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IN SENATE

May 15, 2014

Introduced by Sen. RIVERA -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the public health law, in relation to the provision of informed consent, by patients or their representatives, to medical and surgical procedures; and to repeal certain provisions of such law relating thereto

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEM-BLY, DO ENACT AS FOLLOWS:

Section 1. The public health law is amended by adding a new article 17 to read as follows:

ARTICLE 17

INFORMED CONSENT

5 SECTION 1700. DEFINITIONS.

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- 1701. NOTICE OF RIGHT TO INFORMED CONSENT.
 - 1702. DUTY TO OBTAIN INFORMED CONSENT.
 - 1703. PROCEDURES AND SURGERY REQUIRING INFORMED CONSENT.
 - 1704. SURGERY; INFORMED CONSENT NOT REQUIRED.
- 1705. CAPACITY TO PROVIDE INFORMED CONSENT.
 - 1706. SCOPE OF INFORMED CONSENT.
- 1707. PATIENT INVOLVEMENT IN THEIR CARE.

S 1700. DEFINITIONS. AS USED IN THIS ARTICLE:

14 1. "EMERGENCY" MEANS A CIRCUMSTANCE IN WHICH A PATIENT'S CONDITION IS 15 SUCH THAT A FAILURE TO PROVIDE HOSPITALIZATION, MEDICAL TREATMENT AND/OR 16 SURGERY TO A PATIENT WOULD RESULT IN UNDUE SUFFERING, DEATH OR SUBSTAN-17 TIAL IMPAIRMENT OF PHYSICAL OR MENTAL FUNCTION.

18 2. "INFORMED CONSENT" MEANS THE LEGALLY EFFECTIVE KNOWING CONSENT OF A 19 PATIENT OR HIS OR HER LEGALLY AUTHORIZED REPRESENTATIVE, SO SITUATED AS 20 TO BE ABLE TO EXERCISE FREE POWER OF CHOICE WITHOUT UNDUE INDUCEMENT OR 21 ANY ELEMENT OF FORCE, FRAUD, DECEIT, DURESS OR OTHER FORM OF CONSTRAINT 22 OR COERCION. WITH REGARD TO CONSENT TO A MEDICAL PROCEDURE OR SURGERY, 23 THE ELEMENTS OF INFORMATION NECESSARY FOR CONSENT INCLUDE:

24 (A) A FAIR AND UNDERSTANDABLE EXPLANATION TO THE PATIENT OR HIS OR HER 25 LEGALLY AUTHORIZED REPRESENTATIVE OF THE PROCEDURES TO BE FOLLOWED AND

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets
[] is old law to be omitted.

LBD14927-01-4

THEIR PURPOSES, INCLUDING IDENTIFICATION OF ANY PROCEDURES WHICH ARE 1 2 EXPERIMENTAL; 3 (B) A DESCRIPTION OF ANY ATTENDANT PAIN, DISCOMFORT AND MATERIAL RISKS 4 POSSIBLE AND THOSE THAT ARE REASONABLY EXPECTED; 5 (C) A DESCRIPTION OF ANY BENEFITS REASONABLY TO BE EXPECTED; 6 (D) A DISCLOSURE OF ANY APPROPRIATE ALTERNATIVE PROCEDURES THAT MAY BE 7 ADVANTAGEOUS TO THE PATIENT; 8 (E) A DISCLOSURE OF THE RISKS, BENEFITS, PAIN AND DISCOMFORT OF 9 ELECTION TO REFUSE ANY PROCEDURE; 10 (F) AN OFFER TO ANSWER ANY INQUIRIES BY THE PATIENT OR HIS OR HER LEGALLY AUTHORIZED REPRESENTATIVE CONCERNING ANY AND ALL INFORMATION 11 12 PROVIDED PURSUANT TO THIS SUBDIVISION; 13 (G) A COMPREHENSIVE INQUIRY BY THE HEALTH CARE PROVIDER TO ENSURE THAT 14 THE PATIENT OR HIS OR HER LEGALLY AUTHORIZED REPRESENTATIVE HAS SUFFI-15 CIENT UNDERSTANDING OF THE INFORMATION PROVIDED PURSUANT TO THIS SUBDI-16 VISION SO AS TO UNDERSTAND THE MEDICAL PROCEDURES AND/OR SURGERY THAT 17 THE PATIENT WILL UNDERGO; AND AN INSTRUCTION THAT THE PATIENT OR HIS OR HER LEGALLY AUTHORIZED 18 (H) 19 REPRESENTATIVE IS FREE TO WITHDRAW HIS OR HER CONSENT AND DISCONTINUE A 20 MEDICAL PROCEDURE OR SURGERY AT ANY TIME. 21 "INVASIVE PROCEDURE" MEANS A MEDICAL PROCEDURE INVOLVING A SKIN 3. 22 INCISION OR PUNCTURE, OR INSERTION OF AN INSTRUMENT OR FOREIGN MATERIAL 23 INTO THE BODY. 24 4. "MATERIAL RISK" MEANS A RISK THAT A HEALTH CARE PROVIDER KNOWS 25 WOULD BE REGARDED AS SIGNIFICANT BY A REASONABLE PERSON IN THE PATIENT'S 26 POSITION WHEN DECIDING TO ACCEPT OR REFUSE THE RECOMMENDED MEDICAL 27 PROCEDURE OR SURGERY. 28 5. "SURGERY" MEANS A MEDICAL PROCEDURE PERFORMED TO STRUCTURALLY ALTER 29 HUMAN BODY BY THE INCISION OR DESTRUCTION OF HUMAN TISSUE; OR FOR THE DIAGNOSTIC OR THERAPEUTIC TREATMENT OF CONDITIONS OR DISEASE PROCESSES 30 31 BY ANY INSTRUMENTS CAUSING LOCALIZED ALTERATION OR TRANSPOSITION OF LIVE 32 HUMAN TISSUE. 33 6. "UNEXPECTED COMPLICATION" MEANS AN EMERGENCY IN WHICH CARE IS IMME-34 DIATELY NECESSARY AND PRESENTS AN IMMINENTLY LIFE THREATENING RISK TO THE PATIENT OR TO PREVENT A SUBSTANTIAL IMPAIRMENT OF PHYSICAL OR MENTAL 35 FUNCTION, WHICH CARE EXCEEDS THAT WHICH WAS AGREED TO IN AN 36 INFORMED 37 CONSENT. 38 S 1701. NOTICE OF RIGHT TO INFORMED CONSENT. EVERY HEALTH CARE PROVID-39 ER AND HEALTH CARE FACILITY WHICH PERFORMS MEDICAL PROCEDURES OR 40 SURGERY, SHALL, AT THE SITE ON WHICH SUCH PROCEDURES OR SURGERY IS PERFORMED, CONSPICUOUSLY POST THE FOLLOWING NOTICE: 41 "EVERY PATIENT HAS THE RIGHT TO BE INFORMED OF ANY SURGICAL OR MEDICAL 42 43 PROCEDURE TO BE PERFORMED UPON THEM, AND SHALL HAVE THE RIGHT TO CONSENT 44 TO OR REFUSE SUCH PROCEDURE. TO ASSURE INFORMED DECISION MAKING AND 45 CONSENT, PATIENTS OR THEIR LEGALLY AUTHORIZED REPRESENTATIVES MUST HAVE INFORMATION ON THE PATIENT'S MEDICAL STATUS, DIAGNOSIS AND PROGNOSIS. 46 47 INFORMED CONSENT IS REQUIRED TO BE DOCUMENTED PRIOR TO PROCEEDING WITH 48 ANY MEDICAL OR SURGICAL PROCEDURE." 49 S 1702. DUTY TO OBTAIN INFORMED CONSENT. IT SHALL BE THE DUTY OF THE 50 HEALTH CARE PROVIDER WHO ORDERS OR PERFORMS ANY MEDICAL PROCEDURE OR 51 SURGERY TO OBTAIN, IN WRITING, THE INFORMED CONSENT OF THE PATIENT OR HIS OR HER LEGALLY AUTHORIZED REPRESENTATIVE. THE OBTAINING OF SUCH 52 CONSENT SHALL INCLUDE THE PROVISION AND DISCUSSION OF ALL INFORMATION 53 54 NECESSARY FOR SUCH CONSENT, AND THE DOCUMENTATION IN THE PATIENT'S 55 MEDICAL RECORD THAT ALL REQUIREMENTS FOR INFORMED CONSENT HAVE BEEN 56 COMPLIED WITH. NO MEDICAL PROCEDURE OR SURGERY SHALL BE PERFORMED WITH-

INFORMED CONSENT, AND THE HEALTH CARE PROVIDER WHO ORDERED SUCH 1 OUT PROCEDURE OR SURGERY SHALL BE SOLELY RESPONSIBLE FOR ENSURING 2 INFORMED 3 CONSENT IS OBTAINED. 4 S 1703. PROCEDURES AND SURGERY REQUIRING INFORMED CONSENT. THE FOLLOW-5 ING MEDICAL PROCEDURES SHALL REQUIRE THE OBTAINING OF INFORMED CONSENT 6 PRIOR TO THE PERFORMANCE THEREOF: 7 1. ALL SURGERY, EXCEPT SIMPLE LACERATION REPAIRS AND DERMATOLOGICAL 8 PROCEDURES PERFORMED ON AN OUTPATIENT BASIS; 9 2. EXPERIMENTAL PROCEDURES OR TREATMENTS; 10 3. ABORTIONS; 4. ADMINISTRATION OF BLOOD OR BLOOD PRODUCTS; 11 12 5. ELECTROCONVULSIVE THERAPY; 13 6. ADMINISTRATION OF NEUROLEPTIC MEDICATION FOR TREATMENT OF A MENTAL 14 ILLNESS OR A DEVELOPMENTAL DISABILITY; 15 7. ANY MEDICAL TREATMENT NECESSARY TO PRESERVE THE LIFE OR HEALTH OF A 16 PERSON COMMITTED TO A FACILITY PURSUANT TO THE MENTAL HYGIENE LAW; 17 8. RADIATION THERAPY; 18 9. INVASIVE MEDICAL IMAGING; 19 10. PROCEDURES INVOLVING MODERATE TO DEEP SEDATION WHERE THERE IS Α 20 RISK OF THE LOSS OF PROTECTIVE REFLEXES; 21 11. INVASIVE PROCEDURES; 22 12. CIRCUMCISION; AND 23 13. STERILIZATION. 24 S 1704. SURGERY; INFORMED CONSENT NOT REQUIRED. 1. IN THE EVENT THAT 25 AN EMERGENCY MAKES IT IMPOSSIBLE OR IMPRACTICAL TO OBTAIN INFORMED 26 CONSENT WITHOUT JEOPARDIZING THE LIFE OR HEALTH OF A PATIENT, MEDICAL TREATMENT MAY BE PROVIDED TO PRESERVE THE LIFE OR HEALTH OF SUCH PATIENT 27 WITHOUT INFORMED CONSENT. IN EACH SUCH INSTANCE, THE HEALTH CARE PROVID-28 29 ER PROVIDING SUCH TREATMENT SHALL DOCUMENT, IN THE PATIENT'S MEDICAL RECORD, THE FACTS WHICH ESTABLISH THAT SUCH SITUATION WAS AN EMERGENCY. 30 SUCH TREATMENT MAY CONTINUE UNTIL THE PATIENT OR HIS OR HER LEGALLY 31 32 AUTHORIZED REPRESENTATIVE IS ABLE TO PROVIDE INFORMED CONSENT. THE 33 PROVISIONS OF THIS SUBDIVISION SHALL NOT APPLY TO ANY PATIENT WHO HAS 34 PREVIOUSLY MADE KNOWN IN A DOCUMENT FILED WITH HIS OR HER HEALTH CARE 35 PROVIDER THAT HE OR SHE DOES NOT WISH TO RECEIVE SUCH EMERGENCY TREAT-MENT UNDER THE CIRCUMSTANCES WHICH EXIST. 36 37 2. IN THE EVENT A MEDICAL COMPLICATION ARISES IN THE COURSE OF A 38 MEDICAL PROCEDURE OR SURGERY, A HEALTH CARE PROVIDER MAY PROVIDE SUCH 39 TREATMENT AS IS NECESSARY TO PRESERVE THE PATIENT'S LIFE WITHOUT 40 INFORMED CONSENT. 3. THE PROVISIONS OF THIS ARTICLE SHALL NOT 41 APPLY TO ANY MEDICAL PROCEDURE OR SURGERY ORDERED BY A COURT OF COMPETENT JURISDICTION. A 42 43 COPY OF SUCH COURT ORDER SHALL BE INCLUDED IN THE PATIENT'S MEDICAL 44 RECORD. 45 1705. CAPACITY TO PROVIDE INFORMED CONSENT. ABSENT A COURT FINDING S OR LEGAL DOCUMENTATION PROVIDING TO THE CONTRARY, EVERY PERSON WHO IS 46 47 AGE OR OLDER SHALL BE DEEMED TO BE COMPETENT TO EIGHTEEN YEARS OF PROVIDE INFORMED CONSENT. ABSENT THE DESIGNATION OF A LEGALLY AUTHORIZED 48 49 REPRESENTATIVE, ONLY SUCH PERSON MAY GRANT INFORMED CONSENT. EXCEPT AS 50 OTHERWISE PROVIDED IN STATUTORY OR CASE LAW, UNEMANCIPATED PERSONS UNDER THE AGE OF EIGHTEEN YEARS SHALL NOT BE AUTHORIZED TO GRANT INFORMED 51 CONSENT, AND SUCH CONSENT MAY ONLY BE PROVIDED BY THE MINOR'S PARENT OR 52 53 LEGAL GUARDIAN. 54 S 1706. SCOPE OF INFORMED CONSENT. 1. THE FOLLOWING SHALL BE ADDRESSED 55 PRIOR TO THE PROVISION OF INFORMED CONSENT TO A MEDICAL PROCEDURE OR 56 SURGERY:

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1	(A) A DESCRIPTION OF THE PROPOSED MEDICAL PROCEDURE OR SURGERY,
2	INCLUDING ANY ANESTHESIA PROPOSED TO BE ADMINISTERED;
3	(B) THE INDICATIONS FOR THE PROPOSED MEDICAL PROCEDURE OR SURGERY;
4	(C) MATERIAL RISKS AND BENEFITS TO THE PATIENT FROM THE PROPOSED
5	PROCEDURE OR SURGERY;
6	(D) TREATMENT ALTERNATIVES, AND THE RISKS AND BENEFITS THEREOF;
7	(E) CONSEQUENCES FOR DECLINING THE PROPOSED OR ALTERNATIVE TREATMENTS;
8	(F) DESIGNATE THE HEALTH CARE PROVIDERS WHO WILL BE ENGAGED IN THE
9	PROVISION OF THE MEDICAL PROCEDURE OR SURGERY TO THE PATIENT, AND THE
10	QUALIFICATIONS OF SUCH HEALTH CARE PROVIDERS; AND
11	(G) AN AMPLE OPPORTUNITY FOR THE PATIENT OR HIS OR HER LEGALLY AUTHOR-
12 13	IZED REPRESENTATIVE TO ASK QUESTIONS AND HAVE SUCH QUESTIONS CLEARLY AND FULLY ANSWERED RELATING TO THE PROPOSED TREATMENT OF THE PATIENT.
14^{13}	2. EACH INFORMED CONSENT SHALL BE CONFINED TO THOSE MEDICAL PROCEDURES
15	AND SURGERIES THAT WERE DISCUSSED BY THE HEALTH CARE PROVIDER AND THE
16	PATIENT OR HIS OR HER LEGALLY AUTHORIZED REPRESENTATIVE. EVERY INFORMED
17	CONSENT SHALL STATE THE SUBJECTS DISCUSSED AND THE PROCEDURES AND
18	SURGERIES THAT WERE AGREED TO. AN INFORMED CONSENT MAY BE RESCINDED AT
19	ANY TIME PRIOR TO THE PERFORMANCE OF THE MEDICAL PROCEDURE OR SURGERY.
20	3. EVERY EXECUTED INFORMED CONSENT SHALL BE INCLUDED IN THE MEDICAL
21	RECORD OF THE PATIENT TO WHOM IT RELATES AND SHALL INCLUDE:
22	(A) THE NAME OF THE FACILITY AT WHICH THE MEDICAL PROCEDURE OR SURGERY
23	IS TO BE PERFORMED;
24	(B) THE DESIGNATION OF THE MEDICAL PROCEDURE OR SURGERY TO BE
25	PERFORMED AND FOR WHICH CONSENT IS GIVEN;
26	(C) THE NAMES OF THE HEALTH CARE PROVIDERS PERFORMING THE MEDICAL
27	PROCEDURE OR SURGERY;
28 29	(D) A STATEMENT THAT THE PROVISIONS OF SUBDIVISION ONE OF THIS SECTION HAVE BEEN COMPLIED WITH;
29 30	(E) THE SIGNATURE OF THE PATIENT OR HIS OR HER LEGALLY AUTHORIZED
31 31	REPRESENTATIVE;
32	(F) THE DATE AND TIME THE CONSENT WAS EXECUTED;
33	(G) THE NAME OF THE HEALTH CARE PROVIDER WHO DISCUSSED TREATMENT WITH
34	THE PATIENT OR HIS OR HER LEGALLY AUTHORIZED REPRESENTATIVE;
35	(H) THE SIGNATURE OF A PERSON WHO WITNESSED THE EXECUTION OF SUCH
36	CONSENT, AND THE DATE AND TIME THEREOF;
37	(I) THE NAME OF THE PATIENT; AND
38	(J) STATEMENTS OF WHETHER MEDICAL STUDENTS WILL BE VIEWING THE PROCE-
39	DURE OR SURGERY, WHETHER SUCH PROCEDURE OR SURGERY WILL BE RECORDED, AND
40	AS TO THE REMOVAL, TESTING AND DISPOSITION OF TISSUE.
41	S 1707. PATIENT INVOLVEMENT IN THEIR CARE. EVERY PATIENT AND THEIR
42	LEGALLY AUTHORIZED REPRESENTATIVE SHALL HAVE THE RIGHT TO BE INFORMED OF
43 44	AND INVOLVED IN THE DECISION MAKING PROCESS RELATING TO SUCH PATIENT'S MEDICAL CARE. TO THE EXTENT PRACTICABLE, ALL INFORMATION PROVIDED PURSU-
45	ANT TO THIS SECTION SHALL BE PROVIDED IN CLEAR AND EASILY UNDERSTANDABLE
46	TERMS. WHERE MEDICALLY SIGNIFICANT ALTERNATIVES FOR CARE AND TREATMENT
47	EXIST, THE PATIENT SHALL BE SO INFORMED.
48	S 2. Subdivision 4 of section 2404 of the public health law is
49	REPEALED.
50	S 3. Subdivision 3 of section 2404-a of the public health law is
51	REPEALED.
52	S 4. Section 2442 of the public health law is REPEALED.
53	S 5. Section 2499 of the public health law is REPEALED.
54	S 6. Subdivision 4 of section 2783 of the public health law is
55	REPEALED.

56 S 7. Section 2805-d of the public health law is REPEALED.

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1 S 8. This act shall take effect on the first of January next succeed-2 ing the date on which it shall have become a law; provided, however, 3 that effective immediately, the addition, amendment and/or repeal of any 4 rule or regulation necessary for the implementation of this act on its 5 effective date are authorized and directed to be made and completed on 6 or before such effective date.