# New Jersey Medical Aid in Dying for the Terminally Ill Act

2021 Data Summary

Prepared by: The Office of the Chief State Medical Examiner





## Introduction

The New Jersey Medical Aid in Dying for the Terminally Ill Act permits an attending physician to write a prescription for medication that enables a qualified terminally ill patient to end his or her own life. The Act was approved April 12, 2019 and went into effect August 1, 2019.

The Act defines "terminally ill" as "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. The Act defines an "attending physician" as a "physician who has primary responsibility for the care of a qualified terminally ill patient and treatment of the patient's terminal illness, disease, or condition."

The Act requires a qualified terminally ill patient to be a capable adult resident of New Jersey who has been diagnosed as being terminally ill by both his or her attending physician and a consulting physician. A qualified patient can obtain a prescription for medication to end his or her own life only if he or she has made a voluntary and informed decision. Prior to being prescribed medication to end his or her own life, the qualified patient must voluntarily and capably make two oral requests and one written request for the medication. The oral requests must be separated by at least 15 days. The written request must be signed and dated by the patient and witnessed by at least two people who attest that the patient is capable and acting voluntarily. One of the witnesses has to be a person who is not: related to the patient; entitled to any portion of the patient's estate; an owner, operator, employer, or resident of a health care facility at which the patient is receiving medical treatment; or the patient's attending physician.

At the time of the initial oral request, the attending physician has to recommend that the patient take part in consultations on treatment opportunities. At the time of the second oral request, the attending physician must offer the patient the opportunity to rescind the request. At least 15 days must elapse between the initial oral request and the writing of the prescription and 48 hours must elapse between a patient signing the written request and the writing of the prescription. A consulting physician must confirm the diagnosis and that the patient is capable and acting voluntarily. If indicated, the patient may be referred to a psychiatrist, psychologist, or clinical social worker to determine whether the patient is capable.

The attending physician is required to dispense medications directly to the patient or to contact a pharmacist and transmit the prescription to the pharmacist. A pharmacist may only dispense medications directly to the patient, the attending physician, or an identified agent of the patient. Medications cannot be dispensed to the patient by mail or other form of courier.

The Commissioner of Health requires the physician and pharmacist who dispensed the medication to file a copy of the dispensing record with the department no later than 30 days after dispensing the medication. The attending physician and consulting physician are required to submit documentation with the Department no later than 30 days after the qualified terminally ill patient's death. The Office of the Chief State Medical Examiner (OCSME) will document each event and create a report on an annual basis.

The required forms can be found at:

https://www.nj.gov/health/advancedirective/maid/

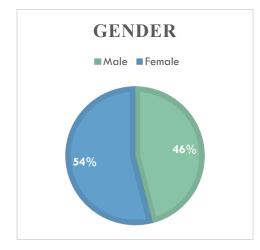
## **Participation Summary and Trends**

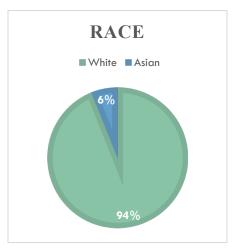
From January 1, 2021 to December 31, 2021, fifty (50) Medical Aid in Dying cases were filed with the Office of the Chief State Medical Examiner (OCSME).

In addition to the fifty cases that participated in the MAiD program:

- Paperwork was received for three (3) individuals who applied and received medication for the Medical Aid in Dying program but have not been reported as deceased in New Jersey.
- Paperwork was received for five (5) individuals who applied and received medication for the Medical Aid in Dying program but passed away without the use of the medication.

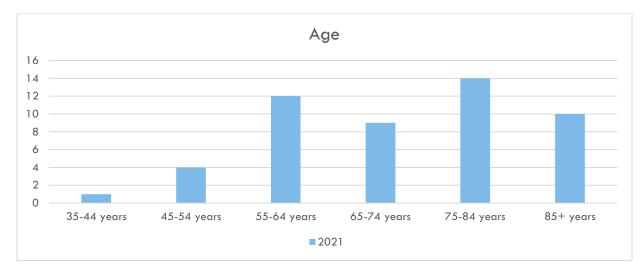
	2021 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Gender			
Male	23	46%	
Female	27	54%	
Race			
White	47	94%	
Black	-	-	
Hispanic	-	-	
Asian	3	6%	
Native	-	-	
Hawaiian/Pacific			
Islander			
American Indian	-	-	
Other single race	-	-	
Two or more	-	-	
races			



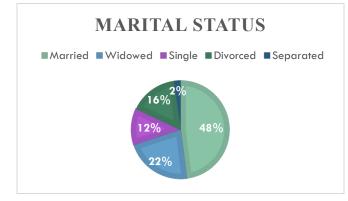


	2021 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Age			
35-44 years	1	2%	
45-54 years	4	8%	
55-64 years	12	24%	
65-74 years	9	18%	
75-84 years	14	28%	
85+ years	10	20%	

Of the fifty MAiD cases, the age of patients reported was between 43 and 98 years. The mean age was 72 years and the median age was 73.5 years.



	2021 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Marital Status			
Married	24	48%	
Widowed	11	22%	
Single	6	12%	
Divorced	8	16%	
Separated	1	2%	



	2021 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Education			
Unknown	-	-	
8 <sup>th</sup> Grade or Less	-	-	
9 <sup>th</sup> to 12 <sup>th</sup> Grade, No Diploma	-	-	
High school/ GED	11	22%	
Some college credit but no	4	8%	
degree			
Associate degree	2	4%	
Bachelor's degree	17	34%	
Master's degree	10	20%	
Doctorate or Professional	6	12%	
degree			

It is recommended that when the patient takes the prescribed medication, they leave a copy of the required paperwork in plain view.

- In 38% of cases, the OCSME was notified of the death via mailing-in of required forms.
- In 14% of cases, the OCSME was notified of the death via a phone call
- In 48% of cases, the OCSME was notified of the death via email.

In 2020, heart disease was the leading cause of death in the general population in New Jersey, accounting for 20.4% of all deaths, followed closely by COVID-19 at 17.1%.\* However, for those participating in the Medical Aid in Dying program in New Jersey, malignancy is the leading underlying illness accounting for 70% of cases.

	2021 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Underlying Illness			
Malignancy	35	70%	
Neuro-degenerative disease	10	20%	
Pulmonary disease	1	2%	
Cardiovascular disease	2	4%	
Other	2	4%	

\*At time of this report, 2020 statewide total data is preliminary.

The New Jersey Medical Aid in Dying for the Terminally Ill Act does not make recommendations for any specific medications that should be prescribed for a patient, but it does state the patient must be able to self-administer the medication. If medication is dispensed and for whatever reason the patient decides not to self-administer the medication, it must be disposed of by lawful means, including but not limited to, disposing of the medication in a way consistent with State and Federal guidelines concerning disposal of prescription medications, or by surrendering the medication to a prescription medication drop-off receptacle.

The Medication Dispensing record has a section to report the source of payment. All forms that were submitted noted "credit card" as the form of payment.

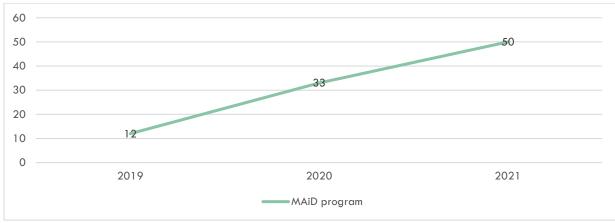
	2021 MAiD Cases
Medication Prescribed	
Diazepam, Digoxin, Propranolol, Morphine	2
Diazepam, Digoxin, Amitriptyline, Morphine	2
Diazepam, Digoxin, Amitriptyline, Morphine,	5
Phenobarbital	
Morphine, Ativan, Levsin, Zofran, Metoclopramide	1
Zofran, Metoclopramide, Digoxin, Morphine, Diazepam,	
Amitriptyline	9
Zofran, Metoclopramide, Digoxin, Morphine, Diazepam,	24
Amitriptyline, Phenobarbital	
Zofran, Morphine, Diazepam, Phenobarbitol, Digoxin,	3
Amitriptyline	
Morphine, Metoclopramide, Digoxin, Diazepam,	1
Amytriptaline, Phenobarbitol	
Unknown	3

• The medications listed were taken directly from the Medication Dispensing Records submitted.

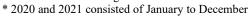
	2021 MAiD Cases		2019 Statewide Reported Deaths*	
	Number of Cases	Percentage of Total Cases	Total Cases	Percentage of Total Cases
Disposition				
Buried	11	22%	30,412	41%
Cremated	37	74%	36,064	49%
Donation	-	-	-	-
Entombment	2	4%	5,340	7%
Other	-	-	-	-
Removal from State	-	-	2,483	3%
County of				
Residence				
Atlantic	4	8%	2,812	4%
Bergen	8	16%	7,388	10%
Burlington	-	-	4,106	5.5%
Camden	2	4%	4,914	7%
Cape May	-	-	1,290	2%
Cumberland	-	-	1,611	2%
Essex	1	2%	5,926	8%
Gloucester	2	4%	2,758	4%
Hudson	1	2%	3,723	5%
Hunterdon	2	4%	917	1%
Mercer	4	8%	2,939	4%
Middlesex	11	22%	5,993	8%
Monmouth	2	4%	5,602	7.5%
Morris	3	6%	3,908	5%
Ocean	2	4%	7,350	10%
Passaic	-	-	3,775	5%
Salem	-	-	746	1%
Somerset	5	10%	2,505	3%
Sussex	-	-	1,298	2%
Union	3	6%	3,970	5%
Warren	-	-	1,016	1%
Unknown	-	-	4	-
Place of Death				
Home	47	94%	-	-
Other's Home	1	2%	-	-
Nursing Home	1	2%	-	-
Hospice Facility	1	2%	-	-

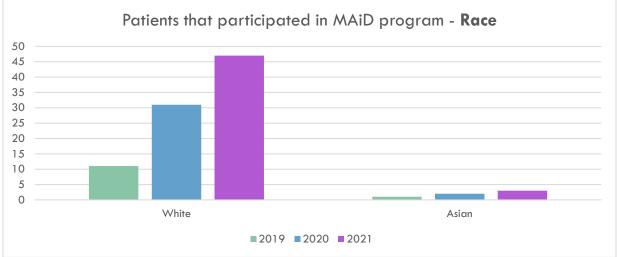
\*At time of this report, 2020 statewide total data was unavailable. 2019 data used from previous report.

### **Statistics Through the Years**

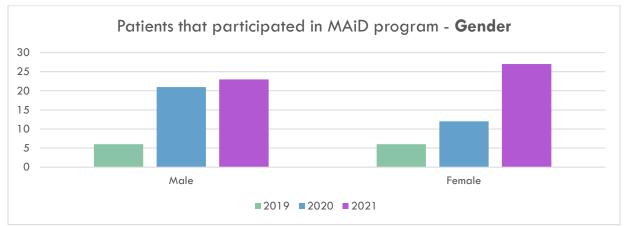


\* 2019 consisted of August to December

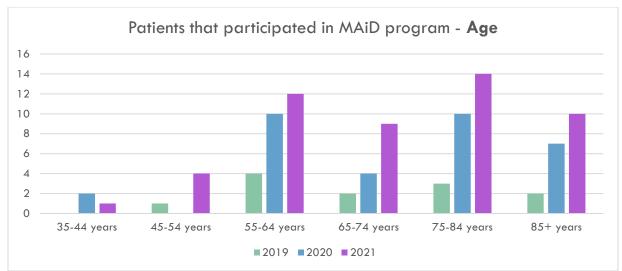




\* The only two races that have been reported as participating in the Medical Aid in Dying Program since its inception in 2019, were White and Asian.



\* In 2021, there was a significant increase in the number of female patients that participated in the Medical Aid in Dying program.



\* Consistently across all three years, the two most populous age groups are 55-64 years and 75-84 years.

#### References

https://nj.gov/health/advancedirective/maid/ https://www-doh.state.nj.us/doh-shad/query/builder/mort/MortStateICD10/Count.html https://www.nj.gov/health/chs/documents/Prelim2020LCOD.pdf