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**Sub. H. B. No. 354**

**Representatives Terwilleger, Corbin, Garcia, Pringle, Thomas, Vesper,  
Taylor, Brading, Olman, Schuring, Van Vyven, Lewis, Reid, Sawyer, Bender,  
Opfer, Prentiss, Verich, Colonna, Mead, Miller, O'Brien, Ogg, Schuler, Wilson,  
Damschroder, Lawrence, Tavares, Grendell, Perz  
Senators Drake, Kearns, Ray**

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**A B I L L**

To amend sections 1337.12, 2133.01, 2133.02, 2133.03, 1  
2133.07, 2133.10, 2133.12, 2133.13, 2133.14, 2  
2133.15, 3721.17, 4506.07, 4507.06, and 4507.51 3  
and to enact sections 2133.21, 2133.211, and 4  
2133.22 to 2133.26 of the Revised Code and to 5  
amend Section 3 of Am. Sub. S.B. 1 of the 119th 6  
General Assembly relative to "do not resuscitate" 7  
identifications, orders, and protocols and the 8  
award of punitive damages for violation of the 9  
rights of a nursing home resident. 10

**BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:**

**Section 1.** That sections 1337.12, 2133.01, 2133.02, 2133.03, 11  
2133.07, 2133.10, 2133.12, 2133.13, 2133.14, 2133.15, 3721.17, 12  
4506.07, 4507.06, and 4507.51 be amended and sections 2133.21, 13  
2133.211, 2133.22, 2133.23, 2133.24, 2133.25, and 2133.26 of the 14  
Revised Code be enacted to read as follows: 15

**Sec. 1337.12.** (A)(1) An adult who is of sound mind 16

voluntarily may create a valid durable power of attorney for 17  
health care by executing a durable power of attorney, in 18  
accordance with division (B) of section 1337.09 of the Revised 19  
Code, that authorizes an attorney in fact as described in division 20  
(A)(2) of this section to make health care decisions for the 21  
principal at any time that the attending physician of the 22  
principal determines that ~~he~~ the principal has lost the capacity 23  
to make informed health care decisions for ~~himself~~ the principal. 24  
Except as otherwise provided in divisions (B) to (F) of section 25  
1337.13 of the Revised Code, the authorization may include the 26  
right to give informed consent, to refuse to give informed 27  
consent, or to withdraw informed consent, to any health care that 28  
is being or could be provided to the principal. Additionally, to 29  
be valid, a durable power of attorney for health care shall 30  
satisfy both of the following: 31

(a) It shall be signed by the principal and state the date of 32  
its execution. 33

(b) It shall be witnessed in accordance with division (B) of 34  
this section or be acknowledged by the principal in accordance 35  
with division (C) of this section. 36

(2) Except as otherwise provided in this division, a durable 37  
power of attorney for health care may designate any competent 38  
adult as the attorney in fact. The attending physician of the 39  
principal and an administrator of any nursing home in which the 40  
principal is receiving care shall not be designated as an attorney 41  
in fact in, or act as an attorney in fact pursuant to, a durable 42  
power of attorney for health care. An employee or agent of the 43  
attending physician of the principal and an employee or agent of 44  
any health care facility in which the principal is being treated 45  
shall not be designated as an attorney in fact in, or act as an 46  
attorney in fact pursuant to, a durable power of attorney for 47

health care, except that these limitations do not preclude a  
principal from designating either type of employee or agent as ~~his~~  
the principal's attorney in fact if the individual is a competent  
adult and related to the principal by blood, marriage, or  
adoption, or if the individual is a competent adult and the  
principal and the individual are members of the same religious  
order.

(3) A durable power of attorney for health care shall not  
expire, unless the principal specifies an expiration date in the  
instrument. However, when a durable power of attorney contains an  
expiration date, if the principal lacks the capacity to make  
informed health care decisions for ~~himself~~ the principal on the  
expiration date, the instrument shall continue in effect until the  
principal regains the capacity to make informed health care  
decisions for ~~himself~~ the principal.

(B) If witnessed for purposes of division (A)(1)(b) of this  
section, a durable power of attorney for health care shall be  
witnessed by at least two individuals who are adults and who are  
not ineligible to be witnesses under this division. Any person who  
is related to the principal by blood, marriage, or adoption, any  
person who is designated as the attorney in fact in the  
instrument, the attending physician of the principal, and the  
administrator of any nursing home in which the principal is  
receiving care are ineligible to be witnesses.

The witnessing of a durable power of attorney for health care  
shall involve the principal signing, or acknowledging ~~his~~ the  
principal's signature on, the instrument in the presence of each  
witness. Then, each witness shall subscribe ~~his~~ the witness's  
signature on the durable power of attorney for health care and, by  
doing so, attest to ~~his~~ the witness's belief that the principal  
appears to be of sound mind and not under or subject to duress,  
fraud, or undue influence.

(C) If acknowledged for purposes of division (A)(1)(b) of this section, a durable power of attorney for health care shall be acknowledged before a notary public, who shall make the certification described in section 147.53 of the Revised Code and also shall attest that the principal appears to be of sound mind and not under or subject to duress, fraud, or undue influence.

(D)(1) If a principal has both a valid durable power of attorney for health care and a valid declaration, division (B) of section 2133.03 of the Revised Code applies. If a principal has both a valid durable power of attorney for health care and a DNR identification that is based upon a valid declaration and if the declaration supersedes the durable power of attorney for health care under division (B) of SECTION 2133.03 of the Revised Code, the DNR IDENTIFICATION supersedes the durable power of attorney for health care to the extent of any conflict between the two. A valid durable power of attorney for health care supersedes any DNR IDENTIFICATION that is based upon a do-not-resuscitate order that a physician issued for the principal WHICH IS INCONSISTENT WITH THE DURABLE POWER OF ATTORNEY FOR HEALTH CARE OR A VALID DECISION BY THE ATTORNEY IN FACT UNDER A DURABLE POWER OF ATTORNEY.

(2) As used in division (D) of this section:

(a) "Declaration" has the same meaning as in section 2133.01 Of the Revised Code.

(b) "Do-not-resuscitate order" and "DNR identification" have the same meanings as in section 2133.21 Of the Revised Code.

**Sec. 2133.01.** Unless the context otherwise requires, as used in ~~this chapter~~ sections 2133.01 to 2133.15 Of the Revised Code:

(A) "Adult" means an individual who is eighteen years of age or older.

(B) "Attending physician" means the physician to whom a

declarant or other patient, or the family of a declarant or other  
patient, has assigned primary responsibility for the treatment or  
care of the declarant or other patient, or, if the responsibility  
has not been assigned, the physician who has accepted that  
responsibility.

(C) "Comfort care" means any of the following:

(1) Nutrition when administered to diminish the pain or  
discomfort of a declarant or other patient, but not to postpone  
the declarant's or other patient's death;

(2) Hydration when administered to diminish the pain or  
discomfort of a declarant or other patient, but not to postpone  
the declarant's or other patient's death;

(3) Any other medical or nursing procedure, treatment,  
intervention, or other measure that is taken to diminish the pain  
or discomfort of a declarant or other patient, but not to postpone  
the declarant's or other patient's death.

(D) "Consulting physician" means a physician who, in  
conjunction with the attending physician of a declarant or other  
patient, makes one or more determinations that are required to be  
made by the attending physician, or to be made by the attending  
physician and one other physician, by an applicable provision of  
this chapter, to a reasonable degree of medical certainty and in  
accordance with reasonable medical standards.

(E) "Declarant" means any adult who has executed a  
declaration in accordance with section 2133.02 of the Revised  
Code.

(F) "Declaration" means a written document executed in  
accordance with section 2133.02 of the Revised Code.

(G) "Durable power of attorney for health care" means a  
document created pursuant to sections 1337.11 to 1337.17 of the

Revised Code.	140
(H) "Guardian" means a person appointed by a probate court	141
pursuant to Chapter 2111. of the Revised Code to have the care and	142
management of the person of an incompetent.	143
(I) "Health care facility" means any of the following:	144
(1) A hospital;	145
(2) A hospice care program or other institution that	146
specializes in comfort care of patients in a terminal condition or	147
in a permanently unconscious state;	148
(3) A nursing home <u>or residential care facility, as defined</u>	149
<u>in section 3721.01 Of the Revised Code;</u>	150
(4) A home health agency <u>and any residential facility where a</u>	151
<u>person is receiving care under the direction of a home health</u>	152
<u>agency;</u>	153
(5) An intermediate care facility for the mentally retarded.	154
(J) "Health care personnel" means physicians, nurses,	155
physician assistants, emergency medical technicians-basic,	156
emergency medical technicians-intermediate, emergency medical	157
technicians-paramedic, medical technicians, dietitians, other	158
authorized persons acting under the direction of an attending	159
physician, and administrators of health care facilities.	160
(K) "Home health agency" has the same meaning as in section	161
3701.88 of the Revised Code.	162
(L) "Hospice care program" has the same meaning as in section	163
3712.01 of the Revised Code.	164
(M) "Hospital" has the same meanings as in sections 2108.01,	165
3701.01, and 5122.01 of the Revised Code.	166
(N) "Hydration" means fluids that are artificially or	167
technologically administered.	168

(O) "Incompetent" has the same meaning as in section 2111.01	169
of the Revised Code.	170
(P) "Intermediate care facility for the mentally retarded"	171
has the same meaning as in section 5111.20 of the Revised Code.	172
(Q) "Life-sustaining treatment" means any medical procedure,	173
treatment, intervention, or other measure that, when administered	174
to a qualified patient or other patient, will serve principally to	175
prolong the process of dying.	176
(R) "Nurse" means a person who is licensed to practice	177
nursing as a registered nurse or to practice practical nursing as	178
a licensed practical nurse pursuant to Chapter 4723. of the	179
Revised Code.	180
(S) "Nursing home" has the same meaning as in section 3721.01	181
of the Revised Code.	182
(T) "Nutrition" means sustenance that is artificially or	183
technologically administered.	184
(U) "Permanently unconscious state" means a state of	185
permanent unconsciousness in a declarant or other patient that, to	186
a reasonable degree of medical certainty as determined in	187
accordance with reasonable medical standards by the declarant's or	188
other patient's attending physician and one other physician who	189
has examined the declarant or other patient, is characterized by	190
both of the following:	191
(1) Irreversible unawareness of one's being and environment.	192
(2) Total loss of cerebral cortical functioning, resulting in	193
the declarant or other patient having no capacity to experience	194
pain or suffering.	195
(V) "Person" has the same meaning as in section 1.59 of the	196
Revised Code and additionally includes political subdivisions and	197
governmental agencies, boards, commissions, departments,	198

institutions, offices, and other instrumentalities.	199
(W) "Physician" means a person who is authorized under	200
Chapter 4731. of the Revised Code to practice medicine and surgery	201
or osteopathic medicine and surgery.	202
(X) "Political subdivision" and "state" have the same	203
meanings as in section 2744.01 of the Revised Code.	204
(Y) "Professional disciplinary action" means action taken by	205
the board or other entity that regulates the professional conduct	206
of health care personnel, including the state medical board and	207
the board of nursing.	208
(Z) "Qualified patient" means an adult who has executed a	209
declaration and has been determined to be in a terminal condition	210
or in a permanently unconscious state.	211
(AA) "Terminal condition" means an irreversible, incurable,	212
and untreatable condition caused by disease, illness, or injury	213
from which, to a reasonable degree of medical certainty as	214
determined in accordance with reasonable medical standards by a	215
declarant's or other patient's attending physician and one other	216
physician who has examined the declarant or other patient, both of	217
the following apply:	218
(1) There can be no recovery.	219
(2) Death is likely to occur within a relatively short time	220
if life-sustaining treatment is not administered.	221
(BB) "Tort action" means a civil action for damages for	222
injury, death, or loss to person or property, other than a civil	223
action for damages for breach of a contract or another agreement	224
between persons.	225
<b>Sec. 2133.02.</b> (A)(1) An adult who is of sound mind	226
voluntarily may execute at any time a declaration governing the	227



use or continuation, or the withholding or withdrawal, of 228  
life-sustaining treatment. The declaration shall be signed by the 229  
declarant or by another individual at the direction of the 230  
declarant, state the date of its execution, and either be 231  
witnessed as described in division (B)(1) of this section or be 232  
acknowledged by the declarant in accordance with division (B)(2) 233  
of this section. The declaration may include a designation by the 234  
declarant of one or more persons who are to be notified by the 235  
declarant's attending physician at any time that life-sustaining 236  
treatment would be withheld or withdrawn pursuant to the 237  
declaration. The declaration may include a specific authorization 238  
for the use or continuation or the withholding or withdrawal of 239  
CPR, but the failure to include a specific authorization for the 240  
withholding or withdrawal of CPR does not preclude the withholding 241  
or withdrawal of CPR in accordance with sections 2133.01 to 242  
2133.15 or sections 2133.21 to 2133.26 Of the Revised Code. 243

(2) Depending upon whether the declarant intends ~~his~~ THE 244  
declaration to apply when ~~he~~ the declarant is in a terminal 245  
condition, in a permanently unconscious state, or in either a 246  
terminal condition or a permanently unconscious state, ~~his~~ the 247  
declarant's declaration shall use either or both of the terms 248  
"terminal condition" and "permanently unconscious state," and 249  
shall define or otherwise explain those terms in capital letters 250  
and in a manner that is substantially consistent with the 251  
provisions of section 2133.01 of the Revised Code. 252

(3)(a) If a declarant who has authorized the withholding or 253  
withdrawal of life-sustaining treatment intends that ~~his~~ the 254  
declarant's attending physician withhold or withdraw nutrition or 255  
hydration when ~~he~~ the declarant is in a permanently unconscious 256  
state and when the nutrition and hydration will not or no longer 257  
will serve to provide comfort to ~~him~~ the declarant or alleviate 258  
~~his~~ the declarant's pain, then the declarant shall authorize ~~his~~ 259

the declarant's attending physician to withhold or withdraw 260  
nutrition or hydration when ~~he~~ the declarant is in the permanently 261  
unconscious state by doing both of the following in the 262  
declaration: 263

(i) Including a statement in capital letters that ~~his~~ the 264  
declarant's attending physician may withhold or withdraw nutrition 265  
and hydration if ~~he~~ the declarant is in a permanently unconscious 266  
state and if ~~his~~ the declarant's attending physician and at least 267  
one other physician who has examined ~~him~~ the declarant determine, 268  
to a reasonable degree of medical certainty and in accordance with 269  
reasonable medical standards, that nutrition or hydration will not 270  
or no longer will serve to provide comfort to ~~him~~ the declarant or 271  
alleviate ~~his~~ the declarant's pain, or checking or otherwise 272  
marking a box or line that is adjacent to a similar statement on a 273  
printed form of a declaration; 274

(ii) Placing ~~his~~ the declarant's initials or signature 275  
underneath or adjacent to the statement, check, or other mark 276  
described in division (A)(3)(a)(i) of this section. 277

(b) Division (A)(3)(a) of this section does not apply, ~~and~~ 278  
~~shall not be construed as applying,~~ to the extent that a 279  
declaration authorizes the withholding or withdrawal of 280  
life-sustaining treatment when a declarant is in a terminal 281  
condition. The provisions of division (E) of section 2133.12 of 282  
the Revised Code pertaining to comfort care shall apply to a 283  
declarant in a terminal condition. 284

(B)(1) If witnessed for purposes of division (A) of this 285  
section, a declaration shall be witnessed by two individuals as 286  
described in this division in whose presence the declarant, or 287  
another individual at the direction of the declarant, signed the 288  
declaration. The witnesses to a declaration shall be adults who 289  
are not related to the declarant by blood, marriage, or adoption, 290  
who are not the attending physician of the declarant, and who are 291

not the administrator of any nursing home in which the declarant  
is receiving care. Each witness shall subscribe ~~his~~ the witness'  
signature on the declaration and, by doing so, attest to ~~his~~ the  
witness' belief that the declarant appears to be of sound mind and  
not under or subject to duress, fraud, or undue influence.

(2) If acknowledged for purposes of division (A) of this  
section, a declaration shall be acknowledged before a notary  
public, who shall make the certification described in section  
147.53 of the Revised Code and also shall attest that the  
declarant appears to be of sound mind and not under or subject to  
duress, fraud, or undue influence.

(C) An attending physician, or other health care personnel  
acting under the direction of an attending physician, who is  
furnished a copy of a declaration shall make it a part of the  
declarant's medical record and, when section 2133.05 of the  
Revised Code is applicable, also shall comply with that section.

(D)(1) Subject to division (D)(2) of this section, an  
attending physician of a declarant or a health care facility in  
which a declarant is confined may refuse to comply or allow  
compliance with the declarant's declaration on the basis of a  
matter of conscience or on another basis. An employee or agent of  
an attending physician of a declarant or of a health care facility  
in which a declarant is confined may refuse to comply with the  
declarant's declaration on the basis of a matter of conscience.

(2) If an attending physician of a declarant or a health care  
facility in which a declarant is confined is not willing or not  
able to comply or allow compliance with the declarant's  
declaration, the physician or facility promptly shall so advise  
the declarant and comply with the provisions of section 2133.10 of  
the Revised Code, or, if the declaration has become operative as  
described in division (A) of section 2133.03 of the Revised Code,

shall comply with the provisions of section 2133.10 of the Revised  
Code.

(E) As used in this section, "CPR" has the same meaning as in  
section 2133.21 Of the Revised Code.

**Sec. 2133.03.** (A)(1) A declaration becomes operative when it  
is communicated to the attending physician of the declarant, the  
attending physician and one other physician who examines the  
declarant determine that the declarant is in a terminal condition  
or in a permanently unconscious state, whichever is addressed in  
the declaration, the applicable requirements of divisions (A)(2)  
and (3) of this section are satisfied, and the attending physician  
determines that the declarant no longer is able to make informed  
decisions regarding the administration of life-sustaining  
treatment. When the declaration becomes operative, the attending  
physician and health care facilities shall act in accordance with  
its provisions or comply with the provisions of section 2133.10 of  
the Revised Code.

(2) In order for a declaration to become operative in  
connection with a declarant who is in a permanently unconscious  
state, the consulting physician associated with the determination  
that the declarant is in the permanently unconscious state shall  
be a physician who, by virtue of advanced education or training,  
of a practice limited to particular diseases, illnesses, injuries,  
therapies, or branches of medicine or surgery or osteopathic  
medicine and surgery, of certification as a specialist in a  
particular branch of medicine or surgery or osteopathic medicine  
and surgery, or of experience acquired in the practice of medicine  
or surgery or osteopathic medicine and surgery, is qualified to  
determine whether the declarant is in a permanently unconscious  
state.

(3) In order for a declaration to become operative in

connection with a declarant who is in a terminal condition or in a  
permanently unconscious state, the attending physician of the  
declarant shall determine, in good faith, to a reasonable degree  
of medical certainty, and in accordance with reasonable medical  
standards, that there is no reasonable possibility that the  
declarant will regain the capacity to make informed decisions  
regarding the administration of life-sustaining treatment.

(B)(1)(a) A declaration supersedes any general consent to  
treatment form signed by or on behalf of the declarant prior to,  
upon, or after ~~his~~ the declarant's admission to a health care  
facility to the extent there is a conflict between the declaration  
and the form, even if the form is signed after the execution of  
the declaration. To the extent that the provisions of a  
declaration and a general consent to treatment form do not  
conflict, both documents shall govern the use or continuation, or  
the withholding or withdrawal, of life-sustaining treatment and  
other medical or nursing procedures, treatments, interventions, or  
other measures in connection with the declarant. ~~This division~~  
division (B)(1)(a) of this section does not apply if a declaration  
is revoked pursuant to section 2133.04 of the Revised Code after  
the signing of a general consent to treatment form.

(b) A declaration supersedes a DNR identification, as defined  
in section 2133.21 Of the Revised Code, of the declarant that is  
based upon a prior, inconsistent declaration of the declarant or  
that is based upon a do-not-resuscitate order, as defined in  
section 2133.21 Of the Revised Code, that a physician has issued  
for the declarant and that is inconsistent with the declaration.

(2) If a declarant has both a valid durable power of attorney  
for health care and a valid declaration, the declaration  
supersedes the durable power of attorney for health care to the  
extent that the provisions of the documents would conflict if the

declarant should be in a terminal condition or in a permanently  
unconscious state. ~~This division~~ Division (B)(2) of this section  
does not apply if the declarant revokes ~~his~~ the declaration  
pursuant to section 2133.04 of the Revised Code.

**Sec. 2133.07.** A printed form of a declaration may be sold or  
otherwise distributed in this state for use by adults who are not  
advised by an attorney. By use of ~~such~~ a printed form of that  
nature, a declarant may authorize the use or continuation, or the  
withholding or withdrawal, of life-sustaining treatment should ~~he~~  
the declarant be in a terminal condition, a permanently  
unconscious state, or either a terminal condition or a permanently  
unconscious state, may authorize the withholding or withdrawal of  
nutrition or hydration should ~~he~~ the declarant be in a permanently  
unconscious state as described in division (A)(3)(a) of section  
2133.02 of the Revised Code, and may designate one or more persons  
who are to be notified by ~~his~~ the declarant's attending physician  
at any time that life-sustaining treatment would be withheld or  
withdrawn pursuant to the declaration. The printed form shall not  
be used as an instrument for granting any other type of authority  
or for making any other type of designation, except that the  
printed form may be used as a DNR identification if the declarant  
specifies on the form that the declarant wishes to use it as a DNR  
identification.

As used in this section, "DNR identification" has the same  
meaning as in section 2133.21 Of the Revised Code.

**Sec. 2133.10.** (A) An attending physician who, or a health  
care facility in which a qualified patient or other patient is  
confined that, is not willing or IS not able to comply or allow  
compliance with a declaration of a qualified patient, with a  
consent given in accordance with section 2133.08 or 2133.09 of the

Revised Code, with any probate court order issued pursuant to 416  
section 2133.05, 2133.08, or 2133.09 of the Revised Code, or with 417  
any other applicable provision of ~~this chapter~~ sections 2133.01 to 418  
2133.15 Of the Revised Code shall not prevent or attempt to 419  
prevent, or unreasonably delay or attempt to unreasonably delay, 420  
the transfer of the qualified patient or other patient to the care 421  
of a physician who, or a health care facility that, is willing and 422  
able to so comply or allow compliance. 423

(B) If a declaration provides for the use or continuation of 424  
life-sustaining treatment should its declarant subsequently be in 425  
a terminal condition or in a permanently unconscious state, if a 426  
consent decision of a priority individual or class of individuals 427  
under section 2133.08 of the Revised Code is to use or continue 428  
life-sustaining treatment in connection with a patient described 429  
in that section, or if a probate court issues a reevaluation order 430  
pursuant to section 2133.05 or 2133.08 of the Revised Code that is 431  
intended to result in the use or continuation of life-sustaining 432  
treatment in connection with a qualified patient or other patient, 433  
then the attending physician of the qualified patient or other 434  
patient who, or health care facility in which the qualified 435  
patient or other patient is confined that, is not willing or is 436  
not able to comply or allow compliance with the declaration, 437  
consent decision, or reevaluation order shall use or continue the 438  
life-sustaining treatment or cause it to be used or continued 439  
until a transfer as described in division (A) of this section is 440  
made. 441

**Sec. 2133.12.** (A) The death of a qualified patient or other 442  
patient resulting from the withholding or withdrawal of 443  
life-sustaining treatment in accordance with ~~this chapter~~ sections 444  
2133.01 to 2133.15 Of the Revised Code does not constitute for any 445  
purpose a suicide, aggravated murder, murder, or any other 446

homicide offense ~~for any purpose.~~ 447

(B)(1) The execution of a declaration shall not do either of 448  
the following: 449

(a) Affect the sale, procurement, issuance, or renewal of any 450  
policy of life insurance or annuity, notwithstanding any term of a 451  
policy or annuity to the contrary; 452

(b) Be deemed to modify or invalidate the terms of any policy 453  
of life insurance or annuity that is in effect on October 10, 454  
1991. 455

(2) Notwithstanding any term of a policy of life insurance or 456  
annuity to the contrary, the withholding or withdrawal of 457  
life-sustaining treatment from an insured, qualified patient or 458  
other patient in accordance with ~~this chapter~~ sections 2133.01 to 459  
2133.15 Of the Revised Code shall not impair or invalidate any 460  
policy of life insurance or annuity. 461

(3) Notwithstanding any term of a policy or plan to the 462  
contrary, the use or continuation, or the withholding or 463  
withdrawal, of life-sustaining treatment from an insured, 464  
qualified patient or other patient in accordance with ~~this chapter~~ 465  
sections 2133.01 to 2133.15 Of the Revised Code shall not impair 466  
or invalidate any policy of health insurance or any health care 467  
benefit plan. 468

(4) No physician, health care facility, other health care 469  
provider, person authorized to engage in the business of insurance 470  
in this state under Title XXXIX of the Revised Code, health 471  
insuring corporation, other health care plan, legal entity that is 472  
self-insured and provides benefits to its employees or members, or 473  
other person shall require any individual to execute or refrain 474  
from executing a declaration, or shall require an individual to 475  
revoke or refrain from revoking a declaration, as a condition of 476



being insured or of receiving health care benefits or services. 477

(C)(1) ~~This chapter does~~ Sections 2133.01 to 2133.15 Of the 478  
Revised Code do not create any presumption concerning the 479  
intention of an individual who has revoked or has not executed a 480  
declaration with respect to the use or continuation, or the 481  
withholding or withdrawal, of life-sustaining treatment if the 482  
individual should be in a terminal condition or in a permanently 483  
unconscious state at any time. 484

(2) ~~This chapter does~~ Sections 2133.01 to 2133.15 Of the 485  
Revised Code do not affect the right of a qualified patient or 486  
other patient to make informed decisions regarding the use or 487  
continuation, or the withholding or withdrawal, of life-sustaining 488  
treatment as long as the qualified patient or other patient is 489  
able to make those decisions. 490

(3) ~~This chapter does~~ Sections 2133.01 to 2133.15 Of the 491  
Revised Code do not require a physician, other health care 492  
personnel, or a health care facility to take action that is 493  
contrary to reasonable medical standards. 494

(4) ~~This chapter~~ Sections 2133.01 to 2133.15 Of the Revised 495  
Code and, if applicable, a declaration do not affect or limit the 496  
authority of a physician or a health care facility to provide or 497  
not to provide life-sustaining treatment to a person in accordance 498  
with reasonable medical standards applicable in an emergency 499  
situation. 500

(D) Nothing in ~~this chapter~~ sections 2133.01 to 2133.15 Of 501  
the Revised Code condones, authorizes, or approves of mercy 502  
killing, assisted suicide, or euthanasia. 503

(E)(1) ~~This chapter does~~ Sections 2133.01 to 2133.15 Of the 504  
Revised Code do not affect the responsibility of the attending 505  
physician of a qualified patient or other patient, or other health 506  
care personnel acting under the direction of the patient's 507

attending physician, to provide comfort care to the patient. 508

Nothing in ~~this chapter~~ sections 2133.01 to 2133.15 Of the Revised 509  
Code precludes the attending physician of a qualified patient or 510  
other patient who carries out the responsibility to provide 511  
comfort care to the patient in good faith and while acting within 512  
the scope of the attending physician's authority from prescribing, 513  
dispensing, administering, or causing to be administered any 514  
particular medical procedure, treatment, intervention, or other 515  
measure to the patient, including, but not limited to, 516  
prescribing, dispensing, administering, or causing to be 517  
administered by judicious titration or in another manner any form 518  
of medication, for the purpose of diminishing the qualified 519  
patient's or other patient's pain or discomfort and not for the 520  
purpose of postponing or causing the qualified patient's or other 521  
patient's death, even though the medical procedure, treatment, 522  
intervention, or other measure may appear to hasten or increase 523  
the risk of the patient's death. Nothing in ~~this chapter~~ sections 524  
2133.01 to 2133.15 Of the Revised Code precludes health care 525  
personnel acting under the direction of the patient's attending 526  
physician who carry out the responsibility to provide comfort care 527  
to the patient in good faith and while acting within the scope of 528  
their authority from dispensing, administering, or causing to be 529  
administered any particular medical procedure, treatment, 530  
intervention, or other measure to the patient, including, but not 531  
limited to, dispensing, administering, or causing to be 532  
administered by judicious titration or in another manner any form 533  
of medication, for the purpose of diminishing the qualified 534  
patient's or other patient's pain or discomfort and not for the 535  
purpose of postponing or causing the qualified patient's or other 536  
patient's death, even though the medical procedure, treatment, 537  
intervention, or other measure may appear to hasten or increase 538  
the risk of the patient's death. 539

(2)(a) If, at any time, a person described in division 540

(A)(2)(a)(i) of section 2133.05 of the Revised Code or the individual or a majority of the individuals in either of the first two classes of individuals that pertain to a declarant in the descending order of priority set forth in division (A)(2)(a)(ii) of section 2133.05 of the Revised Code believes in good faith that both of the following circumstances apply, the person or the individual or majority of individuals in either of the first two classes of individuals may commence an action in the probate court of the county in which a declarant who is in a terminal condition or permanently unconscious state is located for the issuance of an order mandating the use or continuation of comfort care in connection with the declarant in a manner that is consistent with division (E)(1) of this section:

(i) Comfort care is not being used or continued in connection with the declarant.

(ii) The withholding or withdrawal of the comfort care is contrary to division (E)(1) of this section.

(b) If a declarant did not designate in the declarant's declaration a person as described in division (A)(2)(a)(i) of section 2133.05 of the Revised Code and if, at any time, a priority individual or any member of a priority class of individuals under division (A)(2)(a)(ii) of section 2133.05 of the Revised Code or, at any time, the individual or a majority of the individuals in the next class of individuals that pertains to the declarant in the descending order of priority set forth in that division believes in good faith that both of the following circumstances apply, the priority individual, the member of the priority class of individuals, or the individual or majority of individuals in the next class of individuals that pertains to the declarant may commence an action in the probate court of the county in which a declarant who is in a terminal condition or permanently unconscious state is located for the issuance of an

order mandating the use or continuation of comfort care in 573  
connection with the declarant in a manner that is consistent with 574  
division (E)(1) of this section: 575

(i) Comfort care is not being used or continued in connection 576  
with the declarant. 577

(ii) The withholding or withdrawal of the comfort care is 578  
contrary to division (E)(1) of this section. 579

(c) If, at any time, a priority individual or any member of a 580  
priority class of individuals under division (B) of section 581  
2133.08 of the Revised Code or, at any time, the individual or a 582  
majority of the individuals in the next class of individuals that 583  
pertains to the patient in the descending order of priority set 584  
forth in that division believes in good faith that both of the 585  
following circumstances apply, the priority individual, the member 586  
of the priority class of individuals, or the individual or 587  
majority of individuals in the next class of individuals that 588  
pertains to the patient may commence an action in the probate 589  
court of the county in which a patient as described in division 590  
(A) of section 2133.08 of the Revised Code is located for the 591  
issuance of an order mandating the use or continuation of comfort 592  
care in connection with the patient in a manner that is consistent 593  
with division (E)(1) of this section: 594

(i) Comfort care is not being used or continued in connection 595  
with the patient. 596

(ii) The withholding or withdrawal of the comfort care is 597  
contrary to division (E)(1) of this section. 598

**Sec. 2133.13.** In the absence of actual knowledge to the 599  
contrary and if acting in good faith, an attending or consulting 600  
physician, other health care personnel, and health care facilities 601  
may assume that a declaration complies with ~~this chapter~~ sections 602

2133.01 to 2133.15 Of the Revised Code and is valid.

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**Sec. 2133.14.** A declaration executed under the law of another state in compliance with that law or in substantial compliance with ~~this chapter~~ sections 2133.01 to 2133.15 Of the Revised Code shall be considered to be valid for purposes of ~~this chapter~~ sections 2133.01 to 2133.15 Of the Revised Code.

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**Sec. 2133.15.** (A) ~~This chapter shall~~ Sections 2133.01 to 2133.15 Of the Revised Code apply to any written document that was executed anywhere prior to ~~the effective date of this section~~ OCTOBER 10, 1991, that voluntarily was so executed by an adult who was of sound mind, that was signed by the adult or by another individual at the direction of the adult, that was or was not witnessed or acknowledged before a notary public as described in division (B) of section 2133.02 of the Revised Code, and that specifies the adult's intention with respect to the use or continuation, or the withholding or withdrawal, of life-sustaining treatment if ~~he~~ the adult is at any time in a terminal condition, in a permanently unconscious state, or in either a terminal condition or a permanently unconscious state, if ~~he~~ the adult is at that time no longer able to make informed decisions regarding the administration of life-sustaining treatment, and if at that time there is no reasonable possibility that ~~he~~ the adult will regain the capacity to make those informed decisions. The document shall be considered to be a declaration, shall be given effect as if it had been executed on or after ~~the effective date of this section~~ OCTOBER 10, 1991, in accordance with ~~this chapter~~ sections 2133.01 to 2133.15 Of the Revised Code, and, except as otherwise provided in division (B) of this section, shall be subject to all provisions of ~~this chapter~~ sections 2133.01 to 2133.15 Of the Revised Code pertaining to declarations.

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(B)(1) If a declaration as described in division (A) of this 633  
section does not state that, or does not contain a checked or 634  
marked box or line adjacent to a statement indicating that, the 635  
declarant authorizes ~~his~~ the declarant's attending physician to 636  
withhold or withdraw nutrition or hydration when ~~he~~ the declarant 637  
is in a permanently unconscious state and when ~~his~~ the declarant's 638  
attending physician and at least one other physician who has 639  
examined ~~him~~ the declarant determine, to a reasonable degree of 640  
medical certainty and in accordance with reasonable medical 641  
standards, that nutrition or hydration will not or no longer will 642  
serve to provide comfort to ~~him~~ the declarant or alleviate ~~his~~ the 643  
declarant's pain, then, if the declaration becomes operative under 644  
section 2133.03 of the Revised Code because the declarant is in a 645  
permanently unconscious state, the attending physician of the 646  
declarant shall apply to the probate court of the county in which 647  
the declarant is located for the issuance of an order whether or 648  
not the attending physician is required to provide the declarant 649  
with nutrition and hydration for as long as the declarant is in 650  
the permanently unconscious state. Upon the filing of the 651  
application, the clerk of the probate court shall schedule a 652  
hearing on it and cause a copy of it and a notice of the hearing 653  
to be served in accordance with the Rules of Civil Procedure upon 654  
the attending physician and the individuals described in divisions 655  
(B)(1) to (5) of section 2133.08 of the Revised Code, which 656  
service shall be made, if possible, within three days after the 657  
filing of the application. The hearing shall be conducted at the 658  
earliest possible time, but no sooner than the thirtieth business 659  
day, and no later than the sixtieth business day, after ~~such~~ that 660  
service has been completed. 661

(2) At the hearing, the attending physician and any 662  
individual described in divisions (B)(1) to (5) of section 2133.08 663  
of the Revised Code shall be permitted to testify and present 664

evidence relative to the use or continuation, or the withholding  
or withdrawal, of nutrition and hydration for as long as the  
declarant is in the permanently unconscious state. Immediately  
following the hearing, the court shall enter on its journal its  
determination, based on the evidence presented by all of the  
parties at the hearing on the application and subject to division  
(B)(3) of this section, whether or not the attending physician is  
required to provide the declarant with nutrition and hydration for  
as long as ~~he~~ the declarant is in the permanently unconscious  
state.

(3) The court shall issue an order that authorizes the  
declarant's attending physician to commence the withholding or  
withdrawal of nutrition and hydration in connection with the  
~~declarant~~ DECLARANT only if the applicant establishes, by clear and  
convincing evidence, that the order would be consistent with one  
of the following:

(a) The declarant's previously expressed intention with  
respect to the use or continuation, or the withholding or  
withdrawal, of nutrition and hydration should ~~he~~ the declarant  
subsequently be in a permanently unconscious state and no longer  
able to make informed decisions regarding the administration of  
nutrition and hydration;

(b) In the absence of ~~such~~ a previously expressed intention  
of that nature, the type of informed consent decision that the  
declarant would have made if ~~he~~ the declarant had expressed ~~his~~  
the declarant's intention with respect to the use or continuation,  
or the withholding or withdrawal, of nutrition and hydration  
should ~~he~~ the declarant subsequently be in a permanently  
unconscious state and no longer able to make informed decisions  
regarding the administration of nutrition and hydration, as  
inferred from the lifestyle and character of the declarant, and  
from any other evidence of the declarant's desires, prior to ~~his~~

the declarant becoming no longer able to make informed decisions 697  
regarding the administration of nutrition and hydration. The Rules 698  
of Evidence shall not be binding for purposes of this division. 699

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(4) Notwithstanding any contrary provision of the Revised 701  
Code or of the Rules of Civil Procedure, the state and persons 702  
other than individuals described in divisions (B)(1) to (5) of 703  
section 2133.08 of the Revised Code and other than the attending 704  
physician of the declarant are prohibited from filing an 705  
application under ~~this~~ division (B) of this section and from 706  
joining or being joined as parties to a hearing conducted under 707  
~~this~~ division (B) of this section, including joining by way of 708  
intervention. 709

Sec. 2133.21. As used in SECTIONS 2133.21 to 2133.26 of the 710  
Revised Code, unless the context clearly requires otherwise: 711

(A) "Attending physician" means the physician to whom a 712  
person, or the family of a person, has assigned primary 713  
responsibility for the treatment or care of the person or, if the 714  
person or the person's family has not assigned that 715  
responsibility, the physician who has accepted that 716  
responsibility. 717

(B) "Declaration," "health care facility," "life-sustaining 718  
treatment," "physician," "professional disciplinary action," and 719  
"tort action" have the same meanings as in section 2133.01 Of the 720  
Revised Code. 721

(C) "DNR identification" means a standardized identification 722  
card, form, necklace, or bracelet that is of uniform size and 723  
design, that has been approved by the department of health 724  
pursuant to section 2133.25 of the Revised Code, and that 725  
signifies either of the following: 726

(1) That the person who is named on and possesses the card, 727



form, necklace, or bracelet has executed a declaration that 728  
authorizes the withholding or withdrawal of CPR and that has not 729  
been revoked pursuant to section 2133.04 of the Revised Code; 730

(2) That the attending physician of the person who is named 731  
on and possesses the card, form, necklace, or bracelet has issued 732  
a current do-not-resuscitate order, in accordance with the 733  
do-not-resuscitate protocol adopted by the department of health 734  
pursuant to section 2133.25 Of the Revised Code, for that person 735  
and has documented the grounds for the order in that person's 736  
medical record. 737

(D) "Do-not-resuscitate order" means a directive issued by a 738  
physician that identifies a person and specifies that CPR should 739  
not be administered to the person so identified. 740

(E) "Do-not-resuscitate protocol" means the standardized 741  
method of procedure for the withholding of CPR by PHYSICIANS, 742  
emergency medical service personnel, and health care facilities 743  
that is adopted in the rules of the department of health pursuant 744  
to section 2133.25 of the Revised Code. 745

(F) "Emergency medical services personnel" means paid or 746  
volunteer firefighters, law enforcement officers, first 747  
responders, emergency medical technicians-basic, emergency medical 748  
technicians-intermediate, emergency medical technicians-paramedic, 749  
medical TECHNICIANS, or other emergency services personnel acting 750  
within the ordinary course of their profession. 751

(G) "CPR" means cardiopulmonary resuscitation or a component 752  
of cardiopulmonary resuscitation, but it does not include clearing 753  
a person's airway for a purpose other than as a component of CPR. 754

Sec. 2133.211. A PERSON WHO HOLDS A CERTIFICATE OF AUTHORITY 755  
TO PRACTICE AS A CERTIFIED NURSE PRACTITIONER OR CLINICAL NURSE 756  
SPECIALIST ISSUED UNDER section 4723.42 OF THE REVISED CODE MAY 757  
TAKE ANY ACTION THAT MAY BE TAKEN BY AN ATTENDING PHYSICIAN UNDER 758

SECTIONS 2133.21 TO 2133.26 OF THE REVISED CODE AND HAS THE 759  
IMMUNITY PROVIDED BY SECTION 2133.22 OF THE REVISED CODE IF THE 760  
ACTION IS TAKEN PURSUANT TO A STANDARD CARE ARRANGEMENT WITH A 761  
COLLABORATING PHYSICIAN. 762

Sec. 2133.22. (A)(1) None of the following are subject to 763  
criminal PROSECUTION, to liability in damages in a tort or other 764  
civil action for injury, death, or loss to person or property, or 765  
to professional disciplinary ACTION arising out of or relating to 766  
the withholding or withdrawal of CPR from a person after DNR 767  
identification is discovered in the person's possession AND 768  
REASONABLE EFFORTS HAVE BEEN MADE TO DETERMINE THAT THE PERSON IN 769  
POSSESSION OF THE DNR IDENTIFICATION IS THE PERSON NAMED ON THE 770  
DNR IDENTIFICATION: 771

(a) A physician who causes the withholding or withdrawal of 772  
CPR from the person possessing the DNR identification; 773

(b) A person who participates under the direction of or with 774  
the authorization of a physician in the withholding or withdrawal 775  
of CPR from the person possessing the DNR identification; 776

(c) Any emergency medical services personnel who cause or 777  
participate in the withholding or withdrawal of CPR from the 778  
person possessing the DNR identification. 779

(2) None of the following are subject to criminal 780  
PROSECUTION, to liability in damages in a tort or other civil 781  
action for injury, death, or loss to person or property, or to 782  
professional disciplinary action arising out of or relating to the 783  
withholding or withdrawal of CPR from a person in a health care 784  
facility after DNR identification is discovered in the person's 785  
possession AND REASONABLE EFFORTS HAVE BEEN MADE TO DETERMINE THAT 786  
THE PERSON IN POSSESSION OF THE DNR IDENTIFICATION IS THE PERSON 787  
NAMED ON THE DNR IDENTIFICATION or a do-not-resuscitate order is 788  
issued for the person: 789

(a) The health care facility or the administrator of the 790  
health care facility; 791

(b) A PHYSICIAN who causes the withholding or withdrawal of 792  
cpr from the person possessing the dnr identification or for whom 793  
the do-not-resuscitate order has been issued; 794

(c) Any person who works for the health care facility as an 795  
employee, contractor, or volunteer and who participates under the 796  
direction of or with the authorization of a physician in the 797  
withholding or withdrawal of cpr from the person possessing the 798  
dnr identification; 799

(d) Any person who works for the health care facility as an 800  
employee, contractor, or volunteer and who participates under the 801  
direction of or with the authorization of a physician in the 802  
withholding or withdrawal of cpr from the person for whom the 803  
do-not-resuscitate order has been issued. 804

(3) If, after DNR identification is discovered in the 805  
possession of a person, the person makes an oral or written 806  
request to receive CPR, any person who provides CPR pursuant to 807  
the request, any health care facility in which CPR is provided, 808  
and the administrator of any health care facility in which CPR is 809  
provided are not subject to criminal prosecution as a result of 810  
the provision of the CPR, are not liable in damages in a tort or 811  
other civil action for injury, death, or loss to person or 812  
property that arises out of or is related to the provision of the 813  
CPR, and are not subject to professional disciplinary action as a 814  
result of the provision of the CPR. 815

(B) Divisions (A)(1), (A)(2), and (C) of this section do not 816  
apply when CPR is withheld or withdrawn from a person who 817  
possesses DNR identification or for whom a do-not-resuscitate 818  
order has been issued unless the WITHHOLDING or withdrawal is in 819  
ACCORDANCE with the do-not-resuscitate protocol. 820

(C) Any emergency medical services personnel who comply with 821  
a do-not-resuscitate order issued by a physician and any 822  
individuals who work for a health care facility as employees, 823  
contractors, or volunteers and who comply with a 824  
do-not-resuscitate order issued by a physician are not subject to 825  
liability in damages in a civil action for injury, death, or loss 826  
to person or property that arises out of or is related to 827  
compliance with the order, are not subject to criminal prosecution 828  
as a result of compliance with the order, and are not subject to 829  
professional disciplinary action as a result of compliance with 830  
the order. 831

In an emergency situation, emergency medical services 832  
personnel and emergency department personnel are not required to 833  
search a person to determine if the person possesses DNR 834  
identification. If a person possesses DNR identification, if 835  
emergency medical services personnel or emergency department 836  
personnel provide CPR to the person in an emergency situation, and 837  
if, at that time, the personnel do not know and do not have 838  
reasonable cause to believe that the person possesses DNR 839  
identification, the emergency medical services personnel and 840  
emergency department personnel are not subject to criminal 841  
prosecution as a result of the provision of the CPR, are not 842  
liable in damages in a tort or other civil action for injury, 843  
death, or loss to person or property that arises out of or is 844  
related to the provision of the CPR, and are not subject to 845  
professional disciplinary action as a result of the provision of 846  
the CPR. 847

(D) NOTHING IN SECTIONS 2133.21 TO 2133.26 OF THE REVISED 848  
CODE OR THE DO-NOT-RESUSCITATE PROTOCOL GRANTS IMMUNITY TO A 849  
PHYSICIAN FOR ISSUING A DO-NOT-RESUSCITATE ORDER THAT IS CONTRARY 850  
TO REASONABLE MEDICAL STANDARDS OR THAT THE PHYSICIAN KNOWS OR HAS 851  
REASON TO KNOW IS CONTRARY TO THE WISHES OF THE PATIENT OR OF A 852

PERSON WHO IS LAWFULLY AUTHORIZED TO MAKE INFORMED MEDICAL  
DECISIONS ON THE PATIENT'S BEHALF.

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Sec. 2133.23. (A) If emergency medical services personnel,  
other than physicians, are presented with DNR IDENTIFICATION  
possessed by a person or are presented with a written  
do-not-resuscitate order for a person or if a physician directly  
issues to emergency medical services personnel, other than  
physicians, an oral do-not-resuscitate order for a person, the  
emergency medical services personnel shall comply with the  
do-not-resuscitate protocol for the person. If an oral  
do-not-resuscitate order is issued by a physician who is not  
present at the scene, the emergency medical services personnel  
shall verify the physician's identity.

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(B) If a person possesses DNR identification and if the  
person's attending physician or the health care facility in which  
the person is located is unwilling or unable to comply with the  
do-not-resuscitate protocol for the person, the attending  
physician or the health care facility shall not prevent or attempt  
to prevent, or unreasonably delay or attempt to delay, the  
transfer of the person to a different physician who will follow  
THE protocol or to a different health care facility in which the  
protocol will be followed.

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(C) If a person who possesses dnr identification or for whom  
a current do-not-RESUSCITATE order has been issued is being  
transferred from one health care facility to another, before or at  
the time of the transfer, the transferring health care facility  
shall notify the receiving health care facility and the persons  
transporting the person of the existence of the DNR identification  
or the order. If a current do-not-resuscitate order was issued  
orally, it shall be reduced to writing before the time of the  
transfer. The DNR identification or the order shall accompany the  
person to the receiving health care facility and shall remain in

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effect unless it is revoked or unless, in the case of a 885  
do-not-resuscitate order, the order no longer is current. 886

Sec. 2133.24. (A) The death of a person resulting from the 887  
withholding or withdrawal of CPR for the person pursuant to the 888  
do-not-resuscitate protocol and in the circumstances described in 889  
section 2133.22 Of the Revised Code or in accordance with division 890  
(A) of section 2133.23 Of the Revised Code does not constitute for 891  
any purpose a suicide, aggravated murder, murder, or any other 892  
homicide. 893

(B)(1) If a person possesses DNR IDENTIFICATION or if a 894  
current do-not-resuscitate order has been issued for a person, the 895  
possession or order shall not do either of the following: 896

(a) Affect in any manner the sale, procurement, issuance, or 897  
renewal of a policy of life insurance or annuity, notwithstanding 898  
any term of a policy or annuity to the contrary; 899

(b) Be deemed to modify in any manner or invalidate the terms 900  
of any policy of life insurance or annuity that is in effect on 901  
the effective date of this section. 902

(2) Notwithstanding any term of a policy of life insurance or 903  
annuity to the contrary, the withholding or withdrawal of CPR from 904  
a person who is insured or covered under the policy or annuity and 905  
who possesses DNR identification or for whom a current 906  
do-not-resuscitate order has been issued, in accordance with 907  
sections 2133.21 to 2133.26 of the Revised Code, shall not impair 908  
or invalidate any policy of life insurance or annuity. 909

(3) Notwithstanding any term of a policy or plan to the 910  
contrary, neither of the following shall impair or invalidate any 911  
policy of health insurance or other health care benefit plan: 912

(a) The withholding or withdrawal in accordance with sections 913  
2133.21 to 2133.26 Of the Revised Code of CPR from a person who is 914  
insured or covered under the policy or plan and who possesses DNR 915

identification or for whom a current do-not-resuscitate order has 916  
been issued; 917

(b) The provision in accordance with sections 2133.21 to 918  
2133.26 Of the Revised Code of CPR to a person of the nature 919  
described in division (B)(3)(a) of this section. 920

(4) No physician, health care facility, other health care 921  
provider, person authorized to engage in the business of insurance 922  
in this state under Title XXXIX of the Revised Code, health 923  
insuring corporation, other health care benefit plan, legal entity 924  
that is self-insured and provides benefits to its employees or 925  
members, or other person shall require an individual to possess 926  
DNR identification, or shall require an individual to revoke or 927  
refrain from possessing DNR identification, as a condition of 928  
being insured or of receiving health care benefits or services. 929

(C)(1) Sections 2133.21 to 2133.26 of the Revised Code do not 930  
create any presumption concerning the intent of an individual who 931  
does not possess DNR identification with respect to the use, 932  
withholding, or withdrawal of CPR. 933

(2) Sections 2133.21 to 2133.26 of the Revised Code do not 934  
affect the right of a person to make informed decisions regarding 935  
the use, withholding, or withdrawal of CPR for the person as long 936  
as the person is able to make those decisions. 937

(3) Sections 2133.21 to 2133.26 of the Revised Code are in 938  
addition to and independent of, and do not limit, impair, or 939  
supersede, any right or RESPONSIBILITY that a person has to effect 940  
the withholding or withdrawal of life-sustaining treatment to 941  
another pursuant to sections 2133.01 to 2133.15 of the Revised 942  
Code or in any other lawful manner. 943

(D) Nothing in sections 2133.21 to 2133.26 of the Revised 944  
Code condones, authorizes, or approves of mercy killing, assisted 945  
SUICIDE, or euthanasia. 946

Sec. 2133.25. (A) The department of health, by rule adopted 947  
pursuant to Chapter 119. of the Revised Code, shall adopt a 948  
standardized method of procedure for the withholding of CPR by 949  
physicians, emergency medical services personnel, and health care 950  
facilities in accordance with sections 2133.21 to 2133.26 Of the 951  
Revised Code. The standardized method shall specify criteria for 952  
determining when a do-not-resuscitate order issued by a physician 953  
is current. The standardized method so adopted shall be the 954  
"do-not-resuscitate protocol" for purposes of sections 2133.21 to 955  
2133.26 Of the Revised Code. The department also shall approve one 956  
or more standard forms of DNR identification to be used throughout 957  
this state. 958

(B) The department of health shall adopt rules in accordance 959  
with Chapter 119. of the Revised Code for the administration of 960  
sections 2133.21 to 2133.26 of the Revised Code. 961

(C) The department of health shall appoint an advisory 962  
committee to advise the department in the development of rules 963  
under this section. The advisory committee shall include, but 964  
shall not be limited to, representatives of each of the following 965  
organizations: 966

(1) The association for hospitals and health systems (OHA); 967

(2) The Ohio state medical association; 968

(3) The Ohio chapter of the American college of emergency 969  
physicians; 970

(4) The Ohio hospice organization; 971

(5) The Ohio council for home care; 972

(6) The Ohio health care association; 973

(7) The Ohio ambulance association; 974

(8) The Ohio medical directors association; 975



<u>(9) The Ohio association of emergency medical services;</u>	976
<u>(10) The bioethics network of Ohio;</u>	977
<u>(11) THE OHIO NURSES ASSOCIATION;</u>	978
<u>(12) THE OHIO ACADEMY OF NURSING HOMES;</u>	979
<u>(13) THE OHIO ASSOCIATION OF PROFESSIONAL FIREFIGHTERS;</u>	980
<u>(14) THE DEPARTMENT OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES;</u>	981 982
<u>(15) THE OHIO OSTEOPATHIC ASSOCIATION;</u>	983
<u>(16) The association of Ohio philanthropic homes, housing and services for the aging;</u>	984 985
<u>(17) The catholic conference of Ohio;</u>	986
<u>(18) The department of aging;</u>	987
<u>(19) The department of mental health;</u>	988
<u>(20) The Ohio private residential association;</u>	989
<u>(21) The northern Ohio fire fighters association.</u>	990
<b>Sec. 2133.26. (A)(1) <u>No physician shall purposely prevent or</u></b>	991
<b><u>attempt to prevent, or delay or unreasonably attempt to delay, the</u></b>	992
<b><u>transfer of a patient in violation of division (B) of section</u></b>	993
<b><u>2133.23 of the Revised Code.</u></b>	994
<u>(2) No person shall purposely conceal, cancel, deface, or</u>	995
<u>obliterate the DNR IDENTIFICATION of another person without the</u>	996
<u>consent of the other person.</u>	997
<u>(3) No person shall purposely falsify or forge a revocation</u>	998
<u>of a declaration that is the basis of the DNR identification of</u>	999
<u>another person or purposely falsify or forge an order of a</u>	1000
<u>physician that purports to supersede a do-not-resuscitate order</u>	1001
<u>issued for another person.</u>	1002
<u>(4) No person shall purposely falsify or forge the DNR</u>	1003

identification of another person with the intent to cause the use, 1004  
withholding, or withdrawal of CPR for the other person. 1005

(5) No person who has personal knowledge that another person 1006  
has revoked a declaration that is the basis of the other person's 1007  
DNR identification or personal knowledge that a physician has 1008  
issued an order that supersedes a do-not-resuscitate order that 1009  
the physician issued for another person shall purposely conceal or 1010  
WITHHOLD that personal knowledge with the intent to cause the use, 1011  
withholding, or withdrawal of CPR for the other person. 1012

(B)(1) Whoever violates division (A)(1) or (5) of this 1013  
section is guilty of a misdemeanor of the third degree. 1014

(2) Whoever violates division (A)(2), (3), or (4) of this 1015  
section is guilty of a misdemeanor of the first degree. 1016

**Sec. 3721.17.** (A) Any resident who believes that ~~his~~ the 1017  
resident's rights under sections 3721.10 to 3721.17 of the Revised 1018  
Code have been violated may file a grievance under procedures 1019  
adopted pursuant to division (A)(2) of section 3721.12 of the 1020  
Revised Code. 1021

When the grievance committee determines a violation of 1022  
sections 3721.10 to 3721.17 of the Revised Code has occurred, it 1023  
shall notify the administrator of the home. If the violation 1024  
cannot be corrected within ten days, or if ten days have elapsed 1025  
without correction of the violation, the grievance committee shall 1026  
refer the matter to the department of health. 1027

(B) Any person who believes that a resident's rights under 1028  
sections 3721.10 to 3721.17 of the Revised Code have been violated 1029  
may report or cause reports to be made of the information directly 1030  
to the department of health. No person who files a report is 1031  
liable for civil damages resulting from the report. 1032

(C)(1) Within thirty days of receiving a complaint under this 1033

section, the department of health shall investigate any complaint  
referred to it by a home's grievance committee and any complaint  
from any source that alleges that the home provided substantially  
less than adequate care or treatment, or substantially unsafe  
conditions, or, within seven days of receiving a complaint, refer  
it to the attorney general, if ~~he~~ the attorney general agrees to  
investigate within thirty days.

(2) Within thirty days of receiving a complaint under this  
section, the department of health may investigate any alleged  
violation of sections 3721.10 to 3721.17 of the Revised Code, or  
of rules, policies, or procedures adopted pursuant to those  
sections, not covered by division (C)(1) of this section, or it  
may, within seven days of receiving a complaint, refer the  
complaint to the grievance committee at the home where the alleged  
violation occurred, or to the attorney general if ~~he~~ the attorney  
general agrees to investigate within thirty days.

(D) If, after an investigation, the department of health  
finds probable cause to believe that a violation of sections  
3721.10 to 3721.17 of the Revised Code, or of rules, policies, or  
procedures adopted pursuant to those sections, has occurred at a  
home that is certified under Title XVIII or XIX of the "Social  
Security Act," 49 Stat. 620 (1935), 42 U.S.C.A. 301, as amended,  
it shall cite one or more findings or deficiencies under sections  
5111.35 to 5111.62 of the Revised Code. If the home is not so  
certified, the department shall hold an adjudicative hearing  
within thirty days under Chapter 119. of the Revised Code.

(E) Upon a finding at an adjudicative hearing under division  
(D) of this section that a violation of sections 3721.10 to  
3721.17 of the Revised Code, or of rules, policies, or procedures  
adopted pursuant thereto, has occurred, the department of health  
shall make an order for compliance, set a reasonable time for  
compliance, and assess a fine pursuant to division (F) of this

section. The fine shall be paid to the general revenue fund only 1066  
if compliance with the order is not shown to have been made within 1067  
the reasonable time set in the order. The department of health may 1068  
issue an order prohibiting the continuation of any violation of 1069  
sections 3721.10 to 3721.17 of the Revised Code. 1070

Findings at the hearings conducted under this section may be 1071  
appealed pursuant to Chapter 119. of the Revised Code, except that 1072  
an appeal may be made to the court of common pleas of the county 1073  
in which the home is located. 1074

The department of health shall initiate proceedings in court 1075  
to collect any fine assessed under this section which is unpaid 1076  
thirty days after the violator's final appeal is exhausted. 1077

(F) Any home found, pursuant to an adjudication hearing under 1078  
division (D) of this section, to have violated sections 3721.10 to 1079  
3721.17 of the Revised Code, or rules, policies, or procedures 1080  
adopted pursuant to those sections may be fined not less than one 1081  
hundred nor more than five hundred dollars for a first offense. 1082  
For each subsequent offense, the home may be fined not less than 1083  
two hundred nor more than one thousand dollars. 1084

A violation of sections 3721.10 to 3721.17 of the Revised 1085  
Code is a separate offense for each day of the violation and for 1086  
each resident who claims the violation. 1087

(G) No home or employee of a home shall retaliate against any 1088  
person who: 1089

(1) Exercises any right set forth in sections 3721.10 to 1090  
3721.17 of the Revised Code, including, but not limited to, filing 1091  
a complaint with the home's grievance committee or reporting an 1092  
alleged violation to the department of health; 1093

(2) Appears as a witness in any hearing conducted under this 1094  
section and section 3721.16 of the Revised Code; 1095

(3) Files a civil action alleging a violation of sections 1096  
3721.10 to 3721.17 of the Revised Code, or notifies a county 1097  
prosecuting attorney or the attorney general of a possible 1098  
violation of sections 3721.10 to 3721.17 of the Revised Code. 1099

If, under the procedures outlined in this section, a home or 1100  
its employee is found to have retaliated, the violator may be 1101  
fined up to one thousand dollars. 1102

(H) When legal action is indicated, any evidence of criminal 1103  
activity found in an investigation under division (C) of this 1104  
section shall be given to the prosecuting attorney in the county 1105  
in which the home is located for investigation. 1106

(I)(1) Any resident whose rights under sections 3721.10 to 1107  
3721.17 of the Revised Code are violated has a cause of action 1108  
against any person or home committing the violation. The action 1109  
may be commenced by the resident or by ~~his~~ the resident's sponsor 1110  
on ~~his~~ behalf of the resident. ~~The court may award actual and~~ 1111  
~~punitive damages for violation of the rights. The~~ 1112

(2)(a) If compensatory damages are awarded for a violation of 1113  
the resident's rights, section 2315.21 Of the Revised Code, except 1114  
divisions (E)(1) and (2) of that section, shall apply to an award 1115  
of punitive or exemplary damages for the violation. 1116

(b) The court may award to the prevailing party reasonable 1117  
attorney's fees limited to the work reasonably performed. 1118

(3) Division (I)(2)(a) of this section shall be considered to 1119  
be purely remedial in operation and shall be applied in a remedial 1120  
manner in any civil action in which this section is relevant, 1121  
whether the action is pending in court or commenced on or after 1122  
the effective date of this amendment. 1123

**Sec. 4506.07.** (A) Every application for a commercial driver's 1124  
license, restricted commercial driver's license, or a commercial 1125

driver's temporary instruction permit, or a duplicate of such a 1126  
license, shall be made upon a form approved and furnished by the 1127  
registrar of motor vehicles. Except as provided in section 4506.24 1128  
of the Revised Code in regard to a restricted commercial driver's 1129  
license, the application shall be signed by the applicant and 1130  
shall contain the following information: 1131

(1) The applicant's name, date of birth, social security 1132  
account number, sex, general description including height, weight, 1133  
and color of hair and eyes, current residence, duration of 1134  
residence in this state, country of citizenship, and occupation; 1135

(2) Whether the applicant previously has been licensed to 1136  
operate a commercial motor vehicle or any other type of motor 1137  
vehicle in another state or a foreign jurisdiction and, if so, 1138  
when, by what state, and whether the license or driving privileges 1139  
currently are suspended or revoked in any jurisdiction, or the 1140  
applicant otherwise has been disqualified from operating a 1141  
commercial motor vehicle, or is subject to an out-of-service order 1142  
issued under this chapter or any similar law of another state or a 1143  
foreign jurisdiction and, if so, the date of, locations involved, 1144  
and reason for the suspension, revocation, disqualification, or 1145  
out-of-service order; 1146

(3) Whether the applicant is afflicted with or suffering from 1147  
any physical or mental disability or disease that prevents ~~him~~ the 1148  
applicant from exercising reasonable and ordinary control over a 1149  
motor vehicle while operating it upon a highway or is or has been 1150  
subject to any condition resulting in episodic impairment of 1151  
consciousness or loss of muscular control and, if so, the nature 1152  
and extent of the disability, disease, or condition, and the names 1153  
and addresses of the physicians attending ~~him~~ the applicant; 1154

(4) Whether the applicant has obtained a medical examiner's 1155  
1156

certificate as required by this chapter; 1157

(5) Whether the applicant has pending a citation for 1158  
violation of any motor vehicle law or ordinance except a parking 1159  
violation and, if so, a description of the citation, the court 1160  
having jurisdiction of the offense, and the date when the offense 1161  
occurred; 1162

(6) Whether the applicant wishes to certify willingness to 1163  
make an anatomical donation under section 2108.04 of the Revised 1164  
Code, which shall be given no consideration in the issuance of a 1165  
license; 1166

(7) On and after May 1, 1993, whether the applicant has 1167  
executed a valid durable power of attorney for health care 1168  
pursuant to sections 1337.11 to 1337.17 of the Revised Code or has 1169  
executed a declaration governing the use or continuation, or the 1170  
withholding or withdrawal, of life-sustaining treatment pursuant 1171  
to ~~Chapter 2133.~~ sections 2133.01 to 2133.15 of the Revised Code 1172  
and, if the applicant has executed either type of instrument, 1173  
whether ~~he~~ the applicant wishes ~~his~~ THE license issued to indicate 1174  
that ~~he~~ the applicant has executed the instrument. 1175

(B) Every applicant shall certify, on a form approved and 1176  
furnished by the registrar, all of the following: 1177

(1) That the motor vehicle in which the applicant intends to 1178  
take the driving skills test is representative of the type of 1179  
motor vehicle that the applicant expects to operate as a driver; 1180

(2) That the applicant is not subject to any disqualification 1181  
or out-of-service order, or license suspension, revocation, or 1182  
cancellation, under the laws of this state, of another state, or 1183  
of a foreign jurisdiction and does not have more than one driver's 1184  
license issued by this or another state or a foreign jurisdiction; 1185  
1186

(3) Any additional information, certification, or evidence 1187  
that the registrar requires by rule in order to ensure that the 1188  
issuance of a commercial driver's license to the applicant is in 1189  
compliance with the law of this state and with federal law. 1190

(C) Every applicant shall execute a form, approved and 1191  
furnished by the registrar, under which the applicant consents to 1192  
the release by the registrar of information from the applicant's 1193  
driving record. 1194

(D) The registrar or a deputy registrar ~~shall~~, in accordance 1195  
with section 3503.11 of the Revised Code, SHALL register as an 1196  
elector any applicant for a commercial driver's license or for a 1197  
renewal or duplicate of such a license under this chapter, if the 1198  
applicant is eligible and wishes to be registered as an elector. 1199  
The decision of an applicant whether to register as an elector 1200  
shall be given no consideration in the decision of whether to 1201  
issue ~~him~~ the applicant a license or a renewal or duplicate. 1202

(E) The registrar or a deputy registrar ~~shall~~, in accordance 1203  
with section 3503.11 of the Revised Code, SHALL offer the 1204  
opportunity of completing a notice of change of residence or 1205  
change of name to any applicant for a commercial driver's license 1206  
or for a renewal or duplicate of such a license who is a resident 1207  
of this state, if the applicant is a registered elector who has 1208  
changed ~~his~~ the applicant's residence or name and has not filed 1209  
such a notice. 1210

**Sec. 4507.06.** (A)(1) Every application for a driver's license 1211  
or motorcycle operator's license or endorsement, or duplicate of 1212  
any such license or endorsement, shall be made upon the approved 1213  
form furnished by the registrar of motor vehicles and shall be 1214  
signed by the applicant. 1215

Every application shall state the following: 1216



(a) The applicant's name, date of birth, social security 1217  
number if such has been assigned, sex, general description, 1218  
including height, weight, color of hair, and eyes, residence 1219  
address, including county of residence, duration of residence in 1220  
this state, and country of citizenship; 1221

(b) Whether the applicant previously has been licensed as an 1222  
operator, chauffeur, driver, commercial driver, or motorcycle 1223  
operator and, if so, when, by what state, and whether such license 1224  
is suspended or revoked at the present time and, if so, the date 1225  
of and reason for the suspension or revocation; 1226

(c) Whether the applicant is now or ever has been afflicted 1227  
with epilepsy, or whether the applicant now is suffering from any 1228  
physical or mental disability or disease and, if so, the nature 1229  
and extent of the disability or disease, giving the names and 1230  
addresses of physicians then or previously in attendance upon the 1231  
applicant; 1232

(d) Whether an applicant for a duplicate driver's license, or 1233  
duplicate license containing a motorcycle operator endorsement has 1234  
pending a citation for violation of any motor vehicle law or 1235  
ordinance, a description of any such citation pending, and the 1236  
date of the citation; 1237

(e) Whether the applicant wishes to certify willingness to 1238  
make an anatomical gift under section 2108.04 of the Revised Code, 1239  
which shall be given no consideration in the issuance of a license 1240  
or endorsement; 1241

(f) On and after May 1, 1993, whether the applicant has 1242  
executed a valid durable power of attorney for health care 1243  
pursuant to sections 1337.11 to 1337.17 of the Revised Code or has 1244  
executed a declaration governing the use or continuation, or the 1245  
withholding or withdrawal, of life-sustaining treatment pursuant 1246  
to ~~Chapter 2133.~~ sections 2133.01 to 2133.15 of the Revised Code 1247

and, if the applicant has executed either type of instrument, 1248  
whether the applicant wishes the applicant's license to indicate 1249  
that the applicant has executed the instrument. 1250

(2) Every applicant for a driver's license shall be 1251  
photographed in color at the time the application for the license 1252  
is made. The application shall state any additional information 1253  
that the registrar requires. 1254

(B) The registrar or a deputy registrar, in accordance with 1255  
section 3503.11 of the Revised Code, shall register as an elector 1256  
any person who applies for a driver's license or motorcycle 1257  
operator's license or endorsement under division (A) of this 1258  
section, or for a renewal or duplicate of the license or 1259  
endorsement, if the applicant is eligible and wishes to be 1260  
registered as an elector. The decision of an applicant whether to 1261  
register as an elector shall be given no consideration in the 1262  
decision of whether to issue the applicant a license or 1263  
endorsement, or a renewal or duplicate. 1264

(C) The registrar or a deputy registrar, in accordance with 1265  
section 3503.11 of the Revised Code, shall offer the opportunity 1266  
of completing a notice of change of residence or change of name to 1267  
any applicant for a driver's license or endorsement under division 1268  
(A) of this section, or for a renewal or duplicate of the license 1269  
or endorsement, if the applicant is a registered elector who has 1270  
changed the applicant's residence or name and has not filed such a 1271  
notice. 1272

**Sec. 4507.51.** (A)(1) Every application for an identification 1273  
card or duplicate shall be made on a form furnished by the 1274  
registrar of motor vehicles, shall be signed by the applicant, and 1275  
by ~~his~~ the applicant's parent or guardian if the applicant is 1276  
under eighteen years of age, and shall contain the following 1277  
information pertaining to the applicant: name, date of birth, sex, 1278

general description including the applicant's height, weight, hair 1279  
color, and eye color, address, and at the option of the applicant, 1280  
~~his~~ the applicant's social security number, ~~his~~ the applicant's 1281  
blood type, or ~~his~~ the applicant's social security number and ~~his~~ 1282  
blood type. The application form shall state that an applicant is 1283  
not required to furnish ~~his~~ the applicant's social security number 1284  
or ~~his~~ the applicant's blood type. The application shall also 1285  
state whether an applicant wishes to certify willingness to make 1286  
an anatomical gift under section 2108.04 of the Revised Code and 1287  
shall include information about the requirements of that section 1288  
that apply to persons who are less than eighteen years of age. The 1289  
statement regarding willingness to make such a donation shall be 1290  
given no consideration in the decision of whether to issue an 1291  
identification card. Each applicant shall be photographed in color 1292  
at the time of making application. 1293

1294

(2) On and after May 1, 1993, the application also shall 1295  
state whether the applicant has executed a valid durable power of 1296  
attorney for health care pursuant to sections 1337.11 to 1337.17 1297  
of the Revised Code or has executed a declaration governing the 1298  
use or continuation, or the withholding or withdrawal, of 1299  
life-sustaining treatment pursuant to ~~Chapter 2133.~~ sections 1300  
2133.01 to 2133.15 of the Revised Code and, if the applicant has 1301  
executed either type of instrument, whether ~~he~~ the applicant 1302  
wishes ~~his~~ THE identification card ISSUED to indicate that ~~he~~ the 1303  
applicant has executed the instrument. 1304

(3) The registrar or deputy registrar, in accordance with 1305  
section 3503.11 of the Revised Code, shall register as an elector 1306  
any person who applies for an identification card or duplicate if 1307  
the applicant is eligible and wishes to be registered as an 1308  
elector. The decision of an applicant whether to register as an 1309  
elector shall be given no consideration in the decision of whether 1310

to issue ~~him~~ the applicant an identification card or duplicate. 1311

(B) The application for an identification card or duplicate 1312  
shall be filed in the office of the registrar or deputy registrar. 1313  
Each applicant shall present documentary evidence as required by 1314  
the registrar of ~~his~~ the applicant's age and identity. Each 1315  
applicant who did not enter his or her social security number on 1316  
his or her application form, upon request, shall furnish the 1317  
registrar or the deputy registrar with the applicant's social 1318  
security number, if such a number has been assigned to the 1319  
applicant, for purposes of determining whether a driver's or 1320  
commercial driver's license has been issued under the same social 1321  
security number. The registrar or deputy registrar shall not 1322  
maintain the social security number as a part of the record or 1323  
enter it on the application form. The applicant shall swear that 1324  
all information given is true. 1325

All applications for an identification card or duplicate 1326  
shall be filed in duplicate, and if submitted to a deputy 1327  
registrar, a copy shall be forwarded to the registrar. The 1328  
registrar shall prescribe rules for the manner in which a deputy 1329  
registrar is to file and maintain applications and other records. 1330  
The registrar shall maintain a suitable, indexed record of all 1331  
applications denied and cards issued or canceled. 1332

**Section 2.** That existing sections 1337.12, 2133.01, 2133.02, 1333  
2133.03, 2133.07, 2133.10, 2133.12, 2133.13, 2133.14, 2133.15, 1334  
3721.17, 4506.07, 4507.06, and 4507.51 of the Revised Code are 1335  
hereby repealed. 1336

**Section 3.** That Section 3 of Am. Sub. S.B. 1 of the 119th 1337  
General Assembly be amended to read as follows: 1338

"Sec. 3. Chapter 2133. of the Revised Code, as ~~enacted~~ 1339  
amended by this act, shall be entitled the Modified Uniform Rights 1340

of the Terminally Ill Act and the DNR Identification and 1341

Do-Not-Resuscitate Order Law." 1342

**Section 4.** That existing Section 3 of Am. Sub. S.B. 1 of the 1343

119th General Assembly is hereby repealed. 1344