



115th MAINE LEGISLATURE

SECOND REGULAR SESSION-1992

Legislative Document

No. 2030

H.P. 1418

House of Representatives, January 7, 1992

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 26. Reference to the Committee on Judiciary suggested and ordered printed.

EDWIN H. PERT, Clerk

Presented by Representative CARROLL of Gray. Cosponsored by Representative PENDEXTER of Scarborough and Representative PENDLETON of Scarborough.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND NINETY-TWO

An Act to Clarify the Obligations of Emergency Medical Personnel.

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Be it enacted by the People of the State of Maine as follows:

18-A MRSA §5-712, as enacted by PL 1989, c. 830, §1, is 4 repealed and the following enacted in its place:

6 §5-712. When health-care provider may presume validity of declaration

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(a) In the absence of knowledge to the contrary, a
physician or other health-care provider may assume that a declaration complies with this Part and is valid. An emergency
medical services person, licensed under Title 32, chapter 2-B, acting under the supervision of a physician and within a system
of emergency medical care approved by the Emergency Medical Services Advisory Board may rely upon and give affect to a
declaration or to the instructions of a designee under section 5-702, subsection (a) when:

- (1) The declaration has been communicated to the emergency 20 medical services person;
- 22 (2) The emergency medical services person has no knowledge of any revocation of the declaration; and
- (3) The emergency medical services person makes a good
 26 faith decision that the declaration applies to the circumstances presented.
- (b) A person licensed by the Emergency Medical Services
 30 Advisory Board whose action in honoring a declaration is in accordance with this section is not subject to criminal or civil
 32 liability or discipline for unprofessional conduct, with respect to that action.

For the purposes of this section, the term "declaration" 36 includes a so-called "do not resuscitate" order communicated to an emergency medical services person by a person employed by or 38 credentialed by a nursing facility, hospital or hospice.

STATEMENT OF FACT

42 The purpose of this bill is to clarify in the existing law regarding the rights of the terminally ill that emergency medical personnel may rely upon the patient's advance directives such as 44 a living will, a durable medical power of attorney or a do not resuscitate order in treating the patient. Currently, emergency 46 medical services personnel may not honor a valid and legally 48 authorized living will or other advance directives. This results in the emergency medical services attendant performing resuscitative efforts when a competent patient has given clear 50 instructions otherwise.