I have not provided, prescribed or supported a patient with terminal illness in pursuing this course

I have never been in a situation that required me to make this decision.

6. If you have not prescribed or provided, but have supported a patient with terminal illness in pursuing medication to take their own life, please describe why you chose this course. If you have not supported a patient in this manner, please skip this question.

7. If your state legalized providing, at the request of patients with terminal illness, a lethal medication that the patient can take by their own hand to end their life (or if this is legal in your state), would you consider fulfilling the patient's request?

- Yes
- No
- I would like to but I work for an entity (e.g. government or faith-based) that prohibits this.

8. If your state legalized providing, at the request of patients with terminal illness, a lethal medication that the patient can take by their own hand to end their life (or if this is legal in your state), would you consider supporting the patient's request?

- Yes
- No
- I would like to but I work for an entity (e.g. government or faith-based) that prohibits this.

9. In States where providing, at the request of patients with terminal illness, a lethal medication that the patient can take by their own hand to end their life is legal, what safeguards would be most effective? (Select all that apply.)

- At least two physicians make separate assessments resulting in concurrent recommendations
- Capacity and/or depression assessments must be completed by patient's physician
- Capacity and/or depression assessments must be completed by a physician who does not previously know the patient
- Maintenance of a database to track demographics such as race, socioeconomic status
- Mandatory palliative care consultation
- Third party or blinded review process
- Waiting period between request and provision of prescription

Other (please specify)

**Do you see any unique challenges for the groups listed below to choose or to access assistance in taking their life, with a substance prescribed/provided by a physician, when faced with a terminal condition? If yes, please take the time to explain.**

10. Patients with low health literacy?

Yes

No

If yes, please explain.

11. Patients with limited English proficiency?

Yes

No

If yes, please explain.

12. Patients who are disabled, dependent or frail?

Yes

No

If yes, please take the time to explain.

13. Please select the most appropriate position, if any, which the American Geriatrics Society should take regarding the act of a physician providing for a patient with a terminal illness, at the patient's request, a lethal medication that the patient can take by their own hand to end their life?

- Support its practice with appropriate safeguards and educational efforts
- Choose a neutral stance but advocate for robust safeguards in States where it is legal
- Discourage its practice
- Prohibit its practice in any circumstance

14. In the space provided below, please provide us with any thoughts you have or what factors contributed to the position that you selected above.

15. Your gender:

- Male
- Female
- Transgender
- Other
- Rather Not Say

16. Select the category that best describes your discipline:

- Nurse/Nurse Practitioner
- Pharmacist
- Physical or Occupational Therapist
- Physician
- Physician Assistant
- Social Worker
- Other Professional

17. How long have you been practicing in your Discipline?

- Less than a year
- 1-5 years
- 6-10 years
- 11-15 years
- >16 years

18. Please check all that apply:

- I am Board certified in geriatrics
- I am board-certified in Hospice and palliative medicine
- I practice palliative care
- I commonly make referrals to palliative care

19. Which of the following best describes the environment in which you work?

- University Hospital or Academic Medical Center
- Community Hospital or Health System
- VA Medical Center or Clinic
- Community Health Center or Federally Qualified Health Center
- Skilled Nursing or Long-Term Care Facility
- Outpatient Private Practice
- Health Plan
- Quality Improvement Organization

Other (please specify)

20. Is physician assisted suicide legal in your state?

- Yes
- No
- Unsure