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## HOUSE BILL NO. 1543

## AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the House Committee on Health, Welfare and Institutions  
on January 29, 2008)

(Patron Prior to Substitute—Delegate Janis)

A BILL to amend the Code of Virginia by adding in Title 32.1 a chapter numbered 5.3, consisting of sections numbered 32.1-162.23 through 32.1-162.25, relating to surgical complications reporting; penalty.

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding in Title 32.1 a chapter numbered 5.3, consisting of sections numbered 32.1-162.23 through 32.1-162.25, as follows:

## CHAPTER 5.3.

## SURGICAL COMPLICATIONS REPORTING.

§ 32.1-162.23. Definitions.

As used in this chapter:

"Department" means the Department of Health.

"Elective outpatient surgical procedure" means any surgical procedure that is not medically necessary and is performed on an outpatient basis.

"Medical treatment" means, but is not limited to, hospitalization, laboratory tests, surgery, or prescription of drugs.

"Physician report" means the report required under § 32.1-162.24.

§ 32.1-162.24. Physician report required.

A. A physician shall file a report, in writing or by electronic means, with the Department regarding each patient who comes under the physician's professional care and requires medical treatment or suffers death that the attending physician has a reasonable basis to believe is the result of an elective outpatient surgical procedure as defined in this chapter.

B. The report shall be submitted within 45 days of the discharge or death of the patient treated for the complication and shall contain all information required pursuant to § 32.1-162.25 that is available to the physician.

C. The physician report shall not contain the patient's name, social security number, or any other common identifiers that would make it possible to discern the patient's identity.

§ 32.1-162.25. Contents of report.

A. Each physician report required under this chapter shall contain the following information:

1. The type of elective procedure that was performed;

2. The patient's age and race;

3. The patient's residency status, including city, county, or town of residence;

4. The date the procedure was performed;

5. The date on which the complication was diagnosed;

6. The name and type of facility where the procedure was performed;

7. The condition of the patient that led to treatment, including, but not limited to, hemorrhage, damage to major organs, renal failure, metabolic disorder, shock, embolism, coma, or death; and

8. The type of anesthetic, if any, used for each procedure.

B. Nothing in this chapter shall be construed as an instruction to discontinue collecting data currently being collected.

C. The identity of the physician submitting a report under this section shall not be required as part of the report under this section.

2. That the Bureau of Vital Statistics shall develop a form to be used for reporting information as required by § 32.1-162.24.

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