**National Clinicians Conference on Medical Aid in Dying**

**February 14-15, 2020**

**University of California, Berkeley**

**Clark Kerr Campus Conference Center**

**2601 Warring St. Berkeley, CA**

Program

**DAY ONE**

February 14, 2020

**7:00 AM-8:30 AM**Attendee Check-in. Networking. Coffee and Pastry Service.

Main Entrance, Main Hall and Rm. 102

**7:00-8:00 AM**Speaker Check-In, Main Hallway

**SESSION NUMBER**

**0. 9:00 AM Welcome and Conference Information**   
**Lael Duncan, M.D.**  
*Director, National Clinicians Conference on Medical Aid in Dying*

*Consultant & Educator, LCD Advising*

1. **9:05 AM Medical Aid in Dying--An Introduction**   
   **Lonny Shavelson, M.D.**  
   *Board Chair, National Clinicians Conference on Medical Aid in Dying  
   Founding Partner, Bay Area End of Life Options*  
   **Thaddeus Mason Pope, JD, PhD**  
   *Health Law Professor & Bioethicist  
   Health Law Institute at Mitchell Hamline School of Law, St. Paul, Minnesota*

* Define the need for medical professional education about medical aid in dying.
* Discuss and describe inter-state differences in the practice of medical aid in dying.
* List current national demographics for aid in dying.

**2. 9:45 AM Hospices and Aid in Dying: Evolution & Future**   
Moderator **Thalia DeWolf, RN, CHPN**.  
*Nursing Curriculum Director, National Clinicians Conference on Medical Aid in Dying  
Clinical Coordinator, Bay Area End of Life Options*  
**Laura Koehler, LCSW**, **ACHP-SW** *Senior Clinical Director, Hospice by the Bay*  
**Hope Wechkin, M.D.**  
*Medical Director, Evergreen Health Hospice. Kirkland, WA*  
**Gary Pasternak, M.D., MPH**  
*Chief Medical Officer, Mission Hospice. San Mateo, California*  
**Yelena Zatulovsky, LCAT, LPMT, MA, MT-BC, CCLS, HPMT**  
*Vice President of Patient Experience, Seasons Healthcare. Rosemont, IL*

Objectives

* Describe the evolving role of hospice for patients requesting aid in dying.
* Discuss and establish policies and processes that promote best practices and safety in the delivery of hospice services in population of patients seeking aid-in-dying.

**10:45 AM BREAK**

**3. 11:00 AM The Pharmacology and Physiology of Aid in Dying**   
**Lonny Shavelson, M.D.**  
**Carol Parrot, M.D.**  
*Attending & Consulting Physician, End of Life Washington. Seattle, WA*

Objectives

* Describe the advantages and risks of different aid-in-dying medication protocols.
* Explain the relevance and presentation of respiratory vs. cardiac death in aid in dying patients.
* Optimize routes of self-administration for aid in dying medication across varied patient populations.

**12:00 PM LUNCH**

**4. 1:00 PM Care at the Bedside: Monitoring and Guiding Eligible Patients**   
Moderator **Thalia DeWolf, RN, CHPN**.  
**Carol Parrot, MD**.  
*Attending & Consulting Physician, End of Life Washington. Seattle, WA*  
**Chris Fruitrich.**  
*Volunteer, End of Life Washington. Seattle, WA*  
**Bobbie Head, MD, PhD.**  
*Oncologist, Marin Cancer Care, Greenbrae, CA.*  
**Jessica Safra, MD**  
*Hospice by the Bay, San Francisco*  
**Molly Weiner,** **RN**  
*Hospice by the Bay, Larkspur*

Objectives

* Describe and contrast clinical roles and responsibilities for doctors, nurses, social workers, chaplains and others in the provision of bedside care for those participating in aid in dying.
* Provide support for families in the setting of an aid-in-dying death.
* Create policies that support hospice staff on the day of an aid-in-dying death.

**5. 1:55 PM Evaluating Capacity and Prognosis**  
Case Presentation: **Burton Presberg, M.D.**  
*Cancer Psychiatrist, Oakland*  
**Lawrence Kaplan, D.O.**  
*Director, Consultation-Liaison Service, UCSF and Psycho-Oncology Psychiatry Department, UCSF Helen Diller Family Comprehensive Cancer Center. San Francisco, CA*  
**Lynette Cederquist, M.D.**  
*Clinical Professor of Medicine, Division of General Internal Medicine, Director of Clinical Ethics Program, University of California, San Diego*

Objectives

* Describe challenges in assessing capacity for decision-making in terminally ill patients.
* List elements of a robust process for prognosis and capacity evaluations among patients inquiring about aid in dying.

**2:35 PM BREAK**

**6. 2:50 PM Ethical Challenges in Aid-in-Dying Care**   
Moderator **Lonny Shavelson, M.D.**  
**Margaret Pabst Battin, M.F.A., Ph.D.**  
*Distinguished Professor of Philosophy  
Program in Medical Ethics and Humanities, University of Utah*  
**Ruchika Mishra, Ph.D.**  
*Program Director, Bioethics  
Program in Medicine and Human Values  
Sutter Health Bay Area*  
**Timothy Quill, M.D. MACP, FAAHPM**  
*Professor of Medicine, Psychiatry, Medical Humanities, and Nursing  
Palliative Care Department of Medicine  
University of Rochester School of Medicine*  
**Stuart J. Youngner, M.D.**  
*Professor of Bioethics and Psychiatry  
Case Western Reserve University*

Objectives

* Describe three ethical challenges in current approaches to aid in dying.
* Discuss an approach to working with ethically complex cases at end of life and in aid in dying.

**7. 3:50 PM** **Integrating Aid in Dying into Medical Practice**   
Moderator: **Lonny Shavelson, M.D.**  
**Ryan Spielvogel, M.D.**  
*Family Medicine, Sutter Health, Sacramento, CA*  
**Lowell Kleinman, M.D.**  
*Palliative Care Medical Director, John Muir Medical Group, Walnut Creek, CA*  
**Mindy Cooper, M.D.**  
*Internal Medicine & Nephrology, Vail Health. Avon, CO*  
**Bobbie Head, M.D., Ph.D.**  
*Oncologist. Marin Cancer Care, Greenbrae, CA*  
**Eric Walsh, M.D.**  
*Emeritus Professor, Hematology-Oncology and Family Medicine, Oregon Health and Sciences University, Portland, OR*  
**Gary Pasternak, M.D., MPH**  
*Chief Medical Officer, Mission Hospice, San Mateo, California*

Objectives

* Describe current status of the integration of aid in dying into the practice of end of life care.
* Describe how inquiries about aid in dying can be leveraged to promote excellence in end of life care.
* Describe two different models for integrating aid-in-dying care into medical practice.

**8. 4:50 PM Evaluation and Management of High-Risk Patients**   
**Lonny Shavelson, M.D.**  
**Carol Parrot, M.D.**

Objectives

* List red flag indicators for patients at high risk of complicated or prolonged dying.
* Describe an approach to evaluating and managing high risk patients.

**5:30 PM: CLOSE Day 1** **Sessions**

**6:00-8:00 PM Aid in Dying: Clinical Training for Care at the Bedside** (RNs, MSWs, Chaplains)

*Pre-registration required*. Light meal and snacks.  
Lead Faculty **Thalia DeWolf, RN, CHPN**.

Co-faculty **Elizabeth Semenova**, **MSW, MTS**  
*Practice Director and Psychospiritual Guide  
Integrated MD Care. San Diego, CA*

**DAY TWO**

February 15, 2020

**7:30 AM Speaker and Attendee Check-in.** Networking. Coffee and Pastry Service.

Main Entrance, Main Hallway, Rm. 102

**9. 9:00 AM Race Matters: Ethnic, Cultural, and Spiritual Considerations** **in Aid in Dying**  
Moderator: **Lonny Shavelson, M.D.**  
**Terri Laws, Ph.D.**  
*Assistant Professor, African American Studies  
University of Michigan, Dearborn*   
**Tracey Bush, MSW, LCSW**  
*Regional Practice Leader, End of Life Option Act Program.  
Kaiser Permanente, Southern California*  
**Alan Elbaum, MS**  
*Medical Student. UC Berkeley-UC San Francisco Joint Medical Program.   
Co-author with LaVera Crawley: "Race and Physician-Assisted Death: Do Black Lives Matter?" (in press).*

Objectives

* List factors contributing to inequity in healthcare and care received at end of life.
* For those requesting aid in dying, list personal and demographic factors that increase obstacles to care or contribute to individual and family challenges at end of life.

**10. 10:00 AM Managing Social Complexity in Patients and Families**  
Moderator **Lonny Shavelson, M.D.**   
Including the topics:  
**Complex Grief in Medical Aid in Dying, and**

**Family conflicts and complexity in medical aid in dying requests**  
**Deborah Schwing, LMFT; Leslie Dennett, LMFT**  
*Hospice by the Bay Bereavement Department, San Francisco, CA*  
**Skye O’Neil PA-C**  
*Program Manager, Denver Health MAID*  
**Jeremy Long, MD, MPH**  
*Medical Director, Denver Health MAID*

Objectives

* Describe the role of social determinants for health for patients pursuing aid in dying.
* Recognize & respond when social complexity creates challenges in care and complicates the grief process; provide patient, family and staff with support.

**10:45 AM BREAK**

**11. 11:00 AM Attending Deaths**   
Moderator: **Thalia DeWolf, RN, CHPN**  
**Emily Gorgen, R.N.**case presentation  
**Hadas Rivera-Weiss**, case presentation  
**Keith Seckel, ADN, RN, CHPN.**  
*Director of Nursing, Timberhill Place Assisted Living, Corvallis, OR*  
**Sara Tolchin, RN**  
*Hospice by the Bay, Larkspur, CA*  
**Bob Wood, MD**  
*End of Life Washington*  
**Chris Fruitrich.**  
*Volunteer, End of Life Washington, Seattle*

Objectives

* Site three benefits of having clinical staff at the bedside for an aid-in-dying death.
* Describe how fallback procedures might be used to ensure quality care at end of life for aid-in-dying patients and their families.
* Implement policies to avoid family confusion on the day of death.

**12. 11:45 AM Plans Change: When Aid in Dying Cannot be Implemented**   
Moderator **Thalia DeWolf, RN, CHPN**  
**Timothy Quill, M.D. MACP, FAAHPM**  
*Professor of Medicine, Psychiatry, Medical Humanities & Nursing  
Palliative Care Department of Medicine, University of Rochester School of Medicine. Rochester, NY*  
**Andrew, Holland RN**  
*Hospice East Bay. Pleasant Hill, CA*  
**Anne Marie Olson, LCSW**  
*Hospice by the Bay*  
**Patrick J. Macmillan, MD, FACP**  
*Chief, Division of Palliative Medicine, University of California San Francisco (Fresno)*

Objectives

* Discuss challenges individuals face in accessing information about care at the end of life.
* Describe and implement alternative care pathways for when aid in dying cannot be implemented.

**12:30 PM LUNCH**

**13. 1:30 PM** **Practice Pragmatics: Creating an Efficient and Effective**  
**Workflow for Aid in Dying**   
**Lonny Shavelson, MD**

Objectives

* Create effective work-flow processes for aid in dying.

**14. 2:15 PM** **How to Talk About Aid in Dying**  
Moderator **Lael Duncan, M.D.**   
**Thalia DeWolf, RN, CHPN**.  
**Elizabeth Semenova**, **MSW, MTS**  
*Practice Director and Psychospiritual Guide  
Integrated MD Care. San Diego, CA*  
Objectives

* Recognize the various expressions used by patients and families when requesting information on aid in dying.
* Respond appropriately to requests for information across settings--Opt-in; Opt-out; Neutral; No-Access.

**2:45 PM BREAK**

**15. 3:00 PM Pharmacists: Compounding, Teaching & Informing**  
**Eddie Lau, Pharm. D.**   
*Feel Good Compounders Pharmacy, Pacifica, CA*  
**Christy Harmon, PharmD, BCACP**  
*Pharmacy Supervisor, University of Colorado Hospital. Aurora, CO*  
**Laura De Simone, MS, RPh**  
*Clinical Pharmacy Specialist for Death with Dignity, Pain Management  
Kaiser Permanente, Portland, OR*

Objectives

* Describe the role of expert pharmacists in care for aid-in-dying patient.
* List pharmacy procedures that contribute to quality care for the aid-in-dying patient and their families.

**16. 3:30 PM The American Clinicians Academy on Medical Aid in Dying**: **The roles and functions of this newly formed Academy**  
Moderator: **Lonny Shavelson, M.D.**

Multiple presenters, commentators, and audience discussion

**Introduction:** The Canadian Academy  
**Stefanie Green**, **MD**

*President, Canadian Association of Medical Aid in Dying Assessors and Providers (CAMAP)*

**Resident education**

**Evan Pulvers, M.D.**  
*Founder of Aid-in-Dying Training  
Contra Costa, CA, Family Medicine Residency*  
**Ryan Spielvogel, M.D.**  
*Family Medicine, Sutter Health, Sacramento, CA*

Objectives

* Describe how Standards of Care might be promoted and developed for aid in dying.
* Discuss ways to implement educational opportunities that will promote quality of care for the aid-in-dying population.
* Describe how data about inquiry, utilization and practice of aid in dying can assist efforts to improve end of life care

**4:30-5:00 Closing Remarks**  
**Lonny Shavelson, M.D.**  
**Lael Duncan, MD**