



# Dying With Dignity Canada

## It's your life. It's your choice.

### Manitoba Letter-Writing Toolkit

#### Send Your Comments to the College of Physicians and Surgeons in Manitoba

After completing the College's online survey, you may wish to share additional comments by sending an e-mail to [PAD@cpsm.mb.ca](mailto:PAD@cpsm.mb.ca).

We encourage all of our Manitoba supporters to participate and help influence the regulatory process for physician assisted death. Here is an outline to help you craft a powerful message to the College. Take a look.

*Dear College of Physicians and Surgeons of Manitoba,*

#### Summary of your letter (optional)

**In two or three bullet points summarize your main thoughts on the CPSM's *Draft Statement*. Sample starter prompts may include:**

*"Manitoba residents deserve a compassionate and patient-centred approach to physician assisted dying."*

OR

*"I have some concerns that the Manitoba College's approach in the Draft Statement may endanger a patient-centred approach to physician assisted dying."*

#### The body of your letter

**Using clear, concise language, tell the College of Physicians and Surgeons of Manitoba that there are a few important considerations that need to be addressed in their *Draft Statement* with regards to physician assisted dying in the province.**

For more background on Dying With Dignity Canada's proposals for legislation, please see our [2015 Draft Policy Framework](#).

**In your own words**, you may wish to highlight the following concerns, which relate specifically to the College's *Draft Statement*:

- 1. You are concerned that the College does not require doctors who decline to provide a physician assisted death when requested by a patient, with a duty**

**to refer or to provide information to that patient about physician assisted dying.**

At the very minimum, physicians who refuse to provide assisted death must be required to refer patients who request it to another doctor or referral agency (should one exist) to ensure their patients are not abandoned.

Physicians cannot expect that someone who is grievously and irremediably ill will have the ability to find another willing doctor to help them end their suffering. Patients who are suffering intolerably generally do not have the physical wherewithal to seek out willing physician on their own. They should not be left to their own devices in their search for a peaceful end to their lives. Such a situation is tantamount to patient abandonment. No physician will be required to provide physician assisted dying against their will, but any person choosing to practice medicine has obligations to their patients. The physician's right to conscience must be balanced with the patient's right to a peaceful death.

It is a standard practise in health care for doctors to provide information about medical treatments and options if a patient requests. Therefore, it is troubling that the College's *Draft Statement* implies that declining doctors may not have to provide information about physician assisted dying should a patient request it.

**2. You would like the College to state where physician assisted dying can occur. It is discussed in the survey but not in the Draft Statement.**

Patients who have a medical condition that causes them to face enduring and intolerable suffering should not have to move out of their home communities to access a peaceful death. We believe that patients should be able to receive a physician assisted death where they choose whether it is at an institution or at home.

Some institutions will struggle with the thought of allowing a service they believe to be at odds with their mission or ideology. In the case of a clash between institution's rights and patient's rights, the rights of patients must come first. **No publicly funded institution** should be able to deny a patient or resident their right to access a peaceful death.

**3. Ask The College to amend the responsibilities of the assisting physician not to include confirmation of diagnosis**

DWD Canada supports the requirement that two doctors separately assess the competency of any patient who requests a physician assisted death.

We have noted that the Draft Advice requires that a second physician also confirm a patient's diagnosis and prognosis.

DWD Canada believes that the role of the second physician includes confirming that the patient's condition is grievous and irremediable. In some situations this will not be through diagnosis but through discussion with the attending physician and review of the medical records. This is critical because some diagnoses may require a specialist to be detected, and this could present an unreasonable barrier to timely access, particularly in remote locations.

As such, it is not appropriate that a new second diagnosis and prognosis be mandatory. It is sufficient that the first diagnosis be confirmed.

**Use personal experience.** Include a personal story to illustrate why you're passionate about making sure the College's approach to physician assisted dying is compassionate. Did you watch a loved one suffer in agony through a drawn-out terminal illness? Do you fear that you will face a similar fate? Or were you simply inspired by the late Gloria Taylor, who fought for years for British Columbians to have the right to die with dignity? We learned from Quebec that personal stories were crucial in motivating legislators to vote for choice.

**Include your professional qualifications or background, if appropriate.** Do you have a background in healthcare? If so, note it. In addition, state how your work has shaped your perspective on end-of-life care. If you don't work in healthcare, feel free to state your professional background too. The government is asking for the input from people from all walks of life — not just doctors and nurses.

### **Your conclusion**

**Briefly summarize the main points of your letter.** In a sentence or short paragraph, reiterate the main points you made in the executive summary.

**Finish your letter by thanking the Working Group with the College of Physicians and Surgeons of Manitoba for their consideration.** A little kindness goes a long way.

*Sincerely,*

*[Your name]*