

Senate Bill 1027

Sponsored by Senator MONNES ANDERSON

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Allows certain health care practitioner who receives needlestick injury during provision of medical care to patient who is unconscious or otherwise unable to consent to test patient for human immunodeficiency virus for purpose of determining necessary course of treatment for health care practitioner.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT

Relating to health care practitioners; and prescribing an effective date.

Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) As used in this section:

(a) **"Health care practitioner"** means a person who provides medical care in an emergency setting and who is:

(A) **An emergency medical services provider licensed under ORS chapter 682;**

(B) **A physician licensed under ORS chapter 677; or**

(C) **A nurse licensed under ORS 678.010 to 678.410.**

(b) **"Needlestick injury"** means a wound caused by a needle puncturing the skin.

(2) **Notwithstanding ORS 431A.570, a health care practitioner who receives a needlestick injury during the emergency treatment of a patient who is unconscious or otherwise unable to consent may, in compliance with this section, perform a blood draw on the patient for the purpose of testing the blood to determine whether the patient is positive for human immunodeficiency virus and determine any necessary resultant treatment for the health care practitioner.**

(3) **A blood draw described in subsection (2) of this section may be performed if:**

(a) **The patient is not expected to regain consciousness or the ability to consent in the amount of time necessary for the health care practitioner to receive appropriate medical treatment;**

(b) **There is no other person immediately available who is able to consent on behalf of the patient; and**

(c) **The health care practitioner will benefit medically from knowing the results of a test described under subsection (2) of this section.**

(4) **A test performed under this section must be anonymous.**

(5) **The patient, or patient's legal guardian, must be informed of the blood draw and the test results.**

(6) **The results of a test described in subsection (2) of this section may not be:**

(a) **Made available to law enforcement agencies;**

(b) **Made available to any person other than the health care practitioner, the individual**

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 **who performs the test and the patient or the patient's legal guardian; or**

2 **(c) Included in the medical record of the health care practitioner or the patient.**

3 **(7) The patient, or the patient's health insurer, may not be charged for the cost of per-**
4 **forming a test under this section.**

5 **(8) The Oregon Health Authority may adopt rules to carry out this section.**

6 **SECTION 2. (1) Section 1 of this 2019 Act becomes operative on January 1, 2020.**

7 **(2) The Oregon Health Authority may take any action before the operative date specified**
8 **in subsection (1) of this section that is necessary to enable the authority to exercise, on and**
9 **after the operative date specified in subsection (1) of this section, all of the duties, functions**
10 **and powers conferred on the authority by section 1 of this 2019 Act.**

11 **SECTION 3. This 2019 Act takes effect on the 91st day after the date on which the 2019**
12 **regular session of the Eightieth Legislative Assembly adjourns sine die.**

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