

---

SENATE BILL 6077

---

State of Washington

53rd Legislature

1994 Regular Session

By Senators Skratek, Wojahn, McAuliffe, Loveland, Hargrove, Sheldon, Quigley, Drew, Haugen, Prentice, M. Rasmussen, Franklin, Fraser, Pelz, Winsley and Spanel

Read first time 01/12/94. Referred to Committee on Health & Human Services.

1 AN ACT Relating to informed consent for hysterectomies; adding a  
2 new section to chapter 18.71 RCW; adding a new section to chapter 18.57  
3 RCW; adding a new section to chapter 48.20 RCW; adding a new section to  
4 chapter 48.21 RCW; adding a new section to chapter 48.44 RCW; and  
5 adding a new section to chapter 48.46 RCW.

6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

7 NEW SECTION. **Sec. 1.** A new section is added to chapter 18.71 RCW  
8 to read as follows:

9 (1) Prior to the performance of a hysterectomy, physicians and  
10 surgeons regulated under this chapter and osteopathic physicians and  
11 surgeons regulated under chapter 18.57 RCW shall obtain verbal and  
12 written informed consent from the patient. Spousal consent shall not  
13 be required. The informed consent procedure shall ensure that all of  
14 the following information is given to the patient verbally and in  
15 writing, and that the patient has adequate opportunity to discuss  
16 questions she may have about the procedure, its alternatives, possible  
17 side effects, and outcomes.

18 (a) Advice that the individual is free to withhold or withdraw  
19 consent to the procedure at any time before the hysterectomy, without

1 affecting the right to future care or treatment and without loss or  
2 withdrawal of state or federally funded program benefits to which the  
3 individual might be otherwise entitled.

4 (b) A description of the type or types of surgery and other  
5 procedures involved in the proposed hysterectomy, and a description of  
6 any known available and appropriate alternatives to the hysterectomy  
7 itself.

8 (c) Except as provided in subsection (2) of this section, advice  
9 that the hysterectomy procedure is considered to be irreversible, and  
10 that infertility will result. This information shall be presented in  
11 simple, layperson language. If the patient is unable to read or  
12 understand English, the information shall be provided in the patient's  
13 native language or through an interpreter.

14 (d) A description of the discomforts and risks that may accompany  
15 or follow the performing of the procedure, including an explanation of  
16 the type and possible effects of any anesthetic to be used.

17 (e) A description of the benefits or advantages that may be  
18 expected as a result of the hysterectomy.

19 (f) Approximate length of hospital stay.

20 (g) Approximate length of time for recovery.

21 (h) Financial cost to the patient of the physician and surgeon's  
22 fees.

23 (2) A woman shall sign a written statement prior to the performance  
24 of the hysterectomy procedure, indicating she has read and understood  
25 the written information provided pursuant to subsection (1) of this  
26 section, and that this information has been discussed with her by her  
27 physician and surgeon, or his or her designee. The statement shall  
28 indicate that the patient has been advised by her physician or designee  
29 that the hysterectomy will render her permanently sterile and incapable  
30 of having children.

31 (3) The informed consent procedure shall not pertain if the  
32 hysterectomy is performed in a life-threatening emergency situation in  
33 which the physician determines prior written informed consent is not  
34 possible. In this case, a statement, signed by the attending  
35 physician, certifying the nature of the emergency, shall accompany the  
36 claim.

37 (4) The department of health may develop rules establishing verbal  
38 and written informed consent procedures that shall be obtained prior to

1 performance of a hysterectomy and that indicate the medically accepted  
2 justifications for performance of a hysterectomy.

3 NEW SECTION. **Sec. 2.** A new section is added to chapter 18.57 RCW  
4 to read as follows:

5 (1) Prior to the performance of a hysterectomy, osteopathic  
6 physicians and surgeons regulated under this chapter shall obtain  
7 verbal and written informed consent from the patient. Spousal consent  
8 shall not be required. The informed consent procedure shall ensure  
9 that all of the following information is given to the patient verbally  
10 and in writing, and that the patient has adequate opportunity to  
11 discuss questions she may have about the procedure, its alternatives,  
12 possible side effects, and outcomes.

13 (a) Advice that the individual is free to withhold or withdraw  
14 consent to the procedure at any time before the hysterectomy, without  
15 affecting the right to future care or treatment and without loss or  
16 withdrawal of any state or federally funded program benefits to which  
17 the individual might be otherwise entitled.

18 (b) A description of the type or types of surgery and other  
19 procedures involved in the proposed hysterectomy, and a description of  
20 any known available and appropriate alternatives to the hysterectomy  
21 itself.

22 (c) Except as provided in subsection (2) of this section, advice  
23 that the hysterectomy procedure is considered to be irreversible, and  
24 that infertility will result. Information shall be presented in  
25 simple, layperson language. If the patient is unable to read or  
26 understand English, the information shall be provided in the patient's  
27 native language or through an interpreter.

28 (d) A description of the discomforts and risks that may accompany  
29 or follow the performing of the procedure, including an explanation of  
30 the type and possible effects of any anesthetic to be used.

31 (e) A description of the benefits or advantages that may be  
32 expected as a result of the hysterectomy.

33 (f) Approximate length of hospital stay.

34 (g) Approximate length of time for recovery.

35 (h) Financial cost to the patient of the physician and surgeon's  
36 fees.

37 (2) A woman shall sign a written statement prior to the performance  
38 of the hysterectomy procedure, indicating she has read and understood

1 the written information provided pursuant to subsection (1) of this  
2 section, and that this information has been discussed with her by her  
3 physician and surgeon, or his or her designee. The statement shall  
4 indicate that the patient has been advised by her physician or designee  
5 that the hysterectomy will render her permanently sterile and incapable  
6 of having children.

7 (3) The informed consent procedure shall not pertain if the  
8 hysterectomy is performed in a life-threatening emergency situation in  
9 which the physician determines prior written informed consent is not  
10 possible. In this case, a statement, signed by the attending  
11 physician, certifying the nature of the emergency, shall accompany the  
12 claim.

13 (4) The department of health may develop rules establishing verbal  
14 and written informed consent procedures that shall be obtained prior to  
15 performance of a hysterectomy and that indicate the medically accepted  
16 justifications for performance of a hysterectomy.

17 NEW SECTION. **Sec. 3.** A new section is added to chapter 48.20 RCW  
18 to read as follows:

19 In establishing rates of provider payment, insurers under this  
20 chapter shall consider cost implications of the requirements contained  
21 in sections 1 and 2 of this act. This should include estimates of both  
22 additional provider time required to comply with the requirements of  
23 sections 1 and 2 of this act and any reduction of unneeded medical  
24 procedures that may occur.

25 NEW SECTION. **Sec. 4.** A new section is added to chapter 48.21 RCW  
26 to read as follows:

27 In establishing rates of provider payment, insurers under this  
28 chapter shall consider cost implications of the requirements contained  
29 in sections 1 and 2 of this act. This should include estimates of both  
30 additional provider time required to comply with the requirements of  
31 sections 1 and 2 of this act and any reduction of unneeded medical  
32 procedures that may occur.

33 NEW SECTION. **Sec. 5.** A new section is added to chapter 48.44 RCW  
34 to read as follows:

35 In establishing rates of provider payment, contractors under this  
36 chapter shall consider cost implications of the requirements contained

1 in sections 1 and 2 of this act. This should include estimates of both  
2 additional provider time required to comply with the requirements of  
3 sections 1 and 2 of this act and any reduction of unneeded medical  
4 procedures that may occur.

5 NEW SECTION. **Sec. 6.** A new section is added to chapter 48.46 RCW  
6 to read as follows:

7 In establishing rates of provider payment, organizations under this  
8 chapter shall consider cost implications of the requirements contained  
9 in sections 1 and 2 of this act. This should include estimates of both  
10 additional provider time required to comply with the requirements of  
11 sections 1 and 2 of this act and any reduction of unneeded medical  
12 procedures that may occur.

--- END ---