*** § 2803-j. Information for maternity patients.** 1. The commissioner shall require that every hospital and birth center shall prepare in printed or photocopied form and distribute at the time of pre-booking directly to each prospective maternity patient and, upon request, to the general public an informational leaflet. Such leaflet shall be designed by the commissioner and shall contain brief definitions of maternity related procedures and practices as specified in subdivision two of this section and such other material as deemed appropriate by the commissioner. Hospitals and birth centers may also elect to distribute additional explanatory material along with the maternity patients informational leaflet. The commissioner shall make the information contained in the leaflet available on the department's website and shall present all annual statistical information compiled pursuant to subdivision three of this section on the department's website for the most recent five years for which such data is available.

1-a. The informational leaflet shall also include an explanation of the special provisions relating to maternity care and coverage under the insurance law and section twenty-eight hundred three-n of this article, and suggest that expectant parents check their insurance policies for the details of their maternity coverage.

1-b. The informational leaflet shall also include information relating to the physical and mental health of the maternity patient after discharge from the hospital, including, but not limited to, information about maternal depression. The commissioner, in collaboration with the commissioner of mental health, shall review and update the information on maternal depression contained in the leaflet, as necessary. The informational leaflets shall be made available to patients in the top six languages spoken in the state, other than English, according to the latest available data from the United States Census Bureau.

1-c. The informational leaflet shall also include a description of the dangers of shaking infants and young children. The description shall include information on the effects of shaking infants and young children, appropriate ways to manage the causes of shaking infants and young children, and discussion on how to reduce the risks of shaking

infants and young children.

1-d. The informational leaflet shall also include the recommendations from the American Academy of Pediatrics relating to safe sleep, including sleep space and sleep position, and discussion on how to reduce the risk of infant death through safe sleep practices. The information described in this subdivision may take the form of a video in lieu of a leaflet.

2. Such leaflet shall also include statistics relating to the annual percentage of maternity related procedures performed at such hospital or birth center, as provided by the commissioner, including but not limited to the following:

(a) the annual rate of cesarean sections, primary, repeat and total, performed at such facility;

(b) the annual percentage of women with previous cesarean sections who have had a subsequent successful vaginal birth;

(c) the annual percentage of deliveries by midwives;

(d) the annual percentage of births utilizing electronic fetal monitoring listed on the basis of external and internal;

(e) the annual percentage of births utilizing forceps, listed on the basis of low forceps delivery and mid forceps delivery;

(f) the annual percentage of breech births delivered vaginally;

(g) the annual percentage of births utilizing analgesia;

(h) the annual percentage of births utilizing anesthesia including general, spinal, epidural, and paracervical listed on the basis of vaginal and cesarean births;

(i) the annual percentage of births utilizing induction of labor;

(j) the annual percentage of births utilizing augmentation of labor;

(k) the annual percentage of vaginal births utilizing episiotomies;

(l) whether birthing rooms are available for use in the facility;

(m) whether rooming-in is available in the facility, on the basis of twenty-four hours a day or daytime;

(n) whether the facility conducts safety drills to prepare for obstetric emergencies;

(o) whether the facility participates in quality improvement initiatives;

(p) whether the facility has an agreement and policy to arrange for emergent transfer of care for critically ill pregnant people/infants to higher levels of care (applicable only for those facilities that are not the designated regional perinatal center or a quaternary or tertiary care center with Level III-IV NICU);

(q) whether the facility has a written community needs assessment plan to reduce racial disparities and address community needs;

(r) whether the facility offers, upon patient request, an autopsy for stillbirth; and

(s) whether the facility offers bereavement support for patients that have suffered a stillbirth or third trimester fetal loss.

3. Compilation of the statistics set out in subdivision two of this section shall be the responsibility of the commissioner.

4. Statistical information shall be presented in the most recent one year aggregate.

5. (a) The commissioner shall establish an immunization schedule for newborn children. The immunization schedule shall chart out recommended immunizations against certain diseases and illnesses and age-appropriate times for the administration of each immunization. The immunization schedule shall also include information on the importance of getting children immunized at the recommended ages. The immunization schedule shall also include the toll-free telephone number operated by the department as part of its immunization education efforts. The immunization schedule shall be in accordance with recommendations established by the New York state department of health.

(b) The commissioner shall provide the immunization schedule to the local registrars for distribution pursuant to paragraph (b) of subdivision one of section four thousand one hundred thirty-seven of this chapter.

6. Every hospital and birth center shall request that a parent and/or parents, which shall mean and include biological and adoptive parents, guardians, or other persons in parental relationship to a newborn child, if available, view (a) a video presentation, approved by the

commissioner, on the dangers of shaking infants and young children, and the symptoms of shaken baby syndrome, and (b) a video presentation, approved by the commissioner, on the dangers of drowning for infants and young children. After viewing such video presentations or upon refusal to view such video presentations, the hospital or birth center shall request that such parent and/or parents sign a form stating that they have viewed or refused to view such video presentations. All training materials and forms required to implement the provisions of this subdivision shall be provided by the commissioner.

* NB There are 2 § 2803-j's