

## **Reproductive Health Policy**

### **Purpose**

Provide general guidance in the area of reproductive health, which aligns with the mission of Astria Health and complies with RCW 09.160, WAC 246-320-370, & WAC 182-531-1550.

### **Audience**

Emergency Department Staff

### **Key Concepts and Terms**

- Emergency Contraception: A birth control method to prevent pregnancy in women.
- Sterilization: Any medical procedure, treatment or operation for the purpose of rendering a client permanently incapable of reproducing.
- Tubal Litigation: A form of Sterilization. Procedure where the fallopian tubes are cut or blocked to permanently prevent pregnancy.
- EDD: Estimated Date of Delivery.

### **Policy**

1. Astria Toppenish Hospital supports the hospital's obligations under WAC 246-320-370 for emergency contraception provisions for sexual assault victims. The Emergency Department (ED) must provide emergency contraception as a treatment option to any woman who seeks treatments as a result of a sexual assault. The ED provider must provide each patient with medically and factually accurate and unbiased written and oral information about emergency contraception per state law.
2. If a patient seeks non-emergent medical care not offered at Astria Toppenish Hospital, staff will provide referral assistance to obtain the requested medical care.
3. Tubal Ligations or bilateral salpingectomies are performed at Astria Toppenish under the following conditions.

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- The patient is at minimum, eighteen years of age when consent form is signed.
  - The patient is deemed a mentally competent individual.
  - The patient has voluntarily given informed consent.
4. Consent must be signed at least 30 days and not more than 180 days before the date of the sterilization procedure.
  5. The physician must complete and sign the physician statement on the consent form within 30 days of the sterilization procedure.
  6. A 72-hour waiting period rather than the usual 30-day waiting period for a sterilization is allowed in either of the following cases:
    - At the time of premature delivery when the patient gave consent at least 30 days before the expected date of delivery. The EDD must be documented on the consent form.
    - For emergency abdominal surgery. The nature of the emergency must be documented on the consent form.
  7. The 30-day consent waiting period for sterilization will be waived when the patient requests that the sterilization procedure be performed at the time of delivery. The patient must complete a sterilization consent form only in the following situations:
    - Patient did not obtain medical care until the last month of pregnancy.
    - Patient was a substance abuser during pregnancy, but is not using alcohol or illegal drugs at the time of delivery.
  8. Sterilization Consents will NOT be accepted when the patient is:
    - In labor or childbirth
    - Under the influence of alcohol or other substances, including pain medication for labor and delivery, that affects the patients state of awareness.
  9. Patients who have previously signed consent for sterilization may change their mind at any time and not go through with the procedure.

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10. If a patient states she does not want the sterilization procedure, the sterilization consent is to be considered voided.
11. If the patient later states that she does want sterilization procedure, a new sterilization consent should be completed and the required waiting period starts over.

### Related Documents

Collection Procedure Sexual Assault Exam  
 Scope of Service Guidelines

### References

1. RCW 9.02
2. WAC 246-320-370
3. WAC 182-531-1550

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