

**Adopted
COMMITTEE AMENDMENT NO 1 PROPOSED TO**

House Bill No. 687

BY: Committee

**Amend by striking all after the enacting clause and inserting
in lieu thereof the following:**

32 **SECTION 1.** Section 41-39-15, Mississippi Code of 1972, is
33 amended as follows:

34 41-39-15. (1) For the purposes of this section:

35 (a) "Potential organ donor" means a patient with a
36 severe neurological insult who exhibits loss of cranial nerve
37 response or who has a Glasgow Coma Scale score of five (5) or
38 less.

39 (b) "Potential tissue donor" means any patient who dies
40 due to cardiac arrest.

41 (c) "Organ procurement organization" means the
42 federally designated agency charged with coordinating the
43 procurement of human organs in the State of Mississippi for the
44 purpose of transplantation and research.

45 (d) "Tissue bank" or "tissue procurement organization"
46 means a not-for-profit agency certified by the Mississippi State
47 Department of Health to procure tissues, other than solid organs,
48 in the State of Mississippi.

49 (2) Before November 1, 1998, each licensed acute care
50 hospital in the state shall develop, with the concurrence of the

51 hospital medical staff and the organ procurement organization, a
52 protocol for identifying all potential organ and tissue donors.
53 The protocol shall include a procedure for family consultation.
54 This protocol shall not be applicable in cases where a declaration
55 by the organ donor (a) by will, (b) under a Durable Power of
56 Attorney for Health Care declaration pursuant to Section
57 41-41-209, (c) under a Withdrawal of Life-Saving Mechanism (Living
58 Will) declaration pursuant to former Section 41-41-107 (now
59 repealed), or (d) under the Uniform Anatomical Gift Law pursuant
60 to Section 41-39-39, has been provided to the attending physician.

61 (3) The protocol shall require each hospital to contact the
62 organ procurement organization by telephone when a patient in the
63 hospital becomes either a potential organ donor or potential
64 tissue donor as defined in this section. The organ procurement
65 organization shall determine the suitability of the patient for
66 organ or tissue donation after a review of the patient's medical
67 history and present condition. The organ procurement organization
68 representative shall notify the attending physician or designee of
69 its assessment. The hospital shall note in the patient's chart
70 the organ procurement organization's assessment of suitability for
71 donation. The organ procurement organization representative shall
72 provide information about donation options to the family or
73 persons specified in Section 41-39-35 when consent for donation is
74 requested.

75 (4) If the patient becomes brain dead and is still suitable
76 as a potential donor, the organ procurement organization
77 representative shall approach the deceased patient's legal next of
78 kin or persons specified in Section 41-39-35 for consent to donate
79 the patient's organs. The organ procurement organization
80 representative shall initiate the consent process with reasonable
81 discretion and sensitivity to the family's circumstances, values
82 and beliefs.

83 To discourage multiple requests for donation consent, the
84 organ procurement organization representative shall make a request
85 for tissue donation during the organ donation consent process.
86 When the possibility of tissue donation alone exists, a tissue
87 bank representative or their designee may request the donation.

88 (5) The option of organ and/or tissue donation shall be made
89 to the deceased patient's family upon the occurrence of brain
90 death and while mechanical ventilation of the patient is in
91 progress.

92 The protocol shall require that the decision to donate be
93 noted in the patient's medical record. The organ procurement
94 organization shall provide a form to the hospital for the
95 documentation. The form shall be signed by the patient's family
96 pursuant to Sections 41-39-31 through 41-39-51. The form shall be
97 placed in each deceased patient's chart documenting the family's
98 decision regarding donation of organs or tissues from the patient.

99 (6) (a) If the deceased patient is medically suitable to be
100 an organ and/or tissue donor, as determined by the protocol in
101 this section, and the donor and/or family has authorized the
102 donation and transplantation, the donor's organs and/or tissues
103 shall be removed for the purpose of donation and transplantation
104 by the organ procurement organization, in accordance with
105 paragraph (b) of this subsection.

106 (b) If the deceased patient is the subject of a
107 medical-legal death investigation, the organ procurement
108 organization shall immediately notify the appropriate medical
109 examiner that the deceased patient is medically suitable to be an
110 organ and/or tissue donor. If the medical examiner determines
111 that examination, analysis or autopsy of the organs and/or tissue
112 is necessary for the medical examiner's investigation, the medical
113 examiner may be present while the organs and/or tissues are
114 removed for the purpose of transplantation. The physician,

115 surgeon or technician removing the organs and/or tissues shall
116 file with the medical examiner a report detailing the donation,
117 which shall become part of the medical examiner's report. When
118 requested by the medical examiner, the report shall include a
119 biopsy or medically approved sample, as specified by the medical
120 examiner, from the donated organs and/or tissues.

121 (c) In a medical-legal death investigation, decisions
122 about organ and/or tissue donation and transplantation shall be
123 made in accordance with a protocol established and agreed upon by
124 majority vote no later than July 1, 2005, by the organ procurement
125 organization, a certified state pathologist who shall be appointed
126 by the Mississippi Commissioner of Public Safety, a representative
127 from the University of Mississippi Medical Center, a
128 representative from the Mississippi Coroners Association, an organ
129 recipient who shall be appointed by the Governor, the Director of
130 the Mississippi Bureau of Investigation of the Mississippi
131 Department of Public Safety, and a representative of the
132 Mississippi Prosecutor's Association appointed by the Attorney
133 General. The protocol shall be established so as to maximize the
134 total number of organs and/or tissues available for donation and
135 transplantation. Organs and/or tissues designated by virtue of
136 this protocol shall be recovered. The protocol shall be reviewed
137 and evaluated on an annual basis.

138 (d) This subsection (6) shall stand repealed on June
139 30, 2007.

140 (7) Performance improvement record reviews of deceased
141 patients' medical records shall be conducted by the organ
142 procurement organization for each hospital having more than
143 ninety-five (95) licensed acute care beds and general surgical
144 capability. These reviews must be performed in the first four (4)
145 months of a calendar year for the previous calendar year. If the
146 organ procurement organization and hospital mutually agree, the

147 performance improvement record reviews may be performed more
148 frequently. Aggregate data concerning these reviews shall be
149 submitted by the organ procurement organization to the State
150 Department of Health by July 1 of each year for the preceding
151 year.

152 (8) No organ or tissue recovered in the State of Mississippi
153 may be shipped out of the state except through an approved organ
154 sharing network or, at the family's request, to an approved organ
155 transplant program.

156 (9) Any hospital, administrator, physician, surgeon, nurse,
157 technician, organ procurement organization, tissue procurement
158 organization or donee who acts in good faith to comply with this
159 section shall not be liable in any civil action to a claimant who
160 alleges that his consent for the donation was required.

161 (10) Nothing in this section shall be construed to supersede
162 or revoke, by implication or otherwise, any valid gift of the
163 entire body to a medical school.

164 (11) A gift of all or part of the body made (a) by will, (b)
165 under a Durable Power of Attorney for Health Care declaration
166 pursuant to Section 41-41-209, (c) under a Withdrawal of
167 Life-Saving Mechanism (Living Will) declaration pursuant to former
168 Section 41-41-107 (now repealed), or (d) under a Uniform
169 Anatomical Gift Act declaration pursuant to Section 41-39-39, will
170 supersede and have precedence over any decision by the family of
171 the individual making the organ donation.

172 **SECTION 2.** Section 41-61-59, Mississippi Code of 1972, is
173 amended as follows:

174 41-61-59. (1) A person's death that affects the public
175 interest as specified in subsection (2) of this section shall be
176 promptly reported to the medical examiner by the physician in
177 attendance, any hospital employee, any law enforcement officer
178 having knowledge of the death, the embalmer or other funeral home

179 employee, any emergency medical technician, any relative or any
180 other person present. The appropriate medical examiner shall
181 notify the municipal or state law enforcement agency or sheriff
182 and take charge of the body. When the medical examiner has
183 received notification under Section 41-39-15(6) that the deceased
184 is medically suitable to be an organ and/or tissue donor, the
185 medical examiner's authority over the body shall be subject to the
186 provisions of Section 41-39-15(6). The appropriate medical
187 examiner shall notify the Mississippi Bureau of Narcotics within
188 twenty-four (24) hours of receipt of the body in cases of death as
189 described in subsection (2)(m) or (n) of this section.

190 (2) A death affecting the public interest includes, but is
191 not limited to, any of the following:

192 (a) Violent death, including homicidal, suicidal or
193 accidental death.

194 (b) Death caused by thermal, chemical, electrical or
195 radiation injury.

196 (c) Death caused by criminal abortion, including
197 self-induced abortion, or abortion related to or by sexual abuse.

198 (d) Death related to disease thought to be virulent or
199 contagious that may constitute a public hazard.

200 (e) Death that has occurred unexpectedly or from an
201 unexplained cause.

202 (f) Death of a person confined in a prison, jail or
203 correctional institution.

204 (g) Death of a person where a physician was not in
205 attendance within thirty-six (36) hours preceding death, or in
206 prediagnosed terminal or bedfast cases, within thirty (30) days
207 preceding death.

208 (h) Death of a person where the body is not claimed by
209 a relative or a friend.

210 (i) Death of a person where the identity of the
211 deceased is unknown.

212 (j) Death of a child under the age of two (2) years
213 where death results from an unknown cause or where the
214 circumstances surrounding the death indicate that sudden infant
215 death syndrome may be the cause of death.

216 (k) Where a body is brought into this state for
217 disposal and there is reason to believe either that the death was
218 not investigated properly or that there is not an adequate
219 certificate of death.

220 (l) Where a person is presented to a hospital emergency
221 room unconscious and/or unresponsive, with cardiopulmonary
222 resuscitative measures being performed, and dies within
223 twenty-four (24) hours of admission without regaining
224 consciousness or responsiveness, unless a physician was in
225 attendance within thirty-six (36) hours preceding presentation to
226 the hospital, or in cases in which the decedent had a prediagnosed
227 terminal or bedfast condition, unless a physician was in
228 attendance within thirty (30) days preceding presentation to the
229 hospital.

230 (m) Death that is caused by drug overdose or which is
231 believed to be caused by drug overdose.

232 (n) When a stillborn fetus is delivered and the cause
233 of the demise is medically believed to be from the use by the
234 mother of any controlled substance as defined in Section
235 41-29-105.

236 (3) The State Medical Examiner is empowered to investigate
237 deaths, under the authority hereinafter conferred, in any and all
238 political subdivisions of the state. The county medical examiners
239 and county medical examiner investigators, while appointed for a
240 specific county, may serve other counties on a regular basis with
241 written authorization by the State Medical Examiner, or may serve

242 other counties on an as-needed basis upon the request of the
243 ranking officer of the investigating law enforcement agency. The
244 county medical examiner or county medical examiner investigator of
245 any county that has established a regional medical examiner
246 district under subsection (4) of Section 41-61-77 may serve other
247 counties that are parties to the agreement establishing the
248 district, in accordance with the terms of the agreement, and may
249 contract with counties that are not part of the district to
250 provide medical examiner services for those counties. If a death
251 affecting the public interest takes place in a county other than
252 the one where injuries or other substantial causal factors leading
253 to the death have occurred, jurisdiction for investigation of the
254 death may be transferred, by mutual agreement of the respective
255 medical examiners of the counties involved, to the county where
256 the injuries or other substantial causal factors occurred, and the
257 costs of autopsy or other studies necessary to the further
258 investigation of the death shall be borne by the county assuming
259 jurisdiction.

260 (4) The chief county medical examiner or chief county
261 medical examiner investigator may receive from the county in which
262 he serves a salary of Nine Hundred Dollars (\$900.00) per month, in
263 addition to the fees specified in Sections 41-61-69 and 41-61-75,
264 provided that no county shall pay the chief county medical
265 examiner or chief county medical examiner investigator less than
266 One Hundred Dollars (\$100.00) per month as a salary, in addition
267 to other compensation provided by law. In any county having one
268 or more deputy medical examiners or deputy medical examiner
269 investigators, each deputy may receive from the county in which he
270 serves, in the discretion of the board of supervisors, a salary of
271 not more than Nine Hundred Dollars (\$900.00) per month, in
272 addition to the fees specified in Sections 41-61-69 and 41-61-75.
273 For this salary the chief shall assure twenty-four-hour daily and

274 readily available death investigators for the county, and shall
275 maintain copies of all medical examiner death investigations for
276 the county for at least the previous five (5) years. He shall
277 coordinate his office and duties and cooperate with the State
278 Medical Examiner, and the State Medical Examiner shall cooperate
279 with him.

280 (5) A body composed of the State Medical Examiner, whether
281 appointed on a permanent or interim basis, the Director of the
282 State Board of Health or his designee, the Attorney General or his
283 designee, the President of the Mississippi Coroners' Association
284 (or successor organization) or his designee, and a certified
285 pathologist appointed by the Mississippi State Medical Association
286 shall adopt, promulgate, amend and repeal rules and regulations as
287 may be deemed necessary by them from time to time for the proper
288 enforcement, interpretation and administration of Sections
289 41-61-51 through 41-61-79, in accordance with the provisions of
290 the Mississippi Administrative Procedures Law, being Section
291 25-43-1 et seq.

292 **SECTION 3.** Section 41-61-65, Mississippi Code of 1972, is
293 amended as follows:

294 41-61-65. (1) If, in the opinion of the medical examiner
295 investigating the case, it is advisable and in the public interest
296 that an autopsy or other study be made for the purpose of
297 determining the primary and/or contributing cause of death, an
298 autopsy or other study shall be made by the State Medical Examiner
299 or by a competent pathologist designated by the State Medical
300 Examiner. The State Medical Examiner or designated pathologist
301 may retain any tissues as needed for further postmortem studies or
302 documentation. When the medical examiner has received
303 notification under Section 41-39-15(6) that the deceased is
304 medically suitable to be an organ and/or tissue donor, the State
305 Medical Examiner or designated pathologist may retain any biopsy

306 or medically approved sample of the organ and/or tissue in
307 accordance with the provisions of Section 41-39-15(6). A complete
308 autopsy report of findings and interpretations, prepared on forms
309 designated for this purpose, shall be submitted promptly to the
310 State Medical Examiner. Copies of the report shall be furnished
311 to the authorizing medical examiner, district attorney and court
312 clerk. A copy of the report shall be furnished to one (1) adult
313 member of the immediate family of the deceased or the legal
314 representative or legal guardian of members of the immediate
315 family of the deceased upon request. In determining the need for
316 an autopsy, the medical examiner may consider the request from the
317 district attorney or county prosecuting attorney, law enforcement
318 or other public officials or private persons. However, if the
319 death occurred in the manner specified in subsection (2)(j) of
320 Section 41-61-59, an autopsy shall be performed by the State
321 Medical Examiner or his designated pathologist, and the report of
322 findings shall be forwarded promptly to the State Medical
323 Examiner, investigating medical examiner, the State Department of
324 Health, the infant's attending physician and the local sudden
325 infant death syndrome coordinator.

326 (2) Any medical examiner or duly licensed physician
327 performing authorized investigations and/or autopsies as provided
328 in Sections 41-61-51 through 41-61-79 who, in good faith, complies
329 with the provisions of Sections 41-61-51 through 41-61-79 in the
330 determination of the cause and/or manner of death for the purpose
331 of certification of that death, shall not be liable for damages on
332 account thereof, and shall be immune from any civil liability that
333 might otherwise be incurred or imposed.

334 (3) Family members or others who disagree with the medical
335 examiner's determination shall be able to petition and present
336 written argument to the State Medical Examiner for further review.
337 If the petitioner still disagrees, he may petition the circuit

338 court, which may, in its discretion, hold a formal hearing. In
339 all those proceedings, the State Medical Examiner and the county
340 medical examiner or county medical examiner investigator who
341 certified the information shall be made defendants. All costs of
342 the petitioning and hearing shall be borne by the petitioner.

343 **SECTION 4.** Section 41-41-209, Mississippi Code of 1972, is
344 amended as follows:

345 41-41-209. The following form may be used to create an
346 advance health care directive. Sections 41-41-201 through
347 41-41-207 and 41-41-211 through 41-41-229 govern the effect of
348 this or any other writing used to create an advanced health care
349 directive. An individual may complete or modify all or any part
350 of the following form:

351 ADVANCE HEALTH CARE DIRECTIVE

352 **Explanation**

353 You have the right to give instructions about your own health
354 care. You also have the right to name someone else to make health
355 care decisions for you. This form lets you do either or both of
356 these things. It also lets you express your wishes regarding the
357 designation of your primary physician. If you use this form, you
358 may complete or modify all or any part of it. You are free to use
359 a different form.

360 Part 1 of this form is a power of attorney for health care.
361 Part 1 lets you name another individual as agent to make health
362 care decisions for you if you become incapable of making your own
363 decisions or if you want someone else to make those decisions for
364 you now even though you are still capable. You may name an
365 alternate agent to act for you if your first choice is not
366 willing, able or reasonably available to make decisions for you.
367 Unless related to you, your agent may not be an owner, operator,
368 or employee of a residential long-term health care institution at
369 which you are receiving care.

370 Unless the form you sign limits the authority of your agent,
371 your agent may make all health care decisions for you. This form
372 has a place for you to limit the authority of your agent. You
373 need not limit the authority of your agent if you wish to rely on
374 your agent for all health care decisions that may have to be made.
375 If you choose not to limit the authority of your agent, your agent
376 will have the right to:

377 (a) Consent or refuse consent to any care, treatment,
378 service, or procedure to maintain, diagnose, or otherwise affect a
379 physical or mental condition;

380 (b) Select or discharge health care providers and
381 institutions;

382 (c) Approve or disapprove diagnostic tests, surgical
383 procedures, programs of medication, and orders not to resuscitate;
384 and

385 (d) Direct the provision, withholding, or withdrawal of
386 artificial nutrition and hydration and all other forms of health
387 care.

388 Part 2 of this form lets you give specific instructions about
389 any aspect of your health care. Choices are provided for you to
390 express your wishes regarding the provision, withholding, or
391 withdrawal of treatment to keep you alive, including the provision
392 of artificial nutrition and hydration, as well as the provision of
393 pain relief. Space is provided for you to add to the choices you
394 have made or for you to write out any additional wishes.

395 Part 3 of this form lets you designate a physician to have
396 primary responsibility for your health care.

397 Part 4 of this form lets you authorize the donation of your
398 organs at your death, and declares that this decision will
399 supersede any decision by a member of your family.

400 After completing this form, sign and date the form at the end
401 and have the form witnessed by one of the two alternative methods

402 listed below. Give a copy of the signed and completed form to
403 your physician, to any other health care providers you may have,
404 to any health care institution at which you are receiving care,
405 and to any health care agents you have named. You should talk to
406 the person you have named as agent to make sure that he or she
407 understands your wishes and is willing to take the responsibility.

408 You have the right to revoke this advance health care
409 directive or replace this form at any time.

410 PART 1

411 POWER OF ATTORNEY FOR HEALTH CARE

412 (1) DESIGNATION OF AGENT: I designate the following
413 individual as my agent to make health care decisions for me:

414 _____

415 (name of individual you choose as agent)

416 _____

417 (address) (city) (state) (zip code)

418 _____

419 (home phone) (work phone)

420 OPTIONAL: If I revoke my agent's authority or if my agent is
421 not willing, able, or reasonably available to make a health care
422 decision for me, I designate as my first alternate agent:

423 _____

424 (name of individual you choose as first alternate agent)

425 _____

426 (address) (city) (state) (zip code)

427 _____

428 (home phone) (work phone)

429 OPTIONAL: If I revoke the authority of my agent and first
430 alternate agent or if neither is willing, able, or reasonably
431 available to make a health care decision for me, I designate as my
432 second alternate agent:

433 _____

434 (name of individual you choose as second alternate agent)

435 _____

436 (address) (city) (state) (zip code)

437 _____

438 (home phone) (work phone)

439 (2) AGENT'S AUTHORITY: My agent is authorized to make all
440 health care decisions for me, including decisions to provide,
441 withhold, or withdraw artificial nutrition and hydration, and all
442 other forms of health care to keep me alive, except as I state
443 here:

444 _____

445 _____

446 _____

447 (Add additional sheets if needed.)

448 (3) WHEN AGENT'S AUTHORITY BECOMES EFFECTIVE: My agent's
449 authority becomes effective when my primary physician determines
450 that I am unable to make my own health care decisions unless I
451 mark the following box. If I mark this box [], my agent's
452 authority to make health care decisions for me takes effect
453 immediately.

454 (4) AGENT'S OBLIGATION: My agent shall make health care
455 decisions for me in accordance with this power of attorney for
456 health care, any instructions I give in Part 2 of this form, and
457 my other wishes to the extent known to my agent. To the extent my
458 wishes are unknown, my agent shall make health care decisions for
459 me in accordance with what my agent determines to be in my best
460 interest. In determining my best interest, my agent shall
461 consider my personal values to the extent known to my agent.

462 (5) NOMINATION OF GUARDIAN: If a guardian of my person
463 needs to be appointed for me by a court, I nominate the agent
464 designated in this form. If that agent is not willing, able, or

465 reasonably available to act as guardian, I nominate the alternate
466 agents whom I have named, in the order designated.

467 PART 2

468 INSTRUCTIONS FOR HEALTH CARE

469 If you are satisfied to allow your agent to determine what is
470 best for you in making end-of-life decisions, you need not fill
471 out this part of the form. If you do fill out this part of the
472 form, you may strike any wording you do not want.

473 (6) END-OF-LIFE DECISIONS: I direct that my health care
474 providers and others involved in my care provide, withhold or
475 withdraw treatment in accordance with the choice I have marked
476 below:

477 (a) Choice Not To Prolong Life

478 I do not want my life to be prolonged if (i) I have an
479 incurable and irreversible condition that will result in my death
480 within a relatively short time, (ii) I become unconscious and, to
481 a reasonable degree of medical certainty, I will not regain
482 consciousness, or (iii) the likely risks and burdens of treatment
483 would outweigh the expected benefits, or

484 (b) Choice To Prolong Life

485 I want my life to be prolonged as long as possible
486 within the limits of generally accepted health care standards.

487 (7) ARTIFICIAL NUTRITION AND HYDRATION: Artificial
488 nutrition and hydration must be provided, withheld or withdrawn in
489 accordance with the choice I have made in paragraph (6) unless I
490 mark the following box. If I mark this box , artificial
491 nutrition and hydration must be provided regardless of my
492 condition and regardless of the choice I have made in paragraph
493 (6).

494 (8) RELIEF FROM PAIN: Except as I state in the following
495 space, I direct that treatment for alleviation of pain or
496 discomfort be provided at all times, even if it hastens my death:

497

498

499 (9) OTHER WISHES: (If you do not agree with any of the
500 optional choices above and wish to write your own, or if you wish
501 to add to the instructions you have given above, you may do so
502 here.) I direct that:

503

504

(Add additional sheets if needed.)

506

PART 3

507

PRIMARY PHYSICIAN

508

(OPTIONAL)

509 (10) I designate the following physician as my primary
510 physician:

511

(name of physician)

512

513

(address) (city) (state) (zip code)

514

515

(phone)

516

517 OPTIONAL: If the physician I have designated above is not
518 willing, able, or reasonably available to act as my primary
519 physician, I designate the following physician as my primary
520 physician:

521

(name of physician)

522

523

(address) (city) (state) (zip code)

524

525

(phone)

526

527 (11) EFFECT OF COPY: A copy of this form has the same
528 effect as the original.

529 (12) SIGNATURES: Sign and date the form here:

530 _____

531 (date) (sign your name)

532 _____

533 (address) (print your name)

534 _____

535 (city) (state)

536 PART 4

537 CERTIFICATE OF AUTHORIZATION FOR ORGAN DONATION

538 (OPTIONAL)

539 I, the undersigned, this _____ day of _____,
540 20__, desire that my _____ organ(s) be made available
541 after my demise for:

542 (a) Any licensed hospital, surgeon or physician, for
543 medical education, research, advancement of medical science,
544 therapy or transplantation to individuals;

545 (b) Any accredited medical school, college or
546 university engaged in medical education or research, for therapy,
547 educational research or medical science purposes or any accredited
548 school or mortuary science;

549 (c) Any person operating a bank or storage facility for
550 blood, arteries, eyes, pituitaries, or other human parts, for use
551 in medical education, research, therapy or transplantation to
552 individuals;

553 (d) The donee specified below, for therapy or
554 transplantation needed by him or her, do hereby donate my
555 _____ for said purpose to _____ (name) at
556 _____ (address).

557 I hereby authorize a licensed physician or surgeon to remove
558 and preserve for use my _____ for said
559 purpose.

560 I specifically provide that this declaration shall supersede
561 and take precedence over any decision by my family to the
562 contrary.

563 Witnessed this _____ day of _____, 20__.

564 _____
565 (donor)

566 _____
567 (address)

568 _____
569 (telephone)

570 _____
571 (witness)

572 _____
573 (witness)

574 (13) WITNESSES: This power of attorney will not be valid
575 for making health care decisions unless it is either (a) signed by
576 two (2) qualified adult witnesses who are personally known to you
577 and who are present when you sign or acknowledge your signature;
578 or (b) acknowledged before a notary public in the state.

579 ALTERNATIVE NO. 1

580 Witness

581 I declare under penalty of perjury pursuant to Section
582 97-9-61, Mississippi Code of 1972, that the principal is
583 personally known to me, that the principal signed or acknowledged
584 this power of attorney in my presence, that the principal appears
585 to be of sound mind and under no duress, fraud or undue influence,
586 that I am not the person appointed as agent by this document, and
587 that I am not a health care provider, nor an employee of a health
588 care provider or facility. I am not related to the principal by
589 blood, marriage or adoption, and to the best of my knowledge, I am
590 not entitled to any part of the estate of the principal upon the

591 death of the principal under a will now existing or by operation
592 of law.

593 _____
594 (date) (signature of witness)

595 _____
596 (address) (printed name of witness)

597 _____
598 (city) (state)

599 Witness

600 I declare under penalty of perjury pursuant to Section
601 97-9-61, Mississippi Code of 1972, that the principal is
602 personally known to me, that the principal signed or acknowledged
603 this power of attorney in my presence, that the principal appears
604 to be of sound mind and under no duress, fraud or undue influence,
605 that I am not the person appointed as agent by this document, and
606 that I am not a health care provider, nor an employee of a health
607 care provider or facility.

608 _____
609 (date) (signature of witness)

610 _____
611 (address) (printed name of witness)

612 _____
613 (city) (state)

614 ALTERNATIVE NO. 2

615 State of _____

616 County of _____

617 On this _____ day of _____, in the year _____, before
618 me, _____ (insert name of notary public) appeared
619 _____, personally known to me (or proved to me on the
620 basis of satisfactory evidence) to be the person whose name is
621 subscribed to this instrument, and acknowledged that he or she
622 executed it. I declare under the penalty of perjury that the

623 person whose name is subscribed to this instrument appears to be
624 of sound mind and under no duress, fraud or undue influence.

625 Notary Seal

626 _____

627 (Signature of Notary Public)

628 **SECTION 5.** Section 41-61-71, Mississippi Code of 1972, which
629 provides a procedure for the medical examiner to request
630 permission for removal of eye or other tissues in death cases, is
631 hereby repealed.

632 **SECTION 6.** Section 41-61-71, Mississippi Code of 1972, which
633 sets forth a procedure for obtaining corneal tissue and other
634 tissues from a decedent, is repealed.

635 **SECTION 7.** This act shall take effect and be in force from
636 and after July 1, 2005.

**Further, amend by striking the title in its entirety and
inserting in lieu thereof the following:**

1 AN ACT TO AMEND SECTION 41-39-15, MISSISSIPPI CODE OF 1972,
2 TO PROVIDE THAT IF A DECEASED PATIENT IN A HOSPITAL IS MEDICALLY
3 SUITABLE TO BE AN ORGAN AND/OR TISSUE DONOR, AND AUTHORIZATION FOR
4 THE DONATION AND TRANSPLANTATION HAS BEEN OBTAINED, THE DONOR'S
5 ORGANS AND/OR TISSUES SHALL BE REMOVED FOR THE PURPOSE OF DONATION
6 AND TRANSPLANTATION BY THE ORGAN PROCUREMENT ORGANIZATION, WHICH
7 SHALL IMMEDIATELY NOTIFY THE APPROPRIATE MEDICAL EXAMINER THAT THE
8 DECEASED PATIENT IS MEDICALLY SUITABLE TO BE AN ORGAN AND/OR
9 TISSUE DONOR; TO PROVIDE THAT IF THE MEDICAL EXAMINER DETERMINES
10 THAT EXAMINATION, ANALYSIS OR AUTOPSY OF THE ORGANS AND/OR TISSUE
11 IS NECESSARY FOR HIS OR HER INVESTIGATION, THE MEDICAL EXAMINER
12 MAY BE PRESENT WHILE THE ORGANS AND/OR TISSUES ARE REMOVED; TO
13 REQUIRE THE PHYSICIAN REMOVING THE ORGANS AND/OR TISSUES TO FILE
14 WITH THE MEDICAL EXAMINER A REPORT DETAILING THE DONATION; TO
15 PROVIDE THAT WHEN REQUESTED BY THE MEDICAL EXAMINER, THE REPORT
16 SHALL INCLUDE A BIOPSY OR MEDICALLY APPROVED SAMPLE FROM THE
17 DONATED ORGANS AND/OR TISSUES; TO PROVIDE THAT IN A MEDICAL-LEGAL
18 DEATH INVESTIGATION, DECISIONS ABOUT ORGAN AND/OR TISSUE DONATION
19 AND TRANSPLANTATION SHALL BE MADE IN ACCORDANCE WITH A PROTOCOL
20 ESTABLISHED AND AGREED TO BY INDIVIDUALS REPRESENTING SEVERAL
21 DIFFERENT INTERESTS; TO PROVIDE THAT AN ORGAN DONATION MADE BY
22 WILL, BY A DURABLE POWER OF ATTORNEY, BY A LIVING WILL OR PURSUANT
23 TO THE UNIFORM ANATOMICAL GIFT ACT SUPERSEDES ANY DECISION BY THE
24 FAMILY OF THE ORGAN DONOR; TO AMEND SECTIONS 41-61-59 AND
25 41-61-65, MISSISSIPPI CODE OF 1972, TO CONFORM TO THE PRECEDING
26 SECTION; TO AMEND SECTION 41-41-209, MISSISSIPPI CODE OF 1972, TO
27 PROVIDE THE FORM FOR A DECLARATION BY AN ORGAN DONOR; TO REPEAL
28 SECTION 41-61-71, MISSISSIPPI CODE OF 1972, WHICH SETS FORTH A
29 PROCEDURE FOR OBTAINING CORNEAL TISSUE AND OTHER TISSUES FROM A
30 DECEDENT; AND FOR RELATED PURPOSES.