

JB Pritzker, Governor

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Illinois End of Life Options for Terminally Ill Patients Act (P.A.104-0441) Overview and Preliminary Guidance for Attending Physicians

Background

This preliminary information is being distributed to clinicians, pharmacists, health systems, and public health professionals in preparation for implementing the [Illinois End of Life Options for Terminally Ill Patients Act \(P.A.104-0441\)](#). Effective September 12, 2026, physicians licensed in Illinois may prescribe medications for qualified patients with a terminal illness for the patient to self-administer to end their life. The patient must be an Illinois resident. The contents of this SIREN do not apply to individuals and entities that are lawfully excused from the portions of the Act summarized in this SIREN. The Act imposes no requirement for physicians to engage in aid-in-dying care and provides provisions for conscience-based objectors, but those topics are beyond the scope of this SIREN.

Purpose of SIREN

This SIREN provides an overview of the Act and summarizes steps for clinicians to follow if they choose to provide medical aid in dying. Potentially relevant statutes and legal authorities other than the Act, such as the Health Care Right of Conscience Act, are beyond the scope of this SIREN. This document contains only a general synopsis of the Act for clinicians who chose to provide aid-in-dying care under the Act, so practitioners and entities should familiarize themselves with the specifics of applicable laws and consult legal counsel about their legal rights and obligations.

The information in this SIREN will also be made available on the IDPH website, and a follow up SIREN will be distributed with links to the forms and the website with additional information.

Important:

- 1) All requests for medical aid in dying must be made by the patient. Requests cannot be made by the patient's surrogate decision-maker, health care proxy, health care agent, attorney-in-fact for health care, guardian, nor via advance health care directive.
- 2) No person will be considered a "qualified patient" under the Act solely because of advanced age, disability, or a mental health condition, including depression.

Applicability

There is no requirement for physicians to engage in aid-in-dying care under the Act, and the Act also provides provisions for conscience-based objectors. Those topics are beyond the scope of this Siren.

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Physician Criteria

1. The attending physician (MD or DO) who prescribes the medication must be licensed in Illinois to practice medicine in all its branches under the Medical Practice Act of 1987.
2. The attending physician must have primary responsibility for the care of the patient and treatment of the patient's terminal disease.
3. In addition, the patient must be referred to a consulting physician, who will confirm mental capacity, terminal illness, and prognosis.
4. If either the attending physician or the consulting physician has doubts whether the individual has mental capacity, the attending physician or consulting physician shall refer the patient to a licensed mental health professional.

Qualified Patient Criteria

1. The patient must be an adult Illinois resident who has a terminal illness with less than 6 months to live, and the mental capacity to make medical decisions.
2. The attending physician and consulting physician must both verify the patient's mental capacity, terminal illness, and prognosis.
3. The patient must be able to self-administer (ingest) the prescribed medication.

Establishing Illinois Residency

Only requests made by Illinois residents may be granted under this Act. A patient is able to establish residency through any one or more of the following means:

1. Possession of a driver's license or other identification issued by the Secretary of State or State of Illinois.
2. Registration to vote in Illinois.
3. Evidence that the person owns, rents, or leases property in Illinois.
4. The location of any dwelling occupied by the person.
5. The place where any motor vehicle owned by the person is registered.
6. The residence address, not a post office box, shown on an income tax return filed for the year preceding the year in which the person initially makes an oral request.
7. The residence address, not a post office box, at which the person's mail is received.
8. The residence address, not a post office box, shown on any unexpired resident hunting or fishing or other licenses held by the person.
9. The receipt of any public benefit conditioned upon residency.
10. Any objective facts tending to indicate a person's place of residence is in Illinois.

Mental capacity

Mental capacity means that, in the opinion of the Attending Physician or the consulting physician or, if the opinion of a licensed mental health care professional is required per [Section 45 of the Act](#), the licensed mental health care professional, the patient requesting medication has the ability to make and communicate an informed decision.

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Requirements to Fulfill Prior to Prescribing Medication

These steps must be documented in the patient's medical record.

A. Informed Decision Making

Patients with a terminal illness who have the mental capacity to make medical conditions must be provided with information regarding all feasible end-of-life care options, including additional treatment, comfort care, hospice care, palliative care, pain control, and aid in dying, as well as the foreseeable risks and benefits of each, so that the patient can make a voluntary and affirmative decision regarding the patient's end-of-life care.

B. Procedure for Patient Request

All steps must be documented in the patient's medical record.

1. It is the obligation of the attending physician to ensure that a patient's request for medication to end their life does not arise from coercion.
2. The patient makes an oral request for a prescription for medication to end their life from their attending physician.
3. The oral request from the patient must be documented in the patient's medical record by the attending physician. In cases where the patient is unable to make an oral request due to a disability (as defined by the Americans with Disabilities Act (ADA) (42 USC 12102) the request may be made through the reasonable accommodations and auxiliary aids made available to the patient pursuant to Title III of the ADA.
4. The patient will then provide a written request to their attending physician. A form has been developed by the Illinois Department of Public Health for this purpose (*a form will be provided on the IDPH website*).
5. The patient must repeat the oral request to the patient's attending physician no less than 5 days after making the initial oral request. An exception may be made if the patient is expected to die within 5 days. In that case, the second oral request can be made at any time after submitting the written request.
6. At the time the patient makes the second oral request, the attending physician will offer the patient an opportunity to rescind the request.

C. Written Request

In order to receive medication, a qualified patient must submit a written request (*a form will be provided on the IDPH website*).

This form must be signed and dated by:

1. The requesting patient;
2. Two witnesses who attest that to the best of their knowledge and belief the patient;
 - a. has mental capacity,
 - b. is acting voluntarily, and
 - c. is not being coerced or unduly influenced to sign the request.
3. If an interpreter is used, the "Interpreter Attachment" must be completed (*a form will be provided on the IDPH website*).

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One of the witnesses must be a person who is not:

1. A relative of the patient by blood, marriage, civil union, registered domestic partnership, or adoption.
2. A person who, at the time the request is signed, would be entitled to any portion of the estate of the qualified patient upon death, under any will or by operation of law.
3. An owner, operator, or employee of a health care entity where the qualified patient is receiving medical treatment or is a resident.

Who cannot serve as a witness?

1. The patient's attending physician at the time the request is signed.
2. The interpreter, if a patient uses one.

D. Refer to a Consulting Physician

The patient must be referred to a second consulting physician for confirmation that the patient has the mental capacity to make medical decisions and has a terminal illness likely to end in death within 6 months. The consulting physician must provide a written assessment that will be included in the patient's medical record.

E. When to Refer to a Licensed Mental Health Professional

Refer to a licensed mental health professional if either the attending physician or consulting physician has doubts about whether the patient has the mental capacity to make medical decisions or is concerned that the patient may have a mental health condition causing impaired judgment.

The licensed mental health professional will evaluate the patient and submit a written determination to be included in the patient's medical record.

If a licensed mental health professional determines that the patient does not have the mental capacity to make medical decisions, or has a mental health condition causing impaired judgment, the attending physician will not prescribe medication to end the patient's life.

F. Provide Information and Guidelines for Medication to Be Prescribed

The attending physician must inform the patient of:

1. potential risks, benefits, and probable result of self-administering the prescribed medication to bring about a peaceful death.
2. the patient's right to rescind the request for medication.
3. there is no obligation to fill the prescription or self-administer the medication.

The attending physician must also provide information on:

1. recommended procedure for self-administering the medication.
2. safekeeping and proper disposal of unused medication.
3. the medication must be ingested and cannot be administered by parenteral injection or infusion.
4. the importance of having another person present when the patient self-administers the medication.
5. not taking the aid-in-dying medication in a public place.

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G. Deliver Prescription or Dispense Medication

The Attending Physician must deliver the prescription personally, by mail, or through an authorized electronic transmission to a licensed pharmacist who will dispense the medication, including any ancillary medications, to the qualified patient, or to a person expressly designated by the qualified patient in person or with a signature required on delivery, by mail service, or by messenger service.

Attending Physicians may, if authorized by the U.S. Drug Enforcement Administration (DEA), similarly dispense the prescribed medication, including any ancillary medications, to the qualified patient or a person designated by the qualified patient.

Attending Physician Completion of Death Certificate

1. The death must be attributed to the underlying terminal illness.
2. The patient's self-administration of medication shall not be indicated.
3. The death shall not be designated a suicide or homicide.

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Attending Physician Required Forms

1. Within 30 Calendar Days of Prescribing Medication

- ☐ Complete and submit the “Attending Physician Checklist Form”
(a form will be provided on the IDPH website).

This form includes the following elements:

- ☐ Attending Physician and Consulting Physician contact information and Illinois medical license numbers
- ☐ Patient name, date of birth, race, sex, education level, type of insurance
- ☐ Diagnosis and prognosis
- ☐ Date medication was prescribed
- ☐ Verification that all requirements under the Act were fulfilled
- ☐ Signed attestation by the Attending Physician

2. Within 60 Calendar Days of Notification of a Patient’s Death Following Ingestion of Medication Prescribed for this Purpose

- ☐ Complete and submit the “Attending Physician Follow-Up Form”
(a form will be provided on the IDPH website)

This form includes the following elements:

- ☐ Attending Physician contact information and Illinois medical license number
- ☐ Patient name and date of birth
- ☐ Date of patient’s death
- ☐ Whether the patient was enrolled in hospice at the time of their death
- ☐ Signed attestation by the Attending Physician

Submit forms to IDPH

EOL Program
525 W Jefferson St, 2nd Floor
Springfield, IL 62761
Email: DPH.EOL@illinois.gov

Contact

For technical questions about form submission, please email DPH.EOL@illinois.gov

Target Audience

Local Health Departments, Hospitals, Clinics, FQHCs, Physicians, Nurses, Pharmacists, ED Personnel, EMS Staff, Long Term Care Facilities, Assisted Living Facilities, Home Health Agencies, Hospice, IL Department of Veterans’ Affairs, IL Department of Human Services, IL State Medical Society, IL Rural Health Association, IL Health and Hospital Association, IL Homecare and Hospice Council, IL Primary Health Care Association.

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Illinois Department of Public Health

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Illinois End of Life Options for Terminally Ill Patients Act (P.A.104-0441) Outline of Required Steps for Providing Medical Aid in Dying

Detailed instructions are included above

All steps must be documented in the patient's medical record

1. When appropriate, Attending Physician provides information on feasible end-of-life care options, including medical aid in dying (MAID), to patients with a terminal illness.
 - ☐ All requests for MAID must be made by the patient, not anyone else.
 - ☐ Patients are not eligible for MAID solely because of advanced age, disability, or mental condition, including depression.
2. If a patient expresses interest in MAID, verify:
 - ☐ Illinois resident
 - ☐ Terminal illness with expected less than 6 months to live
 - ☐ Mental capacity to make medical decisions
 - ☐ Ability to self-ingest the prescribed medication(s)
 - ☐ Ensure that the request is not coerced
3. Procedure for Patient Request for Medication to end their life.
 - ☐ Patient makes an oral request to their Attending Physician
 - ☐ Patient submits a witnessed written request
(if an interpreter is used, the "Interpreter Attachment" must be completed)
 - ☐ Patient repeats the oral request, no less than 5 days after the initial oral request
(unless expected to die within 5 days)
 - ☐ Attending Physician offers patient opportunity to rescind the request
4. Attending physician refers patient to a second consulting physician
 - ☐ Consulting Physician evaluates patient
 - ☐ Confirms in writing terminal illness, prognosis, mental capacity
5. Referral to a Licensed Mental Health Professional when applicable
 - ☐ Refer if the Attending Physician or the Consulting Physician:
 - has doubts about the patient's mental capacity to make medical decisions -or-
 - concerns that a mental health condition might impair their judgement
 - ☐ Licensed Mental Health Professional submits a written determination

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Illinois End of Life Options for Terminally Ill Patients Act (P.A.104-0441) Outline of Required Steps for Providing Medical Aid in Dying (cont.)

6. Attending Physician provides information on medication(s) to be prescribed
 - ☐ Inform the patient of:
 - Potential risks, benefits, and probable result of ingesting the medication
 - Right to rescind the request for medication
 - No obligation to obtain or ingest the medication
 - ☐ Include discussion of:
 - How to self-administer the medication(s)
 - (medication must be self-ingested, cannot be injected or infused)
 - Safe-keeping and proper disposal of unused medication
 - Importance of having another person present
 - Not to take the medication a public place
7. Deliver prescription or dispense medication(s)
 - ☐ The Attending Physician must personally deliver the prescription by mail or electronically to a Licensed Pharmacist.
 - ☐ Licensed Pharmacists will dispense the medication to the patient or their designee:
 - In person -or-
 - Via mail or messenger service with signature required on delivery
 - ☐ If authorized by U.S. DEA, the Attending Physician may similarly dispense the medications(s)
8. Attending Physician must complete and submit to IDPH required documents
 - ☐ "Attending Physician Checklist Form"
 - within 30 calendar days of prescribing medication(s)
 - ☐ "Attending Physician Follow-Up Form"
 - within 60 calendar days of being notified of a patient's death from ingesting the prescribed medication(s)
9. Safe disposal of unused medications
 - ☐ After the patient's death, unused medication(s) must be delivered to a facility that disposes of controlled substances.
10. Death certificate
 - ☐ Must attribute the death to the underlying terminal illness.

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