

**HLTH 1635 – CONSULTANT’S ASSESSMENT OF PATIENT’S
INFORMED CONSENT DECISION CAPABILITY**

Instructions for Completion

Medical Assistance in Dying

Ministry of Health

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What is the purpose of the *Consultant’s Assessment of Patient’s Informed Consent Decision Capability (i.e. Consultant’s Assessment)* form?

The federal legislation for medical assistance in dying requires that two independent medical practitioners (i.e. physicians or nurse practitioners) each provide a written opinion confirming that a requesting person (i.e. patient) meets all of the eligibility criteria set out in the legislation. One of the criteria is that the patient is able to provide “informed consent” to medical assistance in dying.

If one or both of the medical practitioners have reason to be concerned about the patient’s capability, they must refer the patient to another medical practitioner (e.g. with enhanced knowledge and skills in psychiatry or geriatric medicine) for a capability assessment. The consultant medical practitioner will use the *Consultant’s Assessment* form (HLTH 1635) to record their assessment of the requesting person’s capability to provide informed consent to receive medical assistance in dying.

Note: Related forms are the *Patient Request Record* (HLTH 1632), the *Assessment Record (Assessor)* (HLTH 1633) used by the medical practitioner willing to be an assessor, and the *Assessment Record (Prescriber)* (HLTH 1634) used by the medical practitioner willing to be an assessor and provider of medical assistance in dying.

Where should I submit my completed *Consultant’s Assessment* form?

The consultant practitioner is to fax or mail a copy of their completed *Consultant’s Assessment* form to the applicable health authority MAiD Care Coordination Service. Contact information for each health authority is provided at the bottom of the form. (Please complete the form using black ink.)

The consultant practitioner will provide their completed, signed and dated Consultant Assessment to the medical practitioner(s) who requested the patient consult. All deaths resulting from medical assistance in dying are required to be reported to the BC Coroners Service. If medical assistance in dying is administered, the prescriber practitioner must fax a copy of all provincial forms, including the *Consultant Assessment*, to the BC Coroners Service at 250-356-0445. The provincial forms to be submitted are listed on the *Document Submission Checklist* (HLTH 1636), which is available on the Ministry of Health website at: <http://www2.gov.bc.ca/assets/gov/health/forms/1636.pdf>

Is electronic format acceptable for forms retention?

Medical practitioners are to retain all original completed provincial forms for medical assistance in dying in the patient’s health record, and must comply with any request for information or provision of medical records sought by the BC Coroners Service or an agency tasked with completing a review of medical assistance in dying. Electronic retention of the forms in “pdf” format is acceptable.

PATIENT INFORMATION

The consultant practitioner will record information pertaining to the patient (i.e. name, personal health number, birthdate and gender) and their medical diagnosis or diagnoses relevant to the request for medical assistance in dying (i.e. diagnoses that indicate a grievous and irremediable medical condition, intolerable suffering, and death being reasonably foreseeable). The patient’s medical diagnoses are also

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recorded on the *Assessment Record (Assessor)* (HLTH 1633) form and the *Assessment Record (Prescriber)* (HLTH 1634) form.

REFERRING PRACTITIONER

The consultant practitioner will record information pertaining to the referring medical practitioner (the assessor and/or prescriber practitioner who referred the patient for the capability assessment (i.e. name, CPSID # or CRNBC Prescriber #, phone number and address).

CONSULTANT PRACTITIONER

The consultant practitioner will record information pertaining to themselves (i.e., name, college #, phone, fax, mailing address, email address, specialty, and the location of the assessment).

PROFESSIONAL LANGUAGE SERVICE

Should the patient require an interpreter, The Provincial Language Service can be accessed 24 hours a day, seven days a week at 1-877-BC Talks (228-2557) select option 1. Ensure the interpreter's name and identification number are noted on the form.

CONSULTANT PRACTITIONER ASSESSMENT AND DETERMINATION OF PATIENT'S CAPABILITY TO PROVIDE INFORMED CONSENT

The consultant practitioner will record the date of the patient's examination. Details on the assessment process and findings are to be documented in the patient's medical record.

Confirmation

The consultant practitioner will indicate by checkmark that on the date of the assessment, they met with the patient, informed the patient of the reason for the assessment, and obtained patient consent to conduct the assessment to determine their capability to consent to medical assistance in dying. The consultant practitioner will then initial one of the following two statements, and discuss their findings with the patient and advise the referring practitioner:

Initials **The patient does not have capability.** A psychiatric illness/cognitive impairment is present to a degree that impairs ability to make an informed consent decision regarding medical assistance in dying.

OR

Initials **The patient has capability.** A psychiatric illness/cognitive impairment is **not** present to a degree that impairs ability to make an informed consent decision regarding medical assistance in dying.

CONSULTANT PRACTITIONER SIGNATURE

The consultant practitioner will record their signature, date and time of signing.

This completes the Consultant Assessment form.