RECENT BELGIAN LAW REFORM

Law of 28 May 2002 on Euthanasia, amended by the Law of 13 February 2014 – Consolidated version [changes between brackets and highlighted]

Chapter II: Conditions and procedure

Section 3

§1. The physician who performs euthanasia commits no criminal offence when he/she has assured him/herself that:

- the patient is a legally competent adult, a legally competent emancipated minor, [or a minor with the capacity of discernment] and is conscious at the moment of making the request;
- the request is voluntary, well-considered and repeated, and is not the result of any external pressure;
- the adult or emancipated minor patient is in a medically futile condition of constant and unbearable physical or mental suffering that cannot be alleviated, and that results from a serious and incurable disorder caused by illness or accident;
- [the minor with the capacity of discernment is in a medically futile condition of constant and unbearable physical suffering that cannot be alleviated and that will result in death in the short term, and that results from a serious and incurable disorder caused by illness or accident;]

and when he/she has respected the conditions and procedure as provided in this Act.

§2. Without prejudice to any additional conditions that the physician may wish to attach to his/her intervention, he/she must in advance and in each case:

1) inform the patient about his/her health condition and life expectancy, discuss with the patient his/her request for euthanasia and the possible therapeutic and palliative courses of action and their consequences. Together with the patient, the physician must come the belief that there is no reasonable alternative to the patient’s situation and that the patient’s request is completely voluntary;
2) assure him/herself of the constant physical or mental suffering of the patient and of the durable nature of his/her request. To this end, the physician has several conversations with the patient which, taking into account the progress of the condition of the patient, are spread out over a reasonable period of time;
3) consult another physician about the serious and incurable nature of the disorder and inform him/her about the reasons for this consultation. The consulted physician reviews the medical record, examines the patient and assures him/herself of the patient’s constant and unbearable physical or mental suffering that cannot be alleviated. He/she drafts a report on his/her findings.
   The consulted physician must be independent of the patient as well as of the treating physician and must be competent to give an opinion about the disorder in question. The treating physician informs the patient about the results of this consultation;
4) if there is a nursing team that has regular contact with the patient, discuss the request of the patient with the team or its members;
5) if the patient so desires, discuss the request of the patient with his/her relatives appointed by him/her;
6) assures him/herself that the patient has had the opportunity to discuss his/her request with the persons that he/she wanted to meet;
7) [when the patient is an unemancipated minor, consult, in addition, a child psychiatrist or a psychologist, and inform him about the reasons for this consultation.
   The consulted specialist takes note of the medical record, examines the patient, assures him/herself of the capacity of discernment of the minor and certifies this in writing.
   The treating physician informs the patient and his or her legal representatives of the outcome of this consultation.
   At a meeting with the legal representatives of the minor, the treating physician provides them with all the information specified in §2, 1° in and assures him/herself that they agree with the request of the minor patient.]

[…]

§4. The request of the patient [and, if the patient is a minor, also the agreement of the legal representatives] has to be put in writing. The document is drawn up, dated and signed by the patient himself/herself. If the patient is not capable
of doing this, the document is drawn up by an adult person who is designated by the patient and must not have any material interest in the death of the patient.

This person indicates that the patient is incapable of putting his/her request in writing and indicates the reasons why.

In such case the request is drawn up in the presence of the physician and the said person mentions the name of the physician on the document. This document must be annexed to the medical record.

The patient may revoke his/her request at any time, in which case the document is removed from the medical record and returned to the patient.

[§4/1. After the physician has treated the request of the patient, the persons concerned are offered the possibility of psychological assistance.]

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Unofficial translation courtesy of Kristof Van Assche, Vrije Universiteit Brussel