End-of-life Care

1. The Canadian Medical Association supports the integration of advance care plans within patient records. (DM 5-1)

2. The Canadian Medical Association believes that all health care providers should have access to referral for palliative care services and expertise. (DM 5-2)

3. The Canadian Medical Association recommends that the time to benefit of prescribed interventions and medications be considered when providing care for older adults and patients approaching the end of life. (DM 5-3)

4. The Canadian Medical Association will investigate and communicate Inuit, Métis and First Nations’ perspectives on euthanasia, physician-assisted death and end-of-life care. (DM 5-4)

5. The Canadian Medical Association will engage in physician human resource planning to develop an appropriate strategy to ensure the delivery of quality palliative end-of-life care throughout Canada. (DM 5-5)

6. The Canadian Medical Association (CMA) supports the right of all physicians, within the bounds of existing legislation, to follow their conscience when deciding whether to provide medical aid in dying as defined in CMA’s policy on euthanasia and assisted suicide. (DM 5-6)

7. The Canadian Medical Association supports development of a strategy for advance care planning, palliative and end-of-life care in all provinces and territories. (DM 5-8)

8. The Canadian Medical Association supports in principle emergency funding for end-of-life care for uninsured people residing in Canada. (DM 5-7)