

Senator J. Stuart Adams proposes the following substitute bill:

ADMINISTRATION OF ANESTHESIA AMENDMENTS

2017 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Michael S. Kennedy

Senate Sponsor: J. Stuart Adams

LONG TITLE

General Description:

This bill amends professional licensing acts in the Division of Occupational and Professional Licensing Act to require informed consent and certain patient monitoring of patients who are sedated and establishes a database for adverse events.

Highlighted Provisions:

This bill:

- ▶ requires the Department of Health to:
 - create a database of adverse events from the administration of sedation or anesthesia in outpatient settings; and
 - publish a report regarding the number of adverse events by types of provider and facility and submit a yearly report to the Health and Human Services Interim Committee;
- ▶ requires a health care provider who administers sedation intravenously to a patient in an outpatient setting that is not an emergency department:
 - to obtain informed consent from the patient; and
 - to report adverse events from the sedation or anesthesia to the Department of Health;
- ▶ makes it unprofessional conduct to fail to report an adverse event from outpatient



sedation or anesthesia;

- provides whistle blower protections to a health care provider who reports an adverse event; and

- requires a health care provider who administers sedation or anesthesia intravenously to have access to a crash cart during the anesthesia procedure.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

63I-1-226, as last amended by Laws of Utah 2016, Chapters 89, 170, 279, and 327

63I-1-258, as last amended by Laws of Utah 2016, Chapters 89 and 294

ENACTS:

26-1-40, Utah Code Annotated 1953

58-5a-502, Utah Code Annotated 1953

58-31b-502.5, Utah Code Annotated 1953

58-67-502.5, Utah Code Annotated 1953

58-68-502.5, Utah Code Annotated 1953

58-69-502.5, Utah Code Annotated 1953

Be it enacted by the Legislature of the state of Utah:

Section 1. Section **26-1-40** is enacted to read:

26-1-40. Reports of anesthesia adverse events- whistle blower protections.

(1) (a) Beginning January 1, 2018, the department shall create a database of deaths and adverse events from the administration of sedation or anesthesia in outpatient settings that are not emergency departments in the state.

(b) The database required by Subsection (1)(a) shall include reports submitted by health care providers under Sections **58-5a-502**, **58-31b-502.5**, **58-67-502.5**, **58-68-502.5**, and **58-69-502.5**.

(2) The department shall adopt administrative rules under Title 63G, Chapter 3, Utah

Administrative Rulemaking Act, regarding:

(a) the format of the reports; and

(b) what constitutes a reportable adverse event, which shall include at least the administration of intravenous sedation or anesthesia when there is:

(i) an escalation of care required for the patient; or

(ii) a rescue of a patient from a deeper level of sedation than was intended.

(3) (a) Information the department receives under this section that identifies a particular individual is subject to Title 63G, Chapter 2, Government Records Access and Management Act, and the federal Health Insurance Portability and Accountability Act of 1996.

(b) Beginning July 1, 2018, and on or before July 1 of each year thereafter, the department shall:

(i) publicly report:

(A) the number of deaths and adverse events reported under Subsection (1);

(B) the type of health care providers, by license category and specialty, who submitted reports under Subsection (1) and who administered the sedation or anesthesia that resulted in an adverse event; and

(C) the type of facility in which the death or adverse event took place; and

(ii) submit a report to the Health and Human Services Interim Committee with the information required by this Subsection (3).

(4) An employer of a health care provider who submits a report under this section may not take an adverse employment action against the reporting health care provider if the employment action is based on the provider submitting a report under this section.

(5) (a) This section sunsets in accordance with Section [631-1-226](#).

(b) The sunset review of this section shall include an analysis of:

(i) the number and types of adverse events reported under this section;

(ii) the types of health care providers and locations involved in the adverse events;

(iii) the adequacy of sedation and anesthesia requirements in Sections [58-5a-502](#), [58-31b-502.5](#), [58-67-502.5](#), [58-68-502.5](#), and [58-69-502.5](#) related to the adverse events reported under this section; and

(iv) the adequacy of the reporting requirements under this section and the need for additional protections for health care providers who report events under this section.

Section 2. Section **58-5a-502** is enacted to read:

Part 5. Unprofessional and Unlawful Conduct -- Penalties

58-5a-502. Unprofessional conduct.

In addition to unprofessional conduct as defined in Section [58-5a-102](#), it is unprofessional conduct for an individual licensed under this chapter to administer sedation or anesthesia intravenously to a patient in an outpatient setting that is not an emergency department without:

(1) first obtaining consent from the patient in writing, which shall include:

(a) the type of sedation or anesthesia being administered;

(b) the identity and type of license or permit under this title of the person who is performing the procedure for which the sedation or anesthesia will be administered;

(c) the identity and type of license or permit under this title of the person who will be administering the sedation or anesthesia; and

(d) monitoring that will occur during the sedation or anesthesia, including monitoring of the patient's oxygenation, ventilation and circulation;

(2) reporting any adverse event under Section [26-1-40](#); and

(3) having access during the procedure to an advanced cardiac life support crash cart with equipment that is regularly maintained according to guidelines established by the American Heart Association.

Section 3. Section **58-31b-502.5** is enacted to read:

58-31b-502.5. Anesthesia and sedation -- Unprofessional conduct.

In addition to unprofessional conduct as defined in Section [58-31b-502](#), it is unprofessional conduct for an individual licensed under this chapter to administer sedation or anesthesia intravenously to a patient in an outpatient setting that is not an emergency department without:

(1) first obtaining consent from the patient in writing, which shall include:

(a) the type of sedation or anesthesia being administered;

(b) the identity and type of license or permit under this title of the person who is performing the procedure for which the sedation or anesthesia will be administered;

(c) the identity and type of license or permit under this title of the person who will be administering the sedation or anesthesia; and

(d) monitoring that will occur during the sedation or anesthesia, including monitoring the patient's oxygenation, ventilation and circulation;

(2) reporting any adverse event under Section 26-1-40; and

(3) having access during the procedure to an advanced cardiac life support crash cart with equipment that is regularly maintained according to guidelines established by the American Heart Association.

Section 4. Section **58-67-502.5** is enacted to read:

58-67-502.5. Anesthesia and sedation -- Unprofessional conduct.

In addition to unprofessional conduct as defined in Section 58-67-502, it is unprofessional conduct for an individual licensed under this chapter to administer sedation or anesthesia intravenously to a patient in an outpatient setting that is not an emergency department without:

(1) first obtaining consent from the patient in writing, which shall include:

(a) the type of sedation or anesthesia being administered;

(b) the identity and type of license or permit under this title of the person who is performing the procedure for which the sedation or anesthesia will be administered;

(c) the identity and type of license or permit under this title of the person who will be administering the sedation or anesthesia; and

(d) monitoring that will occur during the sedation or anesthesia, including monitoring of the patient's oxygenation, ventilation and circulation;

(2) reporting any adverse event under Section 26-1-40; and

(3) having access during the procedure to an advanced cardiac life support crash cart with equipment that is regularly maintained according to guidelines established by the American Heart Association.

Section 5. Section **58-68-502.5** is enacted to read:

58-68-502.5. Anesthesia and sedation -- Unprofessional conduct.

In addition to unprofessional conduct as defined in Section 58-68-502, it is unprofessional conduct for an individual licensed under this chapter to administer sedation or anesthesia intravenously to a patient in an outpatient setting that is not an emergency department without:

(1) first obtaining consent from the patient in writing, which shall include:

(a) the type of sedation or anesthesia being administered;

(b) the identity and type of license or permit under this title of the person who is performing the procedure for which the sedation or anesthesia will be administered;

(c) the identity and type of license or permit under this title of the person who will be administering the sedation or anesthesia; and

(d) monitoring that will occur during the sedation or anesthesia, including monitoring of the patient's oxygenation, ventilation and circulation;

(2) reporting any adverse event under Section 26-1-40; and

(3) having access during the procedure to an advanced cardiac life support crash cart with equipment that is regularly maintained according to guidelines established by the American Heart Association.

Section 6. Section **58-69-502.5** is enacted to read:

58-69-502.5. Anesthesia and sedation -- Unprofessional conduct.

In addition to unprofessional conduct as defined in Section 58-68-502, it is unprofessional conduct for an individual licensed under this chapter to administer sedation or anesthesia intravenously to a patient in an outpatient setting that is not an emergency department without:

(1) first obtaining consent from the patient in writing, which shall include:

(a) the type of sedation or anesthesia being administered;

(b) the identity and type of license or permit under this title of the person who is performing the procedure for which the sedation or anesthesia will be administered;

(c) the identity and type of license or permit under this title of the person who will be administering the sedation or anesthesia; and

(d) monitoring that will occur during the sedation or anesthesia, including monitoring of the patient's oxygenation, ventilation and circulation;

(2) reporting any adverse event under Section 26-1-40; and

(3) having access during the procedure to an advanced cardiac life support crash cart with equipment that is regularly maintained according to guidelines established by the American Heart Association.

Section 7. Section **63I-1-226** is amended to read:

63I-1-226. Repeal dates, Title 26.

(1) Section ~~26-1-40~~ is repealed July 1, 20 ~~21~~ **19** ~~20~~ .

~~[(1)]~~ (2) Title 26, Chapter 9f, Utah Digital Health Service Commission Act, is repealed July 1, 2025.

~~[(2)]~~ (3) Section ~~26-10-11~~ is repealed July 1, 2020.

~~[(3)]~~ (4) Section ~~26-21-23~~, Licensing of non-Medicaid nursing care facility beds, is repealed July 1, 2018.

~~[(4)]~~ (5) Title 26, Chapter 33a, Utah Health Data Authority Act, is repealed July 1, 2024.

~~[(5)]~~ (6) Title 26, Chapter 36a, Hospital Provider Assessment Act, is repealed July 1, 2019.

~~[(6)]~~ (7) Title 26, Chapter 36b, Inpatient Hospital Assessment Act, is repealed July 1, 2021.

~~[(7)]~~ (8) Section ~~26-38-2.5~~ is repealed July 1, 2017.

~~[(8)]~~ (9) Section ~~26-38-2.6~~ is repealed July 1, 2017.

~~[(9) Title 26, Chapter 52, Autism Treatment Account, is repealed July 1, 2016.]~~

(10) Title 26, Chapter 56, Hemp Extract Registration Act, is repealed July 1, 2021.

Section 8. Section **63I-1-258** is amended to read:

63I-1-258. Repeal dates, Title 58.

(1) Title 58, Chapter 13, Health Care Providers Immunity from Liability Act, is repealed July 1, 2026.

(2) Title 58, Chapter 15, Health Facility Administrator Act, is repealed July 1, 2025.

(3) Title 58, Chapter 20a, Environmental Health Scientist Act, is repealed July 1, 2018.

(4) Section ~~58-37-4.3~~ is repealed July 1, 2021.

(5) Title 58, Chapter 40, Recreational Therapy Practice Act, is repealed July 1, 2023.

(6) Title 58, Chapter 41, Speech-Language Pathology and Audiology Licensing Act, is repealed July 1, 2019.

(7) Title 58, Chapter 42a, Occupational Therapy Practice Act, is repealed July 1, 2025.

(8) Title 58, Chapter 46a, Hearing Instrument Specialist Licensing Act, is repealed July 1, 2023.

(9) Title 58, Chapter 47b, Massage Therapy Practice Act, is repealed July 1, 2024.

(10) Title 58, Chapter 61, Part 7, Behavior Analyst Licensing Act, is repealed July 1,

212 2026.

213 (11) Title 58, Chapter 72, Acupuncture Licensing Act, is repealed July 1, 2017.

214 (12) Title 58, Chapter 86, State Certification of Commercial Interior Designers Act, is
215 repealed July 1, 2021.

216 (13) The following sections are repealed on July 1, 20 ~~Ŝ~~→ ~~[24]~~ 19 ←~~Ŝ~~ :

217 (a) Section [58-5a-502](#);

218 (b) Section [58-31b-502.5](#);

219 (c) Section [58-67-502.5](#);

220 (d) Section [58-68-502.5](#); and

221 (e) Section [58-69-502.5](#).