

20. This type of minimal assistance with ingestion is permitted under the New Mexico Elizabeth Whitefield End-of-Life Options Act, which like the California End of Life Option Act, is modeled on the Oregon Death with Dignity Act. N.M. Stat. Ann. § 24-7C-2(I). Even with assisted ingestion, the medical practice is still defined as “medical aid in dying.” N.M. Stat. Ann. § 24-7C-2(E). It is specifically defined as not constituting “euthanasia.” N.M. Stat. Ann. § 24-7C-8. Indeed, the key bill sponsor, Rep. Deborah A. Armstrong, has further confirmed this by publicly stating that the law “does not exclude assistance being given.” Ella Creamer, *Why Democrats Should Become the Party of Medically Assisted Dying*, *Washington Monthly* (Feb. 12, 2022).

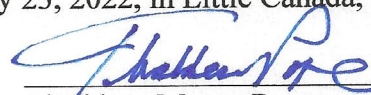
IV. The Self-Ingestion Requirement Is Unnecessary to Assure Voluntariness

21. There is no evidence that the assistance prohibition operates as a “safeguard,” enhances patient safety, or helps assure voluntariness of ingestion.

22. The patient has the right, and is repeatedly advised of her right, to stop the aid in dying process at any time. Decades of experience with aid in dying in Oregon, Washington, California, and other states with aid in dying shows that the competent patient’s informed volitional consent is what assures voluntariness, not her physical participation in ingestion.

23. Over 4,000 individuals have ingested aid in dying drugs in California and in other states with AID laws. There is not a single reported, or known, instance of a patient changing her mind after commencing ingestion.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed on February 23, 2022, in Little Canada, Minnesota.



Thaddeus Mason Pope