

FIRST REGULAR SESSION

SENATE BILL NO. 406

100TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR WALLINGFORD.

Read 1st time February 18, 2019, and ordered printed.

ADRIANE D. CROUSE, Secretary.

1953S.011

AN ACT

To amend chapter 191, RSMo, by adding thereto one new section relating to life-sustaining treatment policies.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 191, RSMo, is amended by adding thereto one new
2 section, to be known as section 191.250, to read as follows:

**191.250. 1. This section shall be known and may be cited as
2 "Simon's Law".**

3 2. As used in this section, the following terms shall mean:

**4 (1) "End-of-life medical decision order", a decision issued by a
5 juvenile or family court pertaining to life-sustaining treatment,
6 including do-not-resuscitate orders, provided on behalf of and in the
7 best interests of a child under juvenile or family court jurisdiction
8 under section 211.031;**

**9 (2) "Reasonable medical judgment", a medical judgment that
10 would be made by a reasonably prudent health care provider who is
11 knowledgeable about the case and the treatment possibilities with
12 respect to the medical conditions involved.**

**13 3. For a child who is not under juvenile or family court
14 jurisdiction under section 211.031, no health care facility, nursing
15 home, physician, nurse, or medical staff shall institute a do-not-
16 resuscitate order or similar physician's order, either orally or in
17 writing, without the written or oral consent of at least one parent or
18 legal guardian of the patient or resident under eighteen years of age
19 who is not emancipated. If consent to implement a do-not-resuscitate
20 order or similar physician's order is granted orally, two witnesses other
21 than the parent, legal guardian, or physician shall be present and**

22 willing to attest to the consent given by the legal guardian of the
23 patient or at least one parent of the patient. The provision of such
24 consent shall be immediately recorded in the patient's medical record,
25 specifying who provided the information, to whom the information was
26 provided, which parent or legal guardian gave the consent, who the
27 witnesses were, and the date and time the consent was obtained.

28 4. The requirements of subsection 3 of this section shall not
29 apply if a reasonably diligent effort of at least forty-eight hours without
30 success has been made to contact and inform each known parent or
31 legal guardian of the intent to implement a do-not-resuscitate order or
32 similar physician's order.

33 5. Consent previously given under subsection 3 of this section
34 may be revoked orally or in writing by the parent or legal guardian of
35 the patient or resident who granted the original permission. Such
36 revocation of prior consent shall take precedence over any prior
37 consent to implement a do-not-resuscitate order or similar physician's
38 order and shall be immediately recorded in the patient's or resident's
39 medical record, specifying who provided the information, to whom the
40 information was provided, which parent or legal guardian revoked
41 consent, who the witnesses were, and the date and time the revocation
42 was obtained.

43 6. For a child under juvenile court jurisdiction under section
44 211.031, a juvenile or family court may issue an end-of-life medical
45 decision order, a physician's order, or any other medical decision
46 order, or may appoint a guardian for the child for that purpose. The
47 children's division shall not be appointed as guardian for a child to
48 make end-of-life medical decisions, including do-not-resuscitate orders.
49 In the event a child under the jurisdiction of a juvenile or family court
50 under section 211.031 is returned to the custody of the legal guardian
51 or parent, the legal guardian or parent may revoke the consent for the
52 end-of-life medical decisions or similar physician's orders ordered by
53 the court, including do-not-resuscitate orders for the child. Revocation
54 may be orally or in writing and shall be immediately recorded in the
55 patient's medical records, specifying who provided the information, to
56 whom the information was provided, which parent or legal guardian
57 revoked consent, who the witnesses were, and the date and time the
58 revocation was obtained.

59 **7. For the purposes of this section, a relative caregiver under the**
60 **provisions of section 431.058 shall have the same authority given to a**
61 **parent or legal guardian of a nonemancipated patient or resident under**
62 **eighteen years of age, provided that such a patient or resident is not**
63 **under juvenile or family court jurisdiction under section 211.031.**

64 **8. Nothing in this section shall be construed to require any**
65 **health care facility, nursing home, physician, nurse, or medical staff to**
66 **provide or continue any treatment, including resuscitative efforts, food,**
67 **medication, oxygen, intravenous fluids, or nutrition, that would be:**

68 **(1) Medically inappropriate because, in their reasonable medical**
69 **judgment, providing such treatment would create a greater risk of**
70 **causing or hastening the death of the patient; or**

71 **(2) Medically inappropriate because, in their reasonable medical**
72 **judgment, providing such treatment would be potentially harmful or**
73 **cause unnecessary pain, suffering, or injury to the patient.**

74 **9. Nothing in this section shall require health care providers to**
75 **continue cardiopulmonary resuscitation or manual ventilation beyond**
76 **a time in which, in their reasonable medical judgment, there is no**
77 **further benefit to the patient or likely recovery of the patient.**

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