1	STATE OF OKLAHOMA
2	2nd Session of the 56th Legislature (2018)
3	SENATE BILL 1432 By: Dahm
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6	AS INTRODUCED
7	An Act relating to medical and behavioral health
8	treatment; amending 10A O.S. 2011, Section 1-3-102, which relates to medical care and treatment; adding certain exclusion to definition; and providing an
9	effective date.
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12	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
13	SECTION 1. AMENDATORY 10A O.S. 2011, Section 1-3-102, is
14	amended to read as follows:
15	Section 1-3-102. A. For purposes of this section:
16	1. "Routine and ordinary medical care and treatment" includes
17	any necessary medical and dental examinations and treatment, medical
18	screenings, clinical laboratory tests, blood testing, preventative
19	care, health assessments, physical examinations, immunizations,
20	contagious or infectious disease screenings or tests and care
21	required for treatment of illness and injury, including x-rays,
22	stitches and casts, or the provision of psychotropic medications but
23	does not include any type of extraordinary care or administration of
24	any immunization; and

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2. "Extraordinary medical care and treatment" includes, but is not limited to, surgery, general anesthesia, blood transfusions, or invasive or experimental procedures.

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- B. If a child taken into protective custody without a court order requires emergency medical care prior to the emergency custody hearing, and either the treatment is related to the suspected abuse or neglect or the parent or legal guardian is unavailable or unwilling to consent to treatment recommended by a physician, a peace officer, court employee or the court may authorize such treatment as is necessary to safeguard the health or life of the child. Before a peace officer, court employee or the court authorizes treatment based on unavailability of the parent or legal guardian, law enforcement shall exercise diligence in locating the parent or guardian, if known.
- C. 1. If a child has been placed in the custody of the Department of Human Services, the Department shall have the authority to consent to routine and ordinary medical care and treatment. The Department shall make reasonable attempts to notify the child's parent or legal guardian of the provision of routine and ordinary medical care and treatment and to keep the parent or legal guardian involved in such care.
- 2. In no case shall the Department consent to a child's abortion, sterilization, termination of life support or a "Do Not Resuscitate" order. The court may authorize the withdrawal of life-

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sustaining medical treatment or the denial of the administration of cardiopulmonary resuscitation on behalf of a child in the

Department's custody upon the written recommendation of a licensed physician, after notice to the parties and a hearing.

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- 3. Nothing herein shall prevent the Department from authorizing, in writing, any person, foster parent or administrator of a facility into whose care a child in its custody has been entrusted, to consent to routine and ordinary medical care and treatment to be rendered to a child upon the advice of a licensed physician, including the continuation of psychotropic medication.
- D. Consent for a child's extraordinary medical care and treatment shall be obtained from the parent or legal guardian unless the treatment is either related to the abuse or neglect or the parent or legal guardian is unavailable or refuses to consent to such care, in which case in an emergency, based upon recommendation of a physician, the court may enter an ex parte order authorizing such treatment or procedure in order to safeguard the child's health or life. If the recommended extraordinary medical care and treatment is not an emergency, the court shall hold a hearing, upon application by the district attorney and notice to all parties, and may authorize such recommended extraordinary care.
- E. If a child has been placed in the custody of a person, other than a parent or legal guardian, or an institution or agency other than the Department, the court shall determine the authority of the

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person, institution, or agency to consent to medical care including
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    routine and ordinary medical care and treatment and extraordinary
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    care. The parent, legal guardian, or person having legal custody
    shall be responsible for the costs of medical care as determined by
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    the court.
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        SECTION 2. This act shall become effective November 1, 2018.
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