

Medical Assistance in Dying (MAID)

The College of Physicians & Surgeons of Alberta (CPSA) provides advice to patients to support improved patient care and safety. This advice does not define a standard of practice, nor should it be interpreted as legal advice.

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What is medical assistance in dying (MAID)?

Health Canada identifies 2 types of MAID that both include a physician or nurse practitioner who:

- directly administers a substance that causes death, such as an injection of a drug
 - this is becoming known as “clinician-administered medical assistance in dying”

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or

- provides or prescribes a drug that the patient takes themselves, in order to bring about their own death
 - this is becoming known as “self-administered medical assistance in dying”

Which drugs to use are outlined in clinical guidelines and practices established by provinces and territories, or organizations that regulate the practice of medicine. As the regulator of drug products, Health Canada will work with partners, as needed, to help support access to drugs for medical assistance in dying.¹

Am I eligible for MAID?

Individuals whose deaths may or may not be reasonably foreseeable are eligible for MAID.

ELIGIBILITY CRITERIA

Under federal legislation, to receive MAID a patient must:

1. be eligible or, but for any applicable minimum period of residence or waiting period would be eligible, for health services funded by a federal, provincial or territorial government in Canada;
2. be at least 18 years of age;
3. be capable of making decisions with respect to their health;
4. have a grievous and irremediable medical condition that causes enduring suffering that is intolerable to the patient and cannot be relieved under conditions which the patient considers acceptable;
5. have made a voluntary request for MAID that, in particular, was not made as a result of external pressure; and
6. have given [informed consent](#) to receive MAID, after being informed of their medical diagnosis, the forms of treatment and the means that are available to relieve their suffering, including palliative care, and being offered consultations with professionals that provide such services.

¹ From Health Canada’s “[Medical Assistance in Dying](#)” (Feb. 2, 2023)

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A patient who cannot make an informed decision is not eligible for MAID. This includes any patient who requires a substitute decision-maker or who has lost competence since making their wishes known through a Personal Directive.

A competent adult has the right to declare intolerable suffering. The physician's role is to work with the patient to determine whether the condition is grievous and irremediable ([Appendix A](#)).

WHO IS INELIGIBLE FOR MAID

Advance requests (e.g., advance directives) for MAID are prohibited. This includes patients who don't currently meet eligibility criteria, but who want to make their request now in case they lose capacity to make the decision in the future. Mature minors are also exempt from obtaining MAID. For more information on mature minors, please refer to the [Informed Consent for Minors](#) Advice to the Profession document.

At this point in time, individuals seeking MAID solely on the basis of a mental disorder are also ineligible: this is under review by the federal government with a decision pending March 2024.

ELIGIBILITY ASSESSMENTS

A patient's eligibility for MAID is determined through at least two assessments:

1. An **initial** assessment, which may be conducted by the physician managing the patient's care or arranged by the [AHS Care Coordination Service](#).
2. A **second, independent assessment**, which may be arranged by the physician managing the patient's care or the AHS Care Coordination Service and must, by law, be performed by a healthcare provider who:
 - a. is neither a mentor to the other physician nor responsible for supervising the other physician's work;
 - b. does not know or believe themselves to be a beneficiary under the will of the patient making the request, or a recipient, in any other way, of a financial or other material benefit resulting from the patient's death, other than standard compensation for services relating to the request; and

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- c. does not know or believe themselves to be connected to the other physician or to the patient making the request in any other way that would affect their objectivity.

For people whose natural death is not reasonably foreseeable, a waiting period a minimum of 90 days after the assessment is required before the person can obtain MAID.

Why do I have to have capacity before getting MAID?

It is important for the healthcare providers involved in your care to ensure your understanding of the information before making your decision, especially with how serious this decision is.

How do I access MAID?

You will have to let your doctor know you want MAID in writing; this can be done in a letter, email or text message, based on what forms of communication your doctor accepts. Your doctor will then connect you with a MAID provider or give you the contact information for the [Alberta Health Services \(AHS\) MAID Care Coordination Service](#). You will also need to complete a [Record of Request](#) to formalize your request for MAID.

If your doctor does not participate in MAID, they are still required to be respectful of your wishes.

[How do I access medical assistance in dying services in Alberta?](#)

My doctor won't provide MAID: what can I do?

Just like you, your doctor has a [Charter right](#) to freedom of conscience and religion. While their conscientious objections must not impede your right to receive unbiased information about and access to MAID, they are required to at least provide you with the contact information for the [AHS MAID Care Coordination Service](#). The Care Coordination Service will guide you through the process and help connect you with a physician or nurse practitioner who provides MAID.

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How do I find a doctor who will provide MAID?

CPSA does not maintain a list of physicians who provide MAID. The [AHS MAID Care Coordination Service](#) will be able to connect you with a physician or nurse practitioner who provides MAID.

Why do I need a plan to get MAID?

It's important for the physician or nurse practitioner to know what your wishes are. They will work with you and, in many cases, the [AHS MAID Care Coordination Service](#), to develop a plan that outlines:

- when, where and how MAID will be provided (e.g., “clinician-administered medical assistance in dying” or “self-administered medical assistance in dying”);
- who will be present (e.g., healthcare providers, family members, friends, etc.); and
- an alternate plan in case there are complications.

You must be informed of all parts of the plan in order to provide consent to receive MAID.

What if I change my mind?

You can withdraw consent at any time, including right up to the moment before receiving MAID.

What other options do I have?

The [AHS MAID Care Coordination Service](#) also provides information on palliative and end-of-life care options.

I've been asked me to be a witness for a MAID request: what does this involve?

People seeking MAID have to complete a Record of Request to formalize the request. Your role is to confirm that the Record of Request has been signed by the person seeking MAID and that they understand what they are signing.

[Witnessing the Record Request for MAID](#)

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Resources

If you have any questions, please contact support@cpsa.ab.ca.

- [Alberta Health Service's MAID Care Coordination Services](#)
 - [FAQs for Patients and Family Members](#)
 - [Palliative and end-of-life care](#)
- [Dying with Dignity Canada](#)
 - [Patient Rights Guide](#)
 - [MAID](#)
 - [FAQs](#)
 - [Palliative care](#)
 - [Other end-of-life options](#)
- [Government of Alberta: Social supports](#)
 - [End-of-life options](#)
- [My Health Alberta: Palliative Care](#)
- [Government of Canada: Medical assistance in dying](#)