



## **132nd MAINE LEGISLATURE**

## FIRST REGULAR SESSION-2025

**Legislative Document** 

No. 410

H.P. 264

House of Representatives, February 4, 2025

An Act to Require Parental Consent to Withhold Life-sustaining Measures for a Minor or to Comply with a Do-not-resuscitate Order for a Minor

Reference to the Committee on Health Coverage, Insurance and Financial Services suggested and ordered printed.

R(+ B. Hunt

ROBERT B. HUNT Clerk

Presented by Representative PAUL of Winterport. Cosponsored by Senator HAGGAN of Penobscot and Representatives: GRIFFIN of Levant, HAGGAN of Hampden, JAVNER of Chester, QUINT of Hodgdon.

1	Be it enacted by the People of the State of Maine as follows:
2	Sec. 1. 22 MRSA §1509 is enacted to read:
3	<u>§1509. Parental consent required for restrictions on life-sustaining measures</u>
4 5	<b>1. Definitions.</b> As used in this section, unless the context otherwise indicates, the following terms have the following meanings.
6 7 8 9	A. "Do-not-resuscitate order" means an order in a minor's medical record to not use cardiopulmonary resuscitation measures if the minor's heart or breathing stops. "Do-not-resuscitate order" does not include withholding a medical intervention to provide a minor with comfort care or to alleviate pain.
10	B. "Facility" means a facility licensed under chapter 405 or 1663.
11 12 13	C. "Minor" means a person under 18 years of age who is unemancipated, not under state supervision and not on active duty in the state military forces or the United States Armed Forces, including the National Guard or Reserves.
14	D. "Resident" means a person who is residing in a facility.
15 16	<b>2.</b> Parental or legal guardian authority. A health care practitioner, health care provider or facility may not:
17 18	A. Withhold, withdraw or place any restrictions on life-sustaining measures for a minor without the written consent of a parent or legal guardian of the minor;
19 20	B. Institute a do-not-resuscitate order or similar physician's order for a minor without the written consent of a parent or legal guardian of the minor;
21 22 23	C. Interfere with the efforts of a parent or legal guardian of a minor to obtain a medical opinion about the minor's medical condition or transfer the minor to another health care provider or facility;
24 25 26	D. Refuse to provide immediate access to a minor, or the medical records of a minor, to a health care practitioner, health care provider or facility designated by a parent or legal guardian of the minor; or
27 28 29 30	E. Hinder or delay the efforts of a parent or legal guardian of a minor to obtain necessary measures, mechanisms or procedures for the minor, including an immediate tracheostomy or gastrostomy tube required to facilitate a transfer to another health care provider or facility.
31 32 33 34 35	<b>3.</b> Revocation of consent. A parent or legal guardian of a minor may revoke in writing consent given under subsection 2, paragraph A or B. A revocation under this subsection takes precedence over any prior consent and must be immediately recorded in the minor's medical records specifying who revoked the consent, who, if anyone, witnessed the revocation and the date and time the revocation was given.
36 37 38 39	<b>4.</b> Failure to contact. The provisions of subsection 2, paragraph A or B do not apply if the health care practitioner, health care provider or facility makes a reasonably diligent and documented effort to contact a parent or legal guardian of the minor within a 72-hour period.
40 41	5. Duties of health care practitioner, health care provider or facility. A health care practitioner, health care provider or facility shall:

1 A. If a parent or legal guardian of a minor requests a transfer under subsection 2, 2 paragraph C, continue the provision of life-sustaining measures, including artificially 3 administered nutrition and hydration, until the transfer and make every reasonable 4 effort to assist in the transfer process; and 5 B. Upon the request of a parent or legal guardian of a minor in the care of the health care practitioner, health care provider or facility, disclose verbally and in writing any 6 7 policies of the health care practitioner, health care provider or facility regarding 8 resuscitation, life-sustaining measures or measures considered nonbeneficial,

ineffective, futile or inappropriate for patients or residents. This paragraph does not
require a health care practitioner, health care provider or facility to have a policy
regarding resuscitation, life-sustaining measures or measures considered
nonbeneficial, ineffective, futile or inappropriate for patients or residents.

6. Parental and legal guardian authority. A parent or legal guardian of a minor
maintains all rights under this section unless there is destruction of the circulatory and
respiratory systems and the entire brain of the minor.

7. Presumption of continuation of life. There is a presumption that the continuation
of life is in a minor's best interest, and a court may not order the withdrawal of life sustaining measures from a minor over the objections of a parent or legal guardian of the
minor unless there is destruction of the circulatory and respiratory systems and the entire
brain of the minor.

**SUMMARY** 

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22 This bill prohibits health care practitioners, health care providers and facilities such as 23 nursing homes, hospitals and children's homes from withholding life-sustaining measures 24 or instituting a do-not-resuscitate order for an unemancipated minor without the written 25 consent of a parent or legal guardian of the minor. Health care practitioners, health care 26 providers and facilities may not hinder a parent or legal guardian of a minor to seek another 27 medical opinion or transfer the minor to another health care provider or facility and are 28 required to continue providing life-sustaining measures until the transfer, continue to allow 29 access to the minor and the minor's medical records and inform the parent or legal guardian 30 of any policies regarding resuscitation, life-sustaining measures or measures considered 31 nonbeneficial, ineffective, futile or inappropriate for patients or residents. The bill provides 32 that there is a presumption that the continuation of life is in a minor's best interest and that 33 the parental or legal guardian authority does not end and the authority of a court to order 34 the withdrawal of life-sustaining measures from a minor does not take precedence over the 35 objections of a parent or legal guardian of the minor unless there is destruction of the 36 circulatory and respiratory systems and the entire brain of the minor.