## MAINE STATE LEGISLATURE

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1 2 3 4	(EMERGENCY) (New Draft of H.P. 1282, L.D. 1799) SECOND REGULAR SESSION
5 6	ONE HUNDRED AND TWELFTH LEGISLATURE
7 <b>8</b>	Legislative Document No. 2036
9 10 11 12	Reported by Representative Pines from the Committee on Human Resources and printed under Joint Rule 2. Original bill sponsored by Representative Nelson of Portland. Cosponsored by Senator Clark of Cumberland.  EDWIN H. PERT, Clerk
13 14 15 16 17	STATE OF MAINE  IN THE YEAR OF OUR LORD  NINETEEN HUNDRED AND EIGHTY-SIX
18 19 20 21	AN ACT Concerning Required Request for Organ Donation.
22 23 24	Emergency preamble. Whereas, Acts of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and
25 26 27	Whereas, tens of thousands of people in the State and across the country are waiting for organ and tissue transplants; and
28 29 30 31	Whereas, these transplants can make the difference between life and death for some and between a life of pain and a full, productive life for others; and
32 33 34 35	Whereas, according to a recent Gallup Poll, 72% of Americans would consent to the donation of a deceased loved one's organs if asked, but only 10% of potential donors became donors; and

Whereas, the one-year success rate for organ and tissue transplants is high and is increasing each year; and

Whereas, this bill provides a sensitive, compassionate method to require the request of organ donations in certain instances and this request will increase the number of people who will receive organ and tissue transplants and thus increase the number of people who can live a productive life without pain and will decrease the needless deaths caused by lack of a donated organ, the gift of life; and

Whereas, the sooner this bill is implemented, the sooner needless pain and suffering and needless death can be alleviated; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore.

- 21 Be it enacted by the People of the State of Maine as 22 follows:
- 23 Sec. 1. 22 MRSA §2904, sub-§5, as enacted by PL 24 1969, c. 193, is amended to read:
- 5. <u>How made.</u> Any gift by a person designated in section 2902, subsection 2 shall be made by a document signed by him, or made by his telegraphic, recorded telephonic or other recorded message.

This subsection includes, but is not limited to, gifts made pursuant to section 2910. Any gift pursu-ant to section 2910, by a person designated in tion 2902, subsection 2, shall be made by a document signed by him, by a telegraphic, recorded telephonic or other recorded message, or by a telephonic message witnessed by at least 2 people in which case the wit-nesses shall document the telephonic message in writ-ing.

Sec. 2. 22 MRSA §2907, sub-§4, as enacted by PL 1969, c. 193, is repealed and the following enacted in its place:

- 4. Applicability of other laws. This chapter is subject to the laws of this State prescribing powers and duties with respect to autopsies and to the provisions of chapter 711, the Medical Examiner Act.
  - Sec. 3. 22 MRSA §2910 is enacted to read:
- §2910. Request for consent required to an anatomical gift
- 11 1. Request for consent required. When a death occurs in a hospital, a request for consent to an anatomical gift shall be made in accordance with the following provisions.
  - A. Where, based upon accepted medical standards, a decedent who has not made an anatomical gift is a suitable candidate for organ or tissue donation, the attending physician, or if he is unavailable or if he made the determination of death, the hospital administrator, or his designated representative, shall at the time of death request the person designated in section 2902, subsection 2, to consent to the gift of all or any part of the decedent's body as an anatomical gift for any or all of the purposes expressed in section 2903. This request is subject to all the provisions of this chapter.
  - B. Persons who will make requests for anatomical gifts shall be given training in the appropriate procedures for making the request. A person who determined the death of the decedent may not make the request for that decedent.
- 2. Medical records. When a request for an anatomical gift is made pursuant to this section, the request and its disposition shall be noted in the decedent's medical record.
- 37 3. Interhospital agreements. Hospitals shall develop and implement interhospital agreements among themselves which establish protocols for the retriev-

- 1 al and transportation of all or any part of a body 2 found suitable for transplantation and for the costs 3 associated with transplantation.
  - 4. Annual reports. Hospitals shall report annually to the commissioner the number of requests for anatomical gifts made and the number of organs retrieved pursuant to this section and the overall impact of this section. This report shall not contain any information which can identify the decedents or any person to whom a request for an anatomical gift was made.
  - 5. Rules. The commissioner shall establish rules concerning the training of persons who will perform the request for an anatomical gift pursuant to this section and may establish other rules necessary to implement this section. The commissioner shall appoint a committee of medical and hospital representatives to make recommendations regarding rules concerning the interhospital agreements pursuant to subsection 3.
- 21 **Emergency clause.** In view of the emergency cited 22 in the preamble, this Act shall take effect when approved.

## 24 STATEMENT OF FACT

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- This new draft replaces the original bill. It still requires that a request be made to families or the legal representative for organ donations when someone dies in a hospital. In addition, the new draft:
- 30 1. Incorporates the request for anatomical gift 31 into the Anatomical Gift Act, including:
- A. Immunity for good faith actions while implementing the law; and
- 34 B. The requirement for written documentation of the request or a witnessed phone call;

- 2. Limits requests for donations to those instances where the decedent has not made a contrary intention known or where the donor is medically suitable;
- 5 3. Specifies that the attending physician shall 6 make the request unless he or she is unavailable or 7 made the determination of death;
- 4. Eliminates the use of the death certificate
   for reporting purposes;
- 10 5. Requires annual reports to the Commissioner 11 of Human Services;
- 12 6. Cross-references the applicability of the 13 Medical Examiner Act, which may affect the availabil-14 ity of the organs or tissues in medical examiner 15 cases;
- 7. Adds language to ensure that the inter-hospital agreements include protocols for the costs associated with transplantation; and
- 8. Adds an emergency preamble and clause to ensure minimum delay in increasing the availability of organs and tissue for transplantation.

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