Representative Kerry W. Gibson proposes the following substitute bill:

ABO	ORTION BY A MINOR - PA	RENTAL
]	NOTIFICATION AND CON	ISENT
	2006 GENERAL SESSION	
STATE OF UTAH		
	Chief Sponsor: Kerry W. G	Sibson
	Senate Sponsor:	
Cosponsors:	Glenn A. Donnelson	Steven R. Mascaro
Douglas C. Aagard	John Dougall	John G. Mathis
J. Stuart Adams	James A. Dunnigan	Ronda Rudd Menlove
Jeff Alexander	Ben C. Ferry	Michael T. Morley
Sheryl L. Allen	Julie Fisher	Joseph G. Murray
Roger E. Barrus	Lorie D. Fowlke	Merlynn T. Newbold
Ron Bigelow	Craig A. Frank	Michael E. Noel
DeMar Bud Bowman	Ann W. Hardy	Curtis Oda
Craig W. Buttars	Wayne A. Harper	Patrick Painter
D. Gregg Buxton	David L. Hogue	Paul Ray
LaVar Christensen	Kory M. Holdaway	Aaron Tilton
David Clark	Gregory H. Hughes	David Ure
Stephen D. Clark	Eric K. Hutchings	Stephen H. Urquhart
David N. Cox	Bradley T. Johnson	Mark W. Walker
Greg J. Curtis	Todd E. Kiser	Peggy Wallace
Bradley M. Daw	Bradley G. Last	Richard W. Wheeler
Margaret Dayton	M. Susan Lawrence	Scott L Wyatt
Brad L. Dee	Rebecca D. Lockhart	·
LONG TITLE		
General Description:		
This bill amends the U	Utah Criminal Code, the Utah Huma	an Services Code, and the Uta
Health Care Malpractice Act	to require parental consent and noti	fication for abortions
performed upon minors, subj	ect to certain exceptions.	



This bill:

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- 33 ▶ defines terms;
- provides that a written report of incest or abuse made in connection with a minor seeking an abortion may not disclose that the minor obtained or considered an abortion;
 - requires that at least 24 hours before a physician performs an abortion on a minor, the physician shall notify a parent or guardian of the minor that the minor intends to have an abortion, unless:
 - a medical emergency exists;
 - the parent or guardian abused the woman or caused the woman's pregnancy by engaging in incest with the woman; or
- the parent or guardian has not assumed responsibility for the minor's care and upbringing;
 - ▶ provides that, in a medical emergency, except when it is necessary to immediately perform an abortion, the physician shall notify a parent or guardian of the minor, as early as possible before the abortion, that the minor intends to have an abortion;
 - removes the requirement that a physician notify the spouse of a married woman that she intends to obtain an abortion;
 - requires that a minor obtain parental consent before obtaining an abortion unless:
 - the minor obtains the right, by court order, to consent to an abortion without parental consent; or
 - a medical emergency exists;
 - ▶ provides that a minor may petition a court to determine whether a minor should be granted the right to consent to an abortion without parental consent;
 - provides that the proceedings described above are closed to the public;
 - provides that a court shall order that a minor may consent to an abortion without parental consent only if the court finds by a preponderance of the evidence that:
 - the minor is mature and capable of giving informed consent to the abortion and has given her informed consent; or
 - an abortion would be in the minor's best interest;

62	grants rulemaking authority to the Judicial Council to:		
63	 administer the proceedings described in this bill; 		
64	 provide for an appeal of a decision described in the preceding paragraph; 		
65	 ensure the confidentiality of proceedings described in this bill and the records 		
66	relating to the proceedings; and		
67	• establish procedures to expedite the hearing and appeal proceedings described in		
68	this bill;		
69	▶ amends the Utah Health Care Malpractice Act and related provisions to conform to		
70	the consent requirements of this bill; and		
71	makes technical changes.		
72	Monies Appropriated in this Bill:		
73	None		
74	Other Special Clauses:		
75	None		
76	Utah Code Sections Affected:		
77	AMENDS:		
78	62A-4a-408, as renumbered and amended by Chapter 260, Laws of Utah 1994		
79	76-7-304 , as enacted by Chapter 33, Laws of Utah 1974		
80	76-7-305 , as last amended by Chapter 221, Laws of Utah 1997		
81	76-7-305.5 , as last amended by Chapter 13, Laws of Utah 1998		
82	76-7-315, as last amended by Chapter 5, Laws of Utah 1996, Second Special Session		
83	78-14-5, as last amended by Chapter 9, Laws of Utah 2001		
84	ENACTS:		
85	76-7-304.5 , Utah Code Annotated 1953		
86			
87	Be it enacted by the Legislature of the state of Utah:		
88	Section 1. Section 62A-4a-408 is amended to read:		
89	62A-4a-408. Written reports.		
90	(1) Reports made pursuant to this part shall be followed by a written report within 48		
91	hours, if requested by the division. The division shall immediately forward a copy of that		

report to the statewide central register, on forms supplied by the register.

93	(2) If, in connection with an intended or completed abortion by a minor, a physician is			
94	required to make a report of incest or abuse of a minor, the report may not include information			
95	that would in any way disclose that the report was made in connection with:			
96	(a) an abortion; or			
97	(b) a consultation regarding an abortion.			
98	Section 2. Section 76-7-304 is amended to read:			
99	76-7-304. Considerations by physician Notice to a parent or guardian			
100	Exceptions.			
101	(1) As used in this section:			
102	(a) "abuse" is as defined in Section 62A-4a-101; and			
103	(b) "minor" means a person who is:			
104	(i) under 18 years of age;			
105	(ii) unmarried; and			
106	(iii) not emancipated.			
107	(2) To enable the physician to exercise [his] the physician's best medical judgment,			
108	[he] the physician shall[: (1) Consider] consider all factors relevant to the well-being of the			
109	woman upon whom the abortion is to be performed including[, but not limited to,]:			
110	(a) her physical, emotional and psychological health and safety[-,];			
111	(b) her age[,]; and			
112	(c) her familial situation.			
113	[(2) Notify, if possible, the parents or guardian of the woman upon whom the abortion			
114	is to be performed, if she is a minor or the husband of the woman, if she is married.]			
115	(3) Subject to Subsection (4), at least 24 hours before a physician performs an abortion			
116	on a minor, the physician shall notify a parent or guardian of the minor that the minor intends			
117	to have an abortion.			
118	(4) A physician is not required to comply with Subsection (3) if:			
119	(a) subject to Subsection (5)(a):			
120	(i) a medical condition exists that, on the basis of the physician's good faith clinical			
121	judgment, so complicates the medical condition of a pregnant minor as to necessitate the			
122	abortion of her pregnancy to avert:			
123	(A) the minor's death; or			

124	(B) a serious risk of substantial and irreversible impairment of a major bodily function
125	of the minor; and
126	(ii) there is not sufficient time to give the notice required under Subsection (3) before it
127	is necessary to terminate the minor's pregnancy in order to avert the minor's death or
128	impairment described in Subsection (4)(a)(i);
129	(b) subject to Subsection (5)(b):
130	(i) the minor is pregnant as a result of incest to which the parent or guardian was a
131	party; or
132	(ii) the parent or guardian has abused the minor; or
133	(c) subject to Subsection (5)(b), the parent or guardian has not assumed responsibility
134	for the minor's care and upbringing.
135	(5) (a) If, for the reason described in Subsection (4)(a), a physician does not give the
136	24-hour notice described in Subsection (3), the physician shall give the required notice as early
137	as possible before the abortion, unless it is necessary to perform the abortion immediately in
138	order to avert the minor's death or impairment described in Subsection (4)(a)(i).
139	(b) If, for a reason described in Subsection (4)(b) or (c), a parent or guardian of a minor
140	is not notified that the minor intends to have an abortion, the physician shall notify another
141	parent or guardian of the minor, if the minor has another parent or guardian that is not exempt
142	from notification under Subsection (4)(b) or (c).
143	Section 3. Section 76-7-304.5 is enacted to read:
144	76-7-304.5. Consent required for abortions performed on minors Hearing to
145	allow a minor to self-consent Appeals.
146	(1) As used in this section, "minor" is as defined in Subsection 76-7-304(1).
147	(2) In addition to the other requirements of this part, an abortion may not be performed
148	on a minor unless:
149	(a) the minor obtains the informed written consent of a parent or guardian of the minor:
150	(b) the minor is granted the right, by court order under Subsection (5)(b), to consent to
151	the abortion without obtaining consent from a parent or guardian; or
152	(c) (i) a medical condition exists that, on the basis of the physician's good faith clinical
153	judgment, so complicates the medical condition of a pregnant minor as to necessitate the
154	abortion of her pregnancy to avert:

155	(A) the minor's death; or
156	(B) a serious risk of substantial and irreversible impairment of a major bodily function
157	of the minor; and
158	(ii) there is not sufficient time to obtain the consent in the manner chosen by the minor
159	under Subsection (3) before it is necessary to terminate the minor's pregnancy in order to avert
160	the minor's death or impairment described in Subsection (2)(c)(i).
161	(3) A pregnant minor who wants to have an abortion may choose:
162	(a) to seek consent from a parent or guardian under Subsection (2)(a); or
163	(b) to seek a court order under Subsection (2)(b).
164	(4) If a pregnant minor fails to obtain the consent of a parent or guardian of the minor
165	to the performance of an abortion, or if the minor chooses not to seek the consent of a parent or
166	guardian, the minor may file a petition with the juvenile court to obtain a court order under
167	Subsection (2)(b).
168	(5) (a) A hearing on a petition described in Subsection (4) shall be closed to the public.
169	(b) After considering the evidence presented at the hearing, the court shall order that
170	the minor may obtain an abortion without the consent of a parent or guardian of the minor if
171	the court finds by a preponderance of the evidence that:
172	(i) the minor:
173	(A) has given her informed consent to the abortion; and
174	(B) is mature and capable of giving informed consent to the abortion; or
175	(ii) an abortion would be in the minor's best interest.
176	(6) The Judicial Council shall make rules that:
177	(a) provide for the administration of the proceedings described in this section;
178	(b) provide for the appeal of a court's decision under this section;
179	(c) ensure the confidentiality of the proceedings described in this section and the
180	records related to the proceedings; and
181	(d) establish procedures to expedite the hearing and appeal proceedings described in
182	this section.
183	Section 4. Section 76-7-305 is amended to read:
184	76-7-305. Informed consent requirements for abortion 24-hour wait mandatory
185	Emergency exceptions.

- (1) No abortion may be performed unless a voluntary and informed written consent, consistent with Section 8.08 of the American Medical Association's Code of Medical Ethics, Current Opinions, and the provisions of this section is first obtained by the attending physician from the woman upon whom the abortion is to be performed.
 - (2) Except in the case of a medical emergency, consent to an abortion is voluntary and informed only if:
 - (a) at least 24 hours prior to the abortion, the physician who is to perform the abortion, the referring physician, a registered nurse, nurse practitioner, advanced practice registered nurse, certified nurse midwife, or physician's assistant [shall], in a face-to-face consultation, orally [inform] informs the woman of:
 - (i) <u>consistent with Subsection (3)(a)</u>, the nature of the proposed abortion procedure or treatment, specifically how that procedure will affect the fetus, and the risks and alternatives to an abortion procedure or treatment that any person would consider material to the decision of whether or not to undergo an abortion[. The alternatives required to be provided under this subsection shall include a description of adoption services, including private and agency adoption methods, and a statement that it is legal for adoptive parents to financially assist in pregnancy and birth expenses];
 - (ii) the probable gestational age and a description of the development of the unborn child at the time the abortion would be performed; and
 - (iii) the medical risks associated with carrying her child to term;
 - (b) at least 24 hours prior to the abortion the physician who is to perform the abortion, the referring physician, or, as specifically delegated by either of those physicians, a registered nurse, licensed practical nurse, certified nurse-midwife, advanced practice registered nurse, clinical laboratory technologist, psychologist, marriage and family therapist, clinical social worker, or certified social worker has orally, in a face-to-face consultation, informed the pregnant woman that:
 - (i) the Department of Health, in accordance with Section 76-7-305.5, publishes printed material and an informational video that:
- (A) provides medically accurate information regarding all abortion procedures that may be used;
 - (B) describes the gestational stages of an unborn child; and

and

217 (C) includes information regarding public and private services and agencies available 218 to assist her through pregnancy, at childbirth, and while the child is dependent, including 219 private and agency adoption alternatives; [and] 220 (ii) the printed material and a viewing of or a copy of the informational video shall be 221 provided to her free of charge; 222 (iii) medical assistance benefits may be available for prenatal care, childbirth, and 223 neonatal care, and that more detailed information on the availability of that assistance is 224 contained in the printed materials and the informational video published by the Department of 225 Health; 226 (iv) except as provided in Subsection (3)(b), the father of the unborn child is legally 227 required to assist in the support of her child, even in instances where he has offered to pay for 228 the abortion, and that the Office of Recovery Services within the Department of Human 229 Services will assist her in collecting child support. In the case of rape, this information may 230 be omitted]; and 231 (v) she has the right to view an ultrasound of the unborn child, at no expense to her, 232 upon her request; 233 (c) the information required to be provided to the pregnant woman under Subsection 234 (2)(a) is also provided by the physician who is to perform the abortion, in a face-to-face 235 consultation, prior to performance of the abortion, unless the attending or referring physician 236 [was] is the individual [providing] who provides the information required under Subsection 237 <u>(2)</u>(a); 238 (d) a copy of the printed materials published by the Department of Health has been 239 provided to the pregnant woman; 240 (e) the informational video, published by the Department of Health, has been provided 241 to the pregnant woman in accordance with Subsection $[\frac{(2)}{2}]$ (4); and 242 (f) the pregnant woman has certified in writing, prior to the abortion, that the 243 information required to be provided under Subsections (2)(a)[, (b), (c), (d), and] through (e) 244 was provided, in accordance with the requirements of those subsections. 245 (3) (a) The alternatives required to be provided under Subsection (2)(a)(i) shall include: 246 (i) a description of adoption services, including private and agency adoption methods;

248	(ii) a statement that it is legal for adoptive parents to financially assist in pregnancy and		
249	birth expenses.		
250	(b) The information described in Subsection (2)(b)(iv) may be omitted from the		
251	information required to be provided to a pregnant woman under this section if the woman is		
252	pregnant as the result of rape.		
253	[(2)] (4) When the informational video described in Section 76-7-305.5 is provided to a		
254	pregnant woman, the person providing the information shall first request that the woman view		
255	the video at that time or at another specifically designated time and location. If the woman		
256	chooses not to do so, a copy of the video shall be provided to her.		
257	$[\frac{3}{2}]$ When a serious medical emergency compels the performance of an abortion,		
258	the physician shall inform the woman prior to the abortion, if possible, of the medical		
259	indications supporting [his] the physician's judgment that an abortion is necessary.		
260	[(4)] (6) Any physician who violates the provisions of this section:		
261	(a) is guilty of unprofessional conduct as defined in Section 58-67-102 or 58-68-102[7];		
262	and [his license for the practice of medicine and surgery]		
263	(b) shall be subject to suspension or revocation of the physician's license for the		
264	practice of medicine and surgery in accordance with Sections 58-67-401 and 58-67-402, Utah		
265	Medical Practice Act, or Sections 58-68-401 and 58-68-402, Utah Osteopathic Medical		
266	Practice Act.		
267	[(5)] (7) A physician is not guilty of violating this section for failure to furnish any of		
268	the information described in Subsection [(1)] (2), if:		
269	(a) [he] the physician can demonstrate by a preponderance of the evidence that [he] the		
270	physician reasonably believed that furnishing the information would have resulted in a severely		
271	adverse effect on the physical or mental health of the pregnant woman;		
272	(b) in [his] the physician's professional judgment, the abortion was necessary to save		
273	the pregnant woman's life;		
274	(c) the pregnancy was the result of rape or rape of a child, as defined in Sections		
275	76-5-402 and 76-5-402.1;		
276	(d) the pregnancy was the result of incest, as defined in Subsection 76-5-406(10) and		
277	Section 76-7-102;		
278	(e) in his professional judgment the abortion was to prevent the birth of a child who		

- would have been born with grave defects; or
- (f) the pregnant woman was 14 years of age or younger.
- [(6)] (8) A physician who complies with the provisions of this section and Section

 76-7-304.5 may not be held civilly liable to [his] the physician's patient for failure to obtain

 informed consent under Section 78-14-5.
 - Section 5. Section **76-7-305.5** is amended to read:

76-7-305.5. Requirements for printed materials and informational video -- Annual report of Department of Health.

- (1) In order to insure that a woman's consent to an abortion is truly an informed consent, the Department of Health shall publish printed materials and produce an informational video in accordance with the requirements of this section. The department and each local health department shall make those materials and a viewing of the video available at no cost to any person. The printed material and the informational video shall be comprehensible and contain all of the following:
- (a) geographically indexed materials informing the woman of public and private services and agencies available to assist her, financially and otherwise, through pregnancy, at childbirth, and while the child is dependent, including services and supports available under Section 35A-3-308. Those materials shall contain a description of available adoption services, including a comprehensive list of the names, addresses, and telephone numbers of public and private agencies and private attorneys whose practice includes adoption, and explanations of possible available financial aid during the adoption process. The information regarding adoption services shall include the fact that private adoption is legal, and that the law permits adoptive parents to pay the costs of prenatal care, childbirth, and neonatal care. The printed information and video shall present adoption as a preferred and positive choice and alternative to abortion. The department may, at its option, include printed materials that describe the availability of a toll-free 24-hour telephone number that may be called in order to obtain, orally, the list and description of services, agencies, and adoption attorneys in the locality of the caller;
- (b) truthful and nonmisleading descriptions of the probable anatomical and physiological characteristics of the unborn child at two-week gestational increments from fertilization to full term, accompanied by pictures or video segments representing the

- development of an unborn child at those gestational increments. The descriptions shall include information about brain and heart function and the presence of external members and internal organs during the applicable stages of development. Any pictures used shall contain the dimensions of the fetus and shall be realistic and appropriate for that woman's stage of pregnancy. The materials shall be designed to convey accurate scientific information about an unborn child at the various gestational ages, and to convey the state's preference for childbirth over abortion;
- (c) truthful, nonmisleading descriptions of abortion procedures used in current medical practice at the various stages of growth of the unborn child, the medical risks commonly associated with each procedure, including those related to subsequent childbearing, the consequences of each procedure to the fetus at various stages of fetal development, the possible detrimental psychological effects of abortion, and the medical risks associated with carrying a child to term;
- (d) any relevant information on the possibility of an unborn child's survival at the two-week gestational increments described in Subsection (1)(b);
- (e) information on the availability of medical assistance benefits for prenatal care, childbirth, and neonatal care;
- (f) a statement conveying that it is unlawful for any person to coerce a woman to undergo an abortion;
- (g) a statement conveying that any physician who performs an abortion without obtaining the woman's informed consent or without according her a private medical consultation in accordance with the requirements of this section, may be liable to her for damages in a civil action at law;
 - (h) a statement conveying that the state of Utah prefers childbirth over abortion; and
- (i) information regarding the legal responsibility of the father to assist in child support, even in instances where he has agreed to pay for an abortion, including a description of the services available through the Office of Recovery Services, within the Department of Human Services, to establish and collect that support.
- (2) (a) The materials described in Subsection (1) shall be produced and printed in a way that conveys the state's preference for childbirth over abortion.
 - (b) The printed material described in Subsection (1) shall be printed in a typeface large

enough to be clearly legible.

- (3) Every facility in which abortions are performed shall immediately provide the printed informed consent materials and a viewing of or a copy of the informational video described in Subsection (1) to any patient or potential patient prior to the performance of an abortion, unless the patient's attending or referring physician certifies in writing that he reasonably believes that provision of the materials or video to that patient would result in a severely adverse effect on her physical or mental health.
- (4) The Department of Health shall produce a standardized videotape that may be used statewide, containing all of the information described in Subsection (1), in accordance with the requirements of that subsection and Subsection (2). In preparing the video, the department may summarize and make reference to the printed comprehensive list of geographically indexed names and services described in Subsection (1)(a). The videotape shall, in addition to the information described in Subsection (1), show an ultrasound of the heart beat of an unborn child at three weeks gestational age, at six to eight weeks gestational age, and each month thereafter, until 14 weeks gestational age. That information shall be presented in a truthful, nonmisleading manner designed to convey accurate scientific information, the state's preference for childbirth over abortion, and the positive aspects of adoption.
- (5) The Department of Health and local health departments shall provide ultrasounds in accordance with the provisions of Subsection 76-7-305[(1)](2)(b), at no expense to the pregnant woman.
- (6) The Department of Health shall compile and report the following information annually, preserving physician and patient anonymity:
- (a) the total amount of informed consent material described in Subsection (1) that was distributed;
- (b) the number of women who obtained abortions in this state without receiving those materials;
- (c) the number of statements signed by attending physicians certifying to his opinion regarding adverse effects on the patient under Subsection (3); and
- (d) any other information pertaining to protecting the informed consent of women seeking abortions.
 - (7) The Department of Health shall annually report to the Health and Human Services

372	Interim Committee regarding the information described in Subsection (6), and provide a copy
373	of the printed materials and the videotape produced in accordance with this section to that
374	committee.
375	Section 6. Section 76-7-315 is amended to read:
376	76-7-315. Exceptions to certain requirements in serious medical emergencies.
377	When due to a serious medical emergency, time does not permit compliance with
378	Section 76-7-302, [76-7-304,] 76-7-305, 76-7-305.5, or 76-7-310.5 the provisions of those
379	sections do not apply.
380	Section 7. Section 78-14-5 is amended to read:
381	78-14-5. Failure to obtain informed consent Proof required of patient
382	Defenses Consent to health care.
383	(1) When a person submits to health care rendered by a health care provider, it shall be
384	presumed that what the health care provider did was either expressly or impliedly authorized to
385	be done. For a patient to recover damages from a health care provider in an action based upon
386	the provider's failure to obtain informed consent, the patient must prove the following:
387	(a) that a provider-patient relationship existed between the patient and health care
388	provider;
389	(b) the health care provider rendered health care to the patient;
390	(c) the patient suffered personal injuries arising out of the health care rendered;
391	(d) the health care rendered carried with it a substantial and significant risk of causing
392	the patient serious harm;
393	(e) the patient was not informed of the substantial and significant risk;
394	(f) a reasonable, prudent person in the patient's position would not have consented to
395	the health care rendered after having been fully informed as to all facts relevant to the decision
396	to give consent. In determining what a reasonable, prudent person in the patient's position
397	would do under the circumstances, the finder of fact shall use the viewpoint of the patient
398	before health care was provided and before the occurrence of any personal injuries alleged to
399	have arisen from said health care; and
400	(g) the unauthorized part of the health care rendered was the proximate cause of
401	personal injuries suffered by the patient.

(2) It shall be a defense to any malpractice action against a health care provider based

upon alleged failure to obtain informed consent if:

- (a) the risk of the serious harm which the patient actually suffered was relatively minor;
- (b) the risk of serious harm to the patient from the health care provider was commonly known to the public;
- (c) the patient stated, prior to receiving the health care complained of, that he would accept the health care involved regardless of the risk; or that he did not want to be informed of the matters to which he would be entitled to be informed:
- (d) the health care provider, after considering all of the attendant facts and circumstances, used reasonable discretion as to the manner and extent to which risks were disclosed, if the health care provider reasonably believed that additional disclosures could be expected to have a substantial and adverse effect on the patient's condition; or
- (e) the patient or his representative executed a written consent which sets forth the nature and purpose of the intended health care and which contains a declaration that the patient accepts the risk of substantial and serious harm, if any, in hopes of obtaining desired beneficial results of health care and which acknowledges that health care providers involved have explained his condition and the proposed health care in a satisfactory manner and that all questions asked about the health care and its attendant risks have been answered in a manner satisfactory to the patient or his representative; such written consent shall be a defense to an action against a health care provider based upon failure to obtain informed consent unless the patient proves that the person giving the consent lacked capacity to consent or shows by clear and convincing proof that the execution of the written consent was induced by the defendant's affirmative acts of fraudulent misrepresentation or fraudulent omission to state material facts.
- (3) Nothing contained in this act shall be construed to prevent any person 18 years of age or over from refusing to consent to health care for his own person upon personal or religious grounds.
- (4) [The] Except as provided in Section 76-7-304.5, the following persons are authorized and empowered to consent to any health care not prohibited by law:
 - (a) any parent, whether an adult or a minor, for [his] the parent's minor child;
- (b) any married person, for a spouse;
- 433 (c) any person temporarily standing in loco parentis, whether formally serving or not,

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434	for the minor under [his] that person's care and any guardian for [his] the guardian's ward;
435	(d) any person 18 years of age or over for [his or her] that person's parent who is unable
436	by reason of age, physical or mental condition, to provide such consent;
437	(e) any patient 18 years of age or over;
438	(f) any female regardless of age or marital status, when given in connection with her
439	pregnancy or childbirth;
440	(g) in the absence of a parent, any adult for [his] the adult's minor brother or sister; and
441	(h) in the absence of a parent, any grandparent for [his] the grandparent's minor
442	grandchild.
443	(5) No person who in good faith consents or authorizes health care treatment or
444	procedures for another as provided by this act shall be subject to civil liability.

State Impact

Due to the possibility of more minors seeking court consent, this bill will require \$31,500 in ongoing General Fund for the Courts.

	FY 2007 Approp.	FY 2008 Approp.	FY 2007 Revenue	FY 2008 Revenue
General Fund	\$31,500	\$31,500	\$0	\$0
TOTAL	\$31,500	\$31,500	\$0	\$0

Individual and Business Impact

No fiscal impact.

Office of the Legislative Fiscal Analyst