

SUPREME COURT OF KENTUCKY

Woods Ex Rel. Simpson v. Commonwealth

142 S.W.3d 24 (Ky. 2004) · No. 1999-SC-0773-DG · Decided August 26, 2004

SUMMARY

The Supreme Court of Kentucky considered whether KRS 311.631 constitutionally permits a court-appointed guardian or surrogate to authorize withdrawal of artificial life-prolonging treatment from a permanently unconscious or persistently vegetative patient. The court affirmed the lower courts' holdings that the statute permits such decisions without prior judicial approval absent a dispute, but held that withdrawal requires clear and convincing evidence that the patient is permanently unconscious or in a persistent vegetative state and that withdrawal is in the patient's best interest. The case also addresses substituted judgment, best-interest standards, and the mootness exception for disputes capable of repetition yet evading review.

CASE DETAILS

COURT	Supreme Court of Kentucky
WRITING FOR THE COURT	Justice Cooper; Cooper; Graves; Johnstone; Keller; Lambert; Stumbo; Wintersheimer
JURISDICTION	Kentucky
DECIDED	August 26, 2004
DOCKET	1999-SC-0773-DG
DISPOSITION	other
PROCEDURAL POSTURE	The guardian ad litem appealed a Fayette District Court decision concerning a state guardian's authority to withdraw artificial life-support from an incompetent ward. The Fayette Circuit Court dismissed the appeal as moot after Woods died; the Court of Appeals reversed under the capable-of-repetition-yet-evading-review exception and affirmed the circuit court on the merits. The Supreme Court of Kentucky granted discretionary review.
STANDARD OF REVIEW	De novo review of statutory interpretation and constitutional issues; the court independently determined the applicable evidentiary standard.
PRECEDENTIAL VALUE	Published precedential opinion of the Supreme Court of Kentucky

PARTIES

Matthew Woods, deceased, by and through his guardian ad litem, T. Bruce Simpson, Jr. v. Commonwealth of Kentucky, Cabinet for Human Resources, now Cabinet for Families and Children

TOPICS

guardianships

health law

due process

constitutional law

appellate procedure

PRACTICE AREAS

health law

guardianship

constitutional law

end-of-life medical treatment

appellate procedure

QUESTIONS PRESENTED

1. Whether KRS 311.631 authorizes a judicially appointed guardian or other statutory surrogate to withhold or withdraw artificial life-prolonging treatment from an adult patient lacking decisional capacity who has not executed an advance directive.
2. Whether KRS 311.631 is constitutional under the Kentucky and United States Constitutions.
3. Whether the statute permits withdrawal of life-prolonging treatment based on the patient's best interest, including objective quality-of-life considerations, rather than only substituted judgment based on known patient wishes.
4. Whether a guardian must obtain prior judicial approval or appointment of a guardian ad litem before authorizing withdrawal of life support.
5. Whether clear and convincing evidence is required to establish that the patient is permanently unconscious or in a persistent vegetative state and that withdrawal of life support is in the patient's best interest.
6. Whether the statute violates public policy or modern legal, medical, or moral ethical standards.

HOLDINGS

1. KRS 311.631 authorizes a surrogate listed in the statutory order of priority, including a judicially appointed guardian, to make health-care decisions for an adult patient lacking decisional capacity and without an applicable advance directive, including withholding or withdrawing life-prolonging treatment when the statutory conditions are met.
2. KRS 311.631 is not unconstitutional on its face because it provides a mechanism for balancing the patient's liberty interest in refusing unwanted medical treatment against the Commonwealth's interests in preserving life and protecting other interests.
3. When the patient's wishes are unknown or unreliable, KRS 311.631 permits the surrogate and, if necessary, the court to determine whether withdrawal is in the patient's best interest using both subjective evidence about the patient's values and objective evidence concerning the patient's condition, prognosis, treatment burdens, and benefits.

4. A guardian need not obtain prior judicial approval or appointment of a guardian ad litem to authorize withdrawal of life-prolonging treatment when the guardian, treating physicians, family, and ethics committee, if any, agree. Judicial intervention is appropriate when interested parties disagree.
5. When a dispute requires court intervention, withdrawal or withholding of life-prolonging treatment is prohibited unless clear and convincing evidence establishes that the patient is permanently unconscious, in a persistent vegetative state, or facing inevitable death within a few days, and that withdrawal is in the patient's best interest.

KEY QUOTATIONS

“when an incompetent patient has not executed a valid living will or designated a health care surrogate, KRS 311.631 permits a surrogate, designated in order of priority, to make health care decisions on the patient's behalf, including the withholding or withdrawal of life-prolonging treatment from a patient who is permanently unconscious or in a persistent vegetative state, or when inevitable death is expected by reasonable medical judgment within a few days.” (50-51)

“An erroneous decision not to terminate results in a maintenance of the status quo; An erroneous decision to withdraw life-sustaining treatment, however, is not susceptible of correction.” (44)

“An unqualified state interest in preserving life irrespective of either a patient's express wishes or of the patient's best interests transforms human beings into unwilling prisoners of medical technology.” (43)

FACTUAL BACKGROUND

Matthew Woods was a lifelong or longstanding ward under a limited guardianship administered by a state agency. After suffering cardiopulmonary arrest during an asthma attack, he sustained severe hypoxic brain injury, became permanently unconscious, and required mechanical ventilation, with artificial nutrition and hydration supplied separately. His treating physicians and the hospital ethics committee concluded that his condition was irreversible and recommended withdrawal of artificial ventilation, while continuing nutrition and hydration until death. Woods had not executed an advance directive and died during the litigation.

PROCEDURAL HISTORY

The Fayette District Court held that KRS 311.631 authorized a judicially appointed guardian to make health-care decisions, including withdrawal of artificial life support, without advance judicial approval if acting in good faith and in the patient's best interest. After Woods died, the circuit court dismissed the appeal as moot. The Court of Appeals reversed and remanded, and later affirmed the circuit court's merits ruling. The Supreme Court affirmed the lower courts' substantive holdings except for the standard of proof, holding that clear and convincing evidence was required.

DISPOSITION

other

REMAND INSTRUCTIONS

No remand was necessary because Woods had died. The Court affirmed in part and reversed in part, reversing only the lower courts' rejection of a clear-and-convincing-evidence requirement.

CASES CITED

- DeGrella by Parrent v. Elston, 858 S.W.2d 698 (Ky. 1993)
- Cruzan v. Director, Missouri Department of Health, 497 U.S. 261 (1990)
- In re Quinlan, 355 A.2d 647 (N.J. 1976)
- Rasmussen by Mitchell v. Fleming, 741 P.2d 674 (Ariz. 1987)
- In re Conservatorship of Wendland, 28 P.3d 151 (Cal. 2001)
- Strunk v. Strunk, 445 S.W.2d 145 (Ky. 1969)
- Reyes v. Hardin County, 55 S.W.3d 337 (Ky. 2001)
- Butcher v. Adams, 220 S.W.2d 398 (Ky. 1949)
- Commonwealth v. Phon, 17 S.W.3d 106 (Ky. 2000)
- In re Conroy, 486 A.2d 1209 (N.J. 1985)
- Youngberg v. Romeo, 457 U.S. 307 (1982)
- Jackson v. Indiana, 406 U.S. 715 (1972)
- Commonwealth ex rel. Cowan v. Wilkinson, 828 S.W.2d 610 (Ky. 1992)
- Addington v. Texas, 441 U.S. 418 (1979)
- Santosky v. Kramer, 455 U.S. 745 (1982)