1	INFORMED CONSENT FOR				
2	ELECTROCONVULSIVE TREATMENT AND				
3	REPORTING REQUIREMENTS				
4	2003 GENERAL SESSION				
5	STATE OF UTAH				
6	Sponsor: Katherine M. Bryson				
7	This act amends the Local Mental Health Authority Act and the Substance Abuse and				
8	Mental Health Act. The act applies to physicians, hospitals, and mental health facilities.				
9	The act prohibits the use of electroconvulsive treatment on children and pregnant				
10	women. The act requires informed consent for the use of electroconvulsive treatment on				
11	adults. The act establishes the elements of informed consent. The act prohibits anyone				
12	other than a physician from performing electroconvulsive treatment. The act requires				
13	registration of equipment with the Division of Substance Abuse and Mental Health. The				
14	act requires quarterly reporting of electroconvulsive treatment to the division and the				
15	Health Data Committee in the Department of Health. The act requires the division to				
16	enforce the reporting requirements and annually report statistical data regarding the use				
17	of electroconvulsive treatment to the governor and the Legislature. The act has an				
18	effective date of July 1, 2003.				
19	This act affects sections of Utah Code Annotated 1953 as follows:				
20	AMENDS:				
21	17A-3-611, as renumbered and amended by Chapter 186, Laws of Utah 1990				
22	62A-15-704, as renumbered and amended by Chapter 8, Laws of Utah 2002, Fifth				
23	Special Session				
24	ENACTS:				
25	62A-15-1101, Utah Code Annotated 1953				
26	62A-15-1102, Utah Code Annotated 1953				
27	62A-15-1103, Utah Code Annotated 1953				



28	62A-15-1104, Utah Code Annotated 1953					
29	62A-15-1105, Utah Code Annotated 1953					
30	62A-15-1106, Utah Code Annotated 1953					
31	62A-15-1107, Utah Code Annotated 1953					
32	62A-15-1108, Utah Code Annotated 1953					
33	Be it enacted by the Legislature of the state of Utah:					
34	Section 1. Section 17A-3-611 is amended to read:					
35	17A-3-611. Specified treatments prohibited Criminal penalties.					
36	(1) It is a misdemeanor to:					
37	(a) give [shock treatment,] a lobotomy[,] or surgery to anyone without the written					
38	consent of [his] the person or the person's next of kin or legal guardian; or					
39	(b) give electroconvulsive treatment to a person without the written consent of the					
40	person in accordance with Sections 62A-15-1102 and 62A-15-1103.					
41	(2) Services provided under this part are governed by [the] Title 58, Chapter 67, Utah					
42	Medical Practice Act.					
43	$\left[\frac{(2)}{(3)}\right]$ It is a felony to give psychiatric treatment, nonvocational mental health					
44	counseling, case-finding testing, psychoanalysis, drugs, [shock treatment] electroconvulsive					
45	treatment, lobotomy, or surgery to any individual for the purpose of changing his concept of,					
46	belief about, or faith in God.					
47	Section 2. Section 62A-15-704 is amended to read:					
48	62A-15-704. Invasive treatment Due process proceedings.					
49	(1) For purposes of this section, "invasive treatment" means treatment in which a					
50	constitutionally protected liberty or privacy interest may be affected, including antipsychotic					
51	medication, electroshock therapy, and psychosurgery.					
52	(2) The requirements of this section, and Part 11, Electroconvulsive Treatment					
53	Regulations, apply to all children receiving services or treatment from a local mental health					
54	authority, its designee, or its provider regardless of whether a local mental health authority has					
55	physical custody of the child or the child is receiving outpatient treatment from the local					
56	authority, its designee, or provider.					
57	(3) (a) The division shall promulgate rules, in accordance with Title 63, Chapter 46a,					
58	Utah Administrative Rulemaking Act, establishing due process procedures for children prior to					

59	any invasive treatment as follows:				
60	(i) with regard to antipsychotic medications, if either the parent or child disagrees with				
61	that treatment, a due process proceeding shall be held in compliance with the procedures				
62	established under this Subsection (3); and				
63	[(ii) with regard to psychosurgery and electroshock therapy, a due process proceeding				
64	shall be conducted pursuant to the procedures established under this Subsection (3), regardless				
65	of whether the parent or child agree or disagree with the treatment; and]				
66	[(iii)] (ii) other possible invasive treatments, except electroconvulsive treatment as				
67	defined in Section 62A-15-1101, may be conducted unless either the parent or child disagrees				
68	with the treatment, in which case a due process proceeding shall be conducted pursuant to the				
69	procedures established under this Subsection (3).				
70	(b) In promulgating the rules required by Subsection (3)(a), the division shall consider				
71	the advisability of utilizing an administrative law judge, court proceedings, a neutral and				
72	detached fact finder, and other methods of providing due process for the purposes of this				
73	section. The division shall also establish the criteria and basis for determining when invasive				
74	treatment should be administered.				
75	Section 3. Section 62A-15-1101 is enacted to read:				
76	Part 11. Electroconvulsive Treatment Regulations				
77	<u>62A-15-1101.</u> Application.				
78	(1) For purposes of this part, "electroconvulsive treatment" includes prefrontal sonic				
79	sound treatment, or applied electrical voltage to the brain through electrodes which results in a				
80	gran mal seizure or epileptic seizure and which is administered to treat mental illness.				
81	(2) This part applies to the use of electroconvulsive treatment by any person who uses				
82	or administers electroconvulsive treatment, including:				
83	(a) a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title				
84	58, Chapter 68, Utah Osteopathic Medical Practice Act;				
84 85	58, Chapter 68, Utah Osteopathic Medical Practice Act; (b) a hospital or facility licensed under Section 26-21-9;				
85	(b) a hospital or facility licensed under Section 26-21-9;				
85 86	 (b) a hospital or facility licensed under Section 26-21-9; (c) a local mental health authority subject to this title, its designee or providers; and 				

90	Electroconvulsive treatment may not be used on:					
91	(1) a person who is younger than 18 years of age;					
92	(2) a person who is pregnant; or					
93	(3) a person who is 18 years of age or older, unless the person consents to the use of					
94	the treatment in accordance with Section 62A-15-1103.					
95	Section 5. Section 62A-15-1103 is enacted to read:					
96	62A-15-1103. Consent to treatment.					
97	(1) The division shall adopt administrative rules which establish a standard written					
98	consent form to be used when electroconvulsive treatment is considered. The rule shall					
99	prescribe the information that must be contained in the written consent for electroconvulsive					
100	treatment.					
101	(2) The written consent form must clearly state:					
102	(a) the nature and purpose of the procedure;					
103	(b) the nature, degree, duration, and probability of the side effects and significant risks					
104	of the treatment commonly known by the medical profession, especially noting the possible					
105	degree and duration of memory loss, the possibility of permanent irrevocable memory loss, and					
106	the possibility of death:					
107	(c) that there is a division of opinion as to the efficacy of the procedure; and					
108	(d) the probable degree and duration of improvement or remission expected with or					
109	without the procedure.					
110	(3) Before a person receives each electroconvulsive treatment, the physician					
111	administering the treatment shall ensure that:					
112	(a) the person receives a written copy of the consent form that is in the person's					
113	primary language, if possible;					
114	(b) the contents of the consent form are explained to the person:					
115	(i) orally, in simple, nontechnical terms in the person's primary language, if possible; or					
116	(ii) through the use of a means reasonably calculated to communicate with a hearing					
117	impaired or visually impaired person, if applicable;					
118	(c) the person signs a copy of the consent form stating that the person has read the					
119	consent form and understands the information included in the documents; and					
120	(d) the signed copy of the consent form is made a part of the person's clinical record.					

121	(4) For a person 65 years of age or older, before each treatment series begins, the				
122	physician administering the procedure shall:				
123	(a) ensure that two physicians have signed an appropriate form that states the procedure				
124	is medically necessary;				
125	(b) make the form described by Subsection (1) available to the person; and				
126	(c) inform the person of any known current medical condition that may increase the				
127	possibility of injury or death as a result of the treatment.				
128	(5) (a) A person who consents to the administration of electroconvulsive treatment may				
129	revoke the consent for any reason and at any time.				
130	(b) Revocation of consent is effective immediately.				
131	Section 6. Section 62A-15-1104 is enacted to read:				
132	62A-15-1104. Physician requirement.				
133	(1) Only a physician licensed under Title 58, Chapter 67, Utah Medical Practice Act, or				
134	Title 58, Chapter 68, Utah Osteopathic Medical Practice Act, may administer electroconvulsive				
135	treatment.				
136	(2) A physician may not delegate the act of administering the treatment. A				
137	nonphysician who administers electroconvulsive treatment is considered to be practicing				
138	medicine in violation of Title 58, Chapter 67, Utah Medical Practice Act.				
139	Section 7. Section 62A-15-1105 is enacted to read:				
140	62A-15-1105. Registration of equipment.				
141	(1) A physician may not administer electroconvulsive treatment unless the equipment				
142	used to administer the treatment is registered with the division.				
143	(2) A hospital or facility where electroconvulsive treatment is administered, or a				
144	physician administering the treatment on an outpatient basis must file an application for				
145	registration under this section. The applicant must submit the application to the division.				
146	(3) The application must be accompanied by a nonrefundable application fee. The				
147	division shall set the fee in accordance with Section 63-38-3.2 in a reasonable amount not to				
148	exceed the cost to administer the registration, reporting, enforcement, and monitoring required				
149	by this part.				
150	(4) The application must contain:				
151	(a) the model, manufacturer, and age of each piece of equipment used to administer the				

152	treatment; and				
153	(b) any other information required by the division.				
154	(5) The division by rule may prohibit the registration and use of equipment of a type,				
155	model, or age the division determines is dangerous.				
156	Section 8. Section 62A-15-1106 is enacted to read:				
157	<u>62A-15-1106.</u> Reports.				
158	(1) A hospital or facility where electroconvulsive treatment is administered or a				
159	physician administering the treatment on an outpatient basis shall submit to the division and to				
160	the Health Data Committee created in Section 26-1-7, quarterly reports relating to the				
161	administration of the treatment in the hospital or facility or by the physician.				
162	(2) A report must state for each quarter:				
163	(a) the name of each physician who has privileges in the facility to perform				
164	electroconvulsive treatment and the number of electroconvulsive treatments performed by each				
165	physician;				
166	(b) the total number of persons who received the treatment;				
167	(c) the age, sex, and race of each person receiving the treatment;				
168	(d) the diagnosis for each person receiving the treatment:				
169	(e) the source of the payment for the treatment;				
170	(f) the average number of electroconvulsive treatments administered for each complete				
171	series of treatments, but not including maintenance treatments;				
172	(g) the average number of maintenance electroconvulsive treatments administered per				
173	month;				
174	(h) the number of fractures, reported memory losses, incidents of apnea, and cardiac				
175	arrests without death;				
176	(i) autopsy findings, including investigation of petichial hemorrhages and other small				
177	blood vessel hemorrhages in the brain tissue, if death followed within 14 days after the date of				
178	the administration of the treatment; and				
179	(j) any other information required by the division.				
180	(3) The information required by Subsections (2)(h) and (2)(i) must include the name of				
181	the physician who administered the treatment for each occurrence listed in Subsections (2)(h)				
182	<u>and (2)(i).</u>				

183	Section 9. Section 62A-15-1107 is enacted to read:
184	62A-15-1107. Use of information Report.
185	(1) The division shall use the information received under Sections 62A-15-1105 and
186	62A-15-1106 to analyze and monitor the use of electroconvulsive treatment administered to
187	treat mental illness.
188	(2) (a) The division shall file annually with the governor and the Health and Human
189	Services Interim Committee of the Legislature a written report summarizing the information
190	received under Sections 62A-15-1105 and 62A-15-1106. The information in the report shall be
191	summarized by facility and by physician.
192	(b) The division may not directly or indirectly identify in a report issued under this
193	section a patient who received the treatment.
194	(c) The report prepared in accordance with this Subsection (2) is a public document
195	under the provisions of Title 63, Chapter 2, Government Records Access and Management Act.
196	Section 10. Section 62A-15-1108 is enacted to read:
197	<u>62A-15-1108.</u> Enforcement.
198	The division shall enforce the provisions of this part and may, as the division considers
199	appropriate:
200	(1) issue a warning to any physician, hospital, or facility who fails to obtain consent or
201	file a report required by this part; and
202	(2) report violations of this part to the appropriate licensing authority for the physician,
203	hospital, or facility.
204	Section 11. Effective date.
205	This act takes effect on July 1, 2003.

Legislative Review Note as of 1-20-03 1:46 PM

This legislation requires health care providers to disclose protected health information about a patient. This type of disclosure is generally prohibited under the federal Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. Parts 160 and 164. However, the federal privacy standards have an exception to the general prohibition if the disclosure is required by law. This bill appears to fall within the exception and would be a disclosure of protected health information required by law.

Office of Legislative Research and General Counsel

State Impact

Passage of this bill would require an appropriation of \$63,600 to the Department of Human Services to administer the provisions of the bill.

	<u>FY 04 Approp.</u>	<u>FY 05 Approp.</u>	FY 04 Revenue	FY 05 Revenue
General Fund	\$63,600	\$0	\$0	\$0
Dedicated Credits Revenue	\$0	\$62,100	\$0	\$62,100
TOTAL	\$63,600	\$62,100	\$0	\$62,100

Individual and Business Impact

There will be additional cost to physicians and hospitals that provide electroconvulsive treatment.

Office of the Legislative Fiscal Analyst