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SENATE JOINT RESOLUTION NO. 313

Offered January 23, 1995

Establishing a joint subcommittee to study issues regarding informed consent to medical procedures and treatment.

Patrons—Woods, Benedetti, Calhoun, Chichester, Howell and Lucas; Delegates: Christian, Connally, Cranwell, Crittenden, Darner, Davies, Diamonstein, Keating, Mayer, Miller, Puller, Rhodes, Van Landingham and Wilkins

Referred to the Committee on Rules

WHEREAS, the Commonwealth has an interest in ensuring that citizens receiving medical care make well-informed choices about care based on accurate and complete medical information; and

WHEREAS, current state statutes regarding informed consent for medical procedures impose different standards and requirements for different procedures; and

WHEREAS, language, cultural barriers or disabilities may make it difficult to communicate effectively with some patients thereby discouraging patients from seeking care or understanding the choices about care that must be made; and

WHEREAS, consistent with standard medical practice, informed consent should be tailored specifically to the needs of each patient; and

WHEREAS, the Commonwealth must be sensitive to free speech rights of those in the medical profession; and

WHEREAS, any regulation of informed consent should have a positive effect on the provision of medical services, the doctor-patient relationship, and the well-being of patients; now, therefore, be it

RESOLVED by the Senate, the House of Delegates concurring, That a joint subcommittee be established to study issues regarding informed consent to medical procedures and treatment. The joint subcommittee shall be composed of 12 members to be appointed as follows: two members of the Senate, to be appointed by the Senate Committee on Privileges and Elections; three members of the House of Delegates, to be appointed by the Speaker; one physician chosen by the Medical Society of Virginia; one physician chosen by the Old Dominion Medical Society; one individual chosen by the Virginia Breast Cancer Foundation; one individual chosen by the American Heart Association of Virginia; one individual chosen by the Cancer Society of Virginia; one attorney chosen by the Virginia Trial Lawyers Association; and one individual chosen by the Virginia Defense Attorneys Association.

The joint subcommittee shall study the current law and professional practices in the Commonwealth regarding informed consent, including, but not limited to, statutes, regulations and court decisions; current practices by health care practitioners in obtaining informed consent; the impact on the health and well-being of patients of any mandatory delays in the treatment process mandated by informed consent requirements; the effectiveness in improving informed consent of explicit legislative or regulatory requirements and criminal and civil penalties for failure to comply; the availability of, and attendance by Virginia practitioners at, continuing medical education courses on the topic of informed consent generally, or for specific procedures or courses of treatment; current practices within medical schools and other institutions providing advanced degrees for medical professionals within the Commonwealth relating to the instruction and the teaching of practical skills for obtaining informed consent; whether language, cultural barriers, or disabilities currently affect the ability of health care professionals to obtain informed consent in some circumstances, and the need for training to overcome these problems; and the fiscal impact, if any, in those states that require the development and distribution of written materials, videos, or telephonic information as part of the informed consent process for certain procedures.

The direct costs of this study shall not exceed \$7,250.

The Division of Legislative Services shall provide staff support for the study. All agencies of the Commonwealth shall provide assistance to the joint subcommittee, upon request.

The joint subcommittee shall complete its work in time to submit its findings and recommendations to the Governor and the 1996 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for processing legislative documents.

Implementation of this resolution is subject to subsequent approval and certification by the Joint Rules Committee. The Committee may withhold expenditures or delay the period for the conduct of the study.

INTRODUCED

SJ313