

Second Regular Session
Sixty-seventh General Assembly
STATE OF COLORADO

DRAFT
10.2.09

BILL 3

LLS NO. 10-0246.01 Richard Sweetman

INTERIM COMMITTEE BILL

Hospice and Palliative Care in Colorado

SHORT TITLE: "Med Orders Scope Of Treatment"

A BILL FOR AN ACT

101 **CONCERNING MEDICAL ORDERS DETERMINING THE SCOPE OF**
102 **TREATMENT AN ADULT WISHES TO RECEIVE UNDER CERTAIN**
103 **CIRCUMSTANCES.**

Bill Summary

(Note: This summary applies to this bill as introduced and does not necessarily reflect any amendments that may be subsequently adopted.)

Hospice and Palliative Care in Colorado. Provides that a medical orders for scope of treatment form (MOST form) that is properly executed and signed by an adult's physician or advanced practice nurse or, if under the supervision or authority of the physician, a physician's assistant shall have the same force and effect as a physician's order with respect to medical treatment of the person who is the subject of the

*Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.*

MOST form. Permits an adult with decisional capacity or an authorized decision-maker for an adult who lacks decisional capacity to execute a MOST form.

Requires the state board of health to promulgate rules establishing protocols for the use of MOST forms by emergency medical service professionals, health care providers, and health care facilities.

Requires an emergency medical service professional, health care provider, or health care facility to comply with a MOST form that is apparent and immediately available. Exempts an emergency medical service professional, health care provider, or health care facility that complies with a MOST form from civil or criminal liability or regulatory sanction. Provides that a verbal order from an adult's physician or advanced practice nurse or, if under the supervision or authority of the physician, a physician's assistant shall have the same force and effect as an executed MOST form so long as the verbal order is countersigned by the adult's physician or advanced practice nurse or, if under the supervision or authority of the physician, a physician's assistant. Provides that neither the existence nor absence of a MOST form shall be the basis for any delay in issuing or refusing to issue an annuity or policy of life or health insurance or any increase of a premium therefor. Clarifies the effect of a MOST form on conflicting provisions of another form of advance medical directive.

1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1.** Title 15, Colorado Revised Statutes, is amended BY
3 THE ADDITION OF A NEW ARTICLE to read:

4 **ARTICLE 18.7**
5 **Directives Concerning Medical Orders**
6 **for Scope of Treatment**

7 **15-18.7-101. Legislative declaration.** (1) THE GENERAL
8 ASSEMBLY HEREBY FINDS THAT:

9 (a) COLORADO LAW HAS TRADITIONALLY RECOGNIZED THE RIGHT
10 OF AN ADULT OR HIS OR HER AUTHORIZED SURROGATE DECISION-MAKER
11 TO ACCEPT OR REJECT MEDICAL TREATMENT AND ARTIFICIAL
12 NOURISHMENT AND HYDRATION;

13 (b) EACH ADULT HAS THE RIGHT TO ESTABLISH, IN ADVANCE OF

1 THE NEED FOR MEDICAL TREATMENT, DIRECTIVES AND INSTRUCTIONS FOR
2 THE ADMINISTRATION OF MEDICAL TREATMENT IN THE EVENT THE ADULT
3 LATER LACKS THE DECISIONAL CAPACITY TO PROVIDE INFORMED CONSENT
4 TO, WITHDRAW FROM, OR REFUSE MEDICAL TREATMENT;

5 (c) CURRENT INSTRUMENTS FOR MAKING ADVANCE MEDICAL
6 DIRECTIVES ARE OFTEN UNDERUTILIZED, HAMPERED BY INSTITUTIONAL
7 BARRIERS, AND INCONSISTENTLY INTERPRETED AND IMPLEMENTED; AND

8 (d) THE FRAIL ELDERLY, CHRONICALLY OR TERMINALLY ILL, AND
9 NURSING HOME RESIDENT POPULATIONS ARE IN PARTICULAR NEED OF A
10 CONSISTENT METHOD FOR IDENTIFYING AND COMMUNICATING CRITICAL
11 TREATMENT PREFERENCES THAT EACH SECTOR OF THE HEALTH CARE
12 COMMUNITY WILL RECOGNIZE AND FOLLOW.

13 (2) THE GENERAL ASSEMBLY THEREFORE CONCLUDES THAT IT IS
14 IN THE BEST INTERESTS OF THE PEOPLE OF COLORADO TO ADOPT STATUTES
15 PROVIDING FOR MEDICAL ORDERS FOR SCOPE OF TREATMENT. CONSISTENT
16 WITH THE GOALS OF ENHANCING PATIENT-CENTERED, COMPASSIONATE
17 CARE THROUGH METHODS TO ENHANCE CONTINUITY ACROSS SETTINGS,
18 MEDICAL ORDERS FOR SCOPE OF TREATMENT WILL PROVIDE A PROCESS FOR
19 TIMELY DISCUSSION BETWEEN INDIVIDUALS AND THEIR HEALTH CARE
20 PROVIDERS ABOUT CHOICES TO ACCEPT, WITHDRAW, OR REFUSE
21 LIFE-SUSTAINING TREATMENT AND, THROUGH THE USE OF A SINGLE,
22 STANDARDIZED FORM, WILL ENSURE THOSE PREFERENCES ARE CLEARLY
23 AND UNEQUIVOCALLY DOCUMENTED.

24 **15-18.7-102. Definitions.** AS USED IN THIS ARTICLE, UNLESS THE
25 CONTEXT OTHERWISE REQUIRES:

26 (1) "ADULT" MEANS ANY PERSON EIGHTEEN YEARS OF AGE OR
27 OLDER.

1 (2) "ADVANCE MEDICAL DIRECTIVE" MEANS A WRITTEN
2 INSTRUCTION CONCERNING MEDICAL TREATMENT DECISIONS TO BE MADE
3 ON BEHALF OF THE ADULT WHO PROVIDED THE INSTRUCTION. AN ADVANCE
4 MEDICAL DIRECTIVE INCLUDES, BUT NEED NOT BE LIMITED TO:

5 (a) A MEDICAL DURABLE POWER OF ATTORNEY EXECUTED
6 PURSUANT TO SECTION 15-14-506;

7 (b) A DECLARATION EXECUTED PURSUANT TO THE "COLORADO
8 MEDICAL TREATMENT DECISION ACT", ARTICLE 18 OF THIS TITLE;

9 (c) A POWER OF ATTORNEY GRANTING MEDICAL TREATMENT
10 AUTHORITY EXECUTED PRIOR TO JULY 1, 1992, PURSUANT TO SECTION
11 15-14-501, AS IT EXISTED PRIOR TO THAT DATE; OR

12 (d) A CPR DIRECTIVE OR DECLARATION EXECUTED PURSUANT TO
13 ARTICLE 18.6 OF THIS TITLE.

14 (3) "ARTIFICIAL NOURISHMENT AND HYDRATION" MEANS:

15 (a) NOURISHMENT AND HYDRATION SUPPLIED THROUGH A TUBE
16 INSERTED INTO THE STOMACH, INTESTINES, NOSE, OR MOUTH; OR

17 (b) NUTRIENTS OR FLUIDS INJECTED INTRAVENOUSLY INTO THE
18 BLOODSTREAM.

19 (4) "AUTHORIZED SURROGATE DECISION-MAKER" MEANS A
20 GUARDIAN APPOINTED PURSUANT TO ARTICLE 14 OF THIS TITLE, AN AGENT
21 APPOINTED PURSUANT TO A MEDICAL DURABLE POWER OF ATTORNEY, A
22 PROXY DECISION-MAKER FOR MEDICAL TREATMENT DECISIONS APPOINTED
23 PURSUANT TO ARTICLE 18.5 OF THIS TITLE, OR A SIMILARLY AUTHORIZED
24 SURROGATE, AS DEFINED BY THE LAWS OF ANOTHER STATE, WHO IS
25 AUTHORIZED TO MAKE MEDICAL DECISIONS FOR AN INDIVIDUAL LACKING
26 DECISIONAL CAPACITY.

27 (5) "CARDIOPULMONARY RESUSCITATION" OR "CPR" SHALL HAVE

1 THE SAME MEANING AS SET FORTH IN SECTION 15-18.6-101 (1).

2 (6) "CPR DIRECTIVE" SHALL HAVE THE SAME MEANING AS SET
3 FORTH IN SECTION 15-18.6-101 (2).

4 (7) "DECISIONAL CAPACITY" MEANS THE ABILITY TO PROVIDE
5 INFORMED CONSENT TO, WITHDRAWAL FROM, OR REFUSAL OF MEDICAL
6 TREATMENT.

7 (8) "EMERGENCY MEDICAL SERVICE PROFESSIONAL" MEANS AN
8 EMERGENCY MEDICAL TECHNICIAN WHO IS CERTIFIED OR LICENSED BY THE
9 DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT, CREATED AND
10 EXISTING PURSUANT TO SECTION 25-1-102, C.R.S., OR ANY FIRST
11 RESPONDER CERTIFIED BY THE DEPARTMENT OF PUBLIC HEALTH AND
12 ENVIRONMENT OR THE DIVISION OF FIRE SAFETY IN THE OFFICE OF
13 PREPAREDNESS, SECURITY, AND FIRE SAFETY IN THE DEPARTMENT OF
14 PUBLIC SAFETY, IN ACCORDANCE WITH PART 12 OF ARTICLE 33.5 OF TITLE
15 24, C.R.S.

16 (9) "HEALTH CARE FACILITY" MEANS A HOSPITAL, A HOSPICE
17 INPATIENT RESIDENCE, A NURSING FACILITY, A CARE CENTER, A DIALYSIS
18 TREATMENT FACILITY, AN ASSISTED LIVING FACILITY, AN ENTITY THAT
19 PROVIDES HOME- AND COMMUNITY-BASED SERVICES, A HOSPICE OR HOME
20 HEALTH CARE AGENCY, OR ANOTHER FACILITY ADMINISTERING OR
21 CONTRACTING TO ADMINISTER MEDICAL TREATMENT, WHICH FACILITY IS
22 LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED OR PERMITTED BY LAW
23 TO ADMINISTER MEDICAL TREATMENT.

24 (10) "HEALTH CARE PROVIDER" MEANS:

25 (a) A PHYSICIAN OR OTHER INDIVIDUAL WHO ADMINISTERS
26 MEDICAL TREATMENT TO AN ADULT AND WHO IS LICENSED, CERTIFIED, OR
27 OTHERWISE AUTHORIZED OR PERMITTED BY LAW TO ADMINISTER MEDICAL

1 TREATMENT OR WHO IS EMPLOYED BY OR ACTING FOR SUCH AN
2 AUTHORIZED PERSON; OR

3 (b) A HEALTH MAINTENANCE ORGANIZATION LICENSED AND
4 CONDUCTING BUSINESS IN THIS STATE.

5 (11) "MEDICAL TREATMENT" MEANS THE PROVISION,
6 WITHHOLDING, OR WITHDRAWAL OF ANY:

7 (a) HEALTH CARE;

8 (b) MEDICAL PROCEDURE, INCLUDING BUT NOT LIMITED TO
9 SURGERY, CPR, AND ARTIFICIAL NOURISHMENT AND HYDRATION; OR

10 (c) SERVICE TO MAINTAIN, DIAGNOSE, TREAT, OR PROVIDE FOR A
11 PATIENT'S PHYSICAL OR MENTAL HEALTH OR PERSONAL CARE.

12 **15-18.7-103. Medical orders for scope of treatment - forms -**

13 **rules.** (1) ON OR BEFORE JANUARY 1, 2010, THE STATE BOARD OF
14 HEALTH CREATED IN SECTION 25-1-103, C.R.S., SHALL PROMULGATE
15 RULES AND PROTOCOLS FOR IMPLEMENTATION OF A STANDARDIZED
16 MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM BY EMERGENCY
17 MEDICAL SERVICE PROFESSIONALS, HEALTH CARE PROVIDERS, AND HEALTH
18 CARE FACILITIES. THE PROTOCOLS SHALL INCLUDE UNIFORM METHODS
19 FOR RAPID IDENTIFICATION OF AN ADULT WHO HAS EXECUTED A MEDICAL
20 ORDERS FOR SCOPE OF TREATMENT FORM, CONTROLLED DISTRIBUTION OF
21 THE STANDARDIZED MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM,
22 AND A REQUIREMENT THAT EACH MEDICAL ORDERS FOR SCOPE OF
23 TREATMENT FORM INCLUDE THE INFORMATION DESCRIBED IN SUBSECTION
24 (2) OF THIS SECTION.

25 (2) PROTOCOLS ESTABLISHED BY RULES PROMULGATED BY THE
26 STATE BOARD OF HEALTH PURSUANT TO SUBSECTION (1) OF THIS SECTION
27 SHALL REQUIRE A MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM TO

1 INCLUDE THE FOLLOWING INFORMATION CONCERNING THE ADULT WHOSE
2 MEDICAL TREATMENT IS THE SUBJECT OF THE MEDICAL ORDERS FOR SCOPE
3 OF TREATMENT FORM:

4 (a) THE ADULT'S NAME, DATE OF BIRTH, AND SEX;

5 (b) THE ADULT'S EYE AND HAIR COLOR;

6 (c) THE ADULT'S RACE OR ETHNIC BACKGROUND;

7 (d) IF APPLICABLE, THE NAME OF THE HOSPICE PROGRAM IN WHICH
8 THE ADULT IS ENROLLED;

9 (e) THE NAME, ADDRESS, AND TELEPHONE NUMBER OF THE
10 ADULT'S PHYSICIAN, ADVANCED PRACTICE NURSE, OR PHYSICIAN'S
11 ASSISTANT;

12 (f) THE ADULT'S SIGNATURE OR MARK OR, IF APPLICABLE, THE
13 SIGNATURE OF THE ADULT'S AUTHORIZED SURROGATE DECISION-MAKER;

14 (g) THE DATE UPON WHICH THE MEDICAL ORDERS FOR SCOPE OF
15 TREATMENT FORM WAS SIGNED;

16 (h) THE ADULT'S INSTRUCTIONS CONCERNING:

17 (I) THE ADMINISTRATION OF CPR;

18 (II) OTHER MEDICAL INTERVENTIONS, INCLUDING BUT NOT LIMITED
19 TO CONSENT TO COMFORT MEASURES ONLY, TRANSFER TO A HOSPITAL,
20 LIMITED INTERVENTION, OR FULL TREATMENT;

21 (III) THE USE OF ANTIBIOTICS; AND

22 (IV) THE USE OF ARTIFICIAL NOURISHMENT AND HYDRATION; AND

23 (i) THE SIGNATURE OF THE ADULT'S PHYSICIAN OR ADVANCED
24 PRACTICE NURSE OR, IF UNDER THE SUPERVISION OR AUTHORITY OF THE
25 PERSON'S PHYSICIAN, A PHYSICIAN'S ASSISTANT.

26 **15-18.7-104. Duty to comply with medical orders for scope of**
27 **treatment - immunity - effect on criminal charges against another**

1 **person.** (1) AN EMERGENCY MEDICAL SERVICE PROFESSIONAL, HEALTH
2 CARE PROVIDER, OR HEALTH CARE FACILITY SHALL COMPLY WITH AN
3 ADULT'S EXECUTED MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM
4 THAT IS APPARENT AND IMMEDIATELY AVAILABLE.

5 (2) AN EMERGENCY MEDICAL SERVICE PROFESSIONAL, HEALTH
6 CARE PROVIDER, HEALTH CARE FACILITY, OR OTHER PERSON WHO, IN GOOD
7 FAITH, COMPLIES WITH AN EXECUTED MEDICAL ORDERS FOR SCOPE OF
8 TREATMENT FORM SHALL NOT BE SUBJECT TO CIVIL OR CRIMINAL LIABILITY
9 OR REGULATORY SANCTION FOR SUCH COMPLIANCE.

10 (3) COMPLIANCE BY AN EMERGENCY MEDICAL SERVICE
11 PROFESSIONAL, HEALTH CARE PROVIDER, OR HEALTH CARE FACILITY WITH
12 AN EXECUTED MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM SHALL
13 NOT AFFECT THE CRIMINAL PROSECUTION OF A PERSON OTHERWISE
14 CHARGED WITH THE COMMISSION OF A CRIMINAL ACT.

15 (4) IN THE ABSENCE OF AN EXECUTED MEDICAL ORDERS FOR SCOPE
16 OF TREATMENT FORM DECLINING CPR OR A CPR DIRECTIVE, AN ADULT'S
17 CONSENT TO CPR SHALL BE PRESUMED.

18 (5) AN ADULT'S PHYSICIAN OR ADVANCED PRACTICE NURSE OR, IF
19 UNDER THE SUPERVISION OF THE ADULT'S PHYSICIAN, A PHYSICIAN'S
20 ASSISTANT MAY PROVIDE A VERBAL CONFIRMATION TO A HEALTH CARE
21 PROVIDER OF AN ADULT'S EXECUTED MEDICAL ORDERS FOR SCOPE OF
22 TREATMENT FORM. THE HEALTH CARE PROVIDER SHALL ANNOTATE ON
23 THE MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM THE TIME AND
24 DATE OF THE VERBAL CONFIRMATION AND THE NAME AND LICENSE
25 NUMBER OF THE PHYSICIAN, ADVANCED PRACTICE NURSE, OR PHYSICIAN'S
26 ASSISTANT. THE PHYSICIAN, ADVANCED PRACTICE NURSE, OR PHYSICIAN'S
27 ASSISTANT SHALL COUNTERSIGN THE MEDICAL ORDERS FOR SCOPE OF

1 TREATMENT FORM WITHIN TEN DAYS AFTER PROVIDING A VERBAL
2 CONFIRMATION. THE SIGNATURE OF THE PHYSICIAN, ADVANCED PRACTICE
3 NURSE, OR PHYSICIAN'S ASSISTANT MAY BE PROVIDED BY PHOTOCOPY,
4 FAX, OR ELECTRONIC MEANS. A MEDICAL ORDERS FOR SCOPE OF
5 TREATMENT FORM WITH ANNOTATED VERBAL CONFIRMATION, AND A
6 PHOTOCOPY, FAX, OR OTHER ELECTRONIC REPRODUCTION THEREOF, SHALL
7 BE GIVEN THE SAME FORCE AND EFFECT AS THE ORIGINAL SIGNED BY THE
8 PHYSICIAN, ADVANCED PRACTICE NURSE, OR PHYSICIAN'S ASSISTANT.

9 **15-18.7-105. Medical orders for scope of treatment form - who**
10 **may consent.** (1) AN ADULT WHO HAS DECISIONAL CAPACITY MAY
11 EXECUTE A MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM.

12 (2) EXCEPT AS PROVIDED IN SECTION 15-18.7-108, THE
13 AUTHORIZED SURROGATE DECISION-MAKER FOR AN ADULT WHO LACKS
14 DECISIONAL CAPACITY MAY EXECUTE A MEDICAL ORDERS FOR SCOPE OF
15 TREATMENT FORM FOR SAID ADULT.

16 **15-18.7-106. Medical orders for scope of treatment as**
17 **physician's order - effect of declaration after inpatient admission or**
18 **admission to a long-term care facility.** (1) A MEDICAL ORDERS FOR
19 SCOPE OF TREATMENT FORM THAT IS PROPERLY EXECUTED BY OR FOR AN
20 ADULT PURSUANT TO THE PROVISIONS OF THIS ARTICLE AND SIGNED BY
21 THE ADULT'S PHYSICIAN OR ADVANCED PRACTICE NURSE OR, IF UNDER THE
22 SUPERVISION OR AUTHORITY OF THE ADULT'S PHYSICIAN, A PHYSICIAN'S
23 ASSISTANT SHALL HAVE THE SAME FORCE AND EFFECT AS A PHYSICIAN'S
24 ORDER CONCERNING THE ADULT'S MEDICAL TREATMENT.

25 (2) IF AN ADULT HAS A PROPERLY EXECUTED AND SIGNED MEDICAL
26 ORDERS FOR SCOPE OF TREATMENT FORM, THE FORM SHALL ACCOMPANY
27 THE ADULT UPON ADMISSION TO OR DISCHARGE FROM A HEALTH CARE

1 FACILITY AND SHALL BE HONORED BY THE RECEIVING HEALTH CARE
2 FACILITY AND BY EMERGENCY MEDICAL SERVICE PROFESSIONALS AND
3 HEALTH CARE PROVIDERS AS VALID PHYSICIAN'S ORDERS.

4 (3) A HEALTH CARE PROVIDER SHALL RESPECT AND HONOR THE
5 CONTENTS OF A MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM THAT
6 IS PROPERLY EXECUTED BY OR ON BEHALF OF AN ADULT AND SIGNED BY
7 THE ADULT'S PHYSICIAN OR ADVANCED PRACTICE NURSE OR, IF UNDER THE
8 SUPERVISION OF THE ADULT'S PHYSICIAN, A PHYSICIAN'S ASSISTANT. THE
9 FACT THAT THE SIGNING PHYSICIAN, ADVANCED PRACTICE NURSE, OR
10 PHYSICIAN'S ASSISTANT DOES NOT HAVE ADMITTING PRIVILEGES AT THE
11 HOSPITAL OR HEALTH CARE FACILITY WHERE THE ADULT IS BEING TREATED
12 DOES NOT REMOVE THE OBLIGATION UNDER THIS SUBSECTION (3) TO
13 RESPECT AND HONOR THE MEDICAL ORDERS FOR SCOPE OF TREATMENT
14 FORM.

15 **15-18.7-107. Effect of a medical orders for scope of treatment**
16 **form on life or health insurance.** NEITHER A MEDICAL ORDERS FOR
17 SCOPE OF TREATMENT FORM NOR THE FAILURE OF A PERSON TO EXECUTE
18 A MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM SHALL AFFECT,
19 IMPAIR, OR MODIFY A CONTRACT OF LIFE OR HEALTH INSURANCE OR AN
20 ANNUITY OR BE THE BASIS FOR ANY DELAY IN ISSUING OR REFUSING TO
21 ISSUE AN ANNUITY OR POLICY OF LIFE OR HEALTH INSURANCE OR ANY
22 INCREASE OF A PREMIUM THEREFOR.

23 **15-18.7-108. Effect of article on existing advance medical**
24 **directives.** (1) IN EXECUTING A MEDICAL ORDERS FOR SCOPE OF
25 TREATMENT FORM, THE ADULT, OR THE ADULT'S AUTHORIZED SURROGATE
26 DECISION-MAKER, AND THE PHYSICIAN OR ADVANCED PRACTICE NURSE OR,
27 IF UNDER THE SUPERVISION OF THE ADULT'S PHYSICIAN, A PHYSICIAN'S

1 ASSISTANT SIGNING THE FORM SHALL MAKE A GOOD FAITH EFFORT TO
2 LOCATE AND INCORPORATE, AS APPROPRIATE AND DESIRED, TREATMENT
3 PREFERENCES DOCUMENTED IN THE ADULT'S PREVIOUSLY EXECUTED
4 ADVANCE MEDICAL DIRECTIVES, IF ANY.

5 (2) EXCEPT AS OTHERWISE PROVIDED IN PARAGRAPH (a) OF
6 SUBSECTION (3) OF THIS SECTION, IN CASES OF A CONFLICT BETWEEN A
7 MEDICAL ORDERS FOR SCOPE OF TREATMENT FORM AND AN ADULT'S
8 ADVANCE MEDICAL DIRECTIVES, THE DOCUMENT MOST RECENTLY
9 EXECUTED SHALL TAKE PRECEDENCE FOR THE MEDICAL DECISION OR
10 TREATMENT PREFERENCE AT ISSUE. MEDICAL DECISIONS AND TREATMENT
11 PREFERENCES DOCUMENTED IN AN ADULT'S ADVANCE MEDICAL
12 DIRECTIVES OR ASSERTED BY AN AUTHORIZED SURROGATE
13 DECISION-MAKER ON THE ADULT'S BEHALF, BUT NOT SPECIFICALLY
14 ADDRESSED IN A MORE RECENTLY EXECUTED MEDICAL ORDERS FOR SCOPE
15 OF TREATMENT FORM, SHALL NOT BE AFFECTED BY THE MEDICAL ORDERS
16 FOR SCOPE OF TREATMENT FORM.

17 (3) NOTWITHSTANDING THE PROVISIONS OF SUBSECTION (1) OF
18 THIS SECTION:

19 (a) AN AUTHORIZED SURROGATE DECISION-MAKER OR A
20 PHYSICIAN, ADVANCED PRACTICE NURSE, OR PHYSICIAN'S ASSISTANT MAY
21 NOT REVOKE OR ALTER AN ADULT'S PREVIOUSLY EXECUTED ADVANCE
22 MEDICAL DIRECTIVE REGARDING PROVISION OF ARTIFICIAL NOURISHMENT
23 AND HYDRATION IF THE ADVANCE MEDICAL DIRECTIVE IS DOCUMENTED IN
24 A DECLARATION EXECUTED BY THE ADULT PURSUANT TO THE "COLORADO
25 MEDICAL TREATMENT DECISION ACT", ARTICLE 18 OF THIS TITLE.

26 (b) AN AUTHORIZED SURROGATE DECISION-MAKER MAY NOT
27 REVOKE A PREEXISTING CPR DIRECTIVE UNLESS IT WAS ORIGINALLY

1 EXECUTED BY AN AUTHORIZED SURROGATE DECISION-MAKER.

2 (c) AN AUTHORIZED SURROGATE DECISION-MAKER WHO IS A
3 PROXY DECISION-MAKER PURSUANT TO ARTICLE 18.5 OF THIS TITLE MAY
4 AUTHORIZE THE WITHDRAWAL OF ARTIFICIAL NOURISHMENT AND
5 HYDRATION ONLY IN ACCORDANCE WITH SECTION 15-18.5-103 (6).

6 **SECTION 2. Act subject to petition - effective date.** This act
7 shall take effect at 12:01 a.m. on the day following the expiration of the
8 ninety-day period after final adjournment of the general assembly (August
9 11, 2010, if adjournment sine die is on May 12, 2010); except that, if a
10 referendum petition is filed pursuant to section 1 (3) of article V of the
11 state constitution against this act or an item, section, or part of this act
12 within such period, then the act, item, section, or part shall not take effect
13 unless approved by the people at the general election to be held in
14 November 2010 and shall take effect on the date of the official
15 declaration of the vote thereon by the governor.