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THE GENERAL ASSEMBLY OF PENNSYLVANIA

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HOUSE BILL

No. 1580 Session of  
2019

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INTRODUCED BY SCHEMEL, MOUL, LAWRENCE AND TURZAI, JUNE 7, 2019

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REFERRED TO COMMITTEE ON HEALTH, JUNE 7, 2019

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AN ACT

1 Amending the act of March 20, 2002 (P.L.154, No.13), entitled  
2 "An act reforming the law on medical professional liability;  
3 providing for patient safety and reporting; establishing the  
4 Patient Safety Authority and the Patient Safety Trust Fund;  
5 abrogating regulations; providing for medical professional  
6 liability informed consent, damages, expert qualifications,  
7 limitations of actions and medical records; establishing the  
8 Interbranch Commission on Venue; providing for medical  
9 professional liability insurance; establishing the Medical  
10 Care Availability and Reduction of Error Fund; providing for  
11 medical professional liability claims; establishing the Joint  
12 Underwriting Association; regulating medical professional  
13 liability insurance; providing for medical licensure  
14 regulation; providing for administration; imposing penalties;  
15 and making repeals," in medical professional liability,  
16 further providing for informed consent.

17 The General Assembly of the Commonwealth of Pennsylvania  
18 hereby enacts as follows:

19 Section 1. Section 504 of the act of March 20, 2002  
20 (P.L.154, No.13), known as the Medical Care Availability and  
21 Reduction of Error (Mcare) Act, is amended to read:

22 Section 504. Informed consent.

23 (a) Duty of physicians.--Except in emergencies, a physician  
24 owes a duty, which may be fulfilled by the physician or the  
25 physician's qualified practitioner as provided in subsection

1 (b), to a patient to obtain the informed consent of the patient  
2 or the patient's authorized representative prior to conducting  
3 the following procedures:

4 (1) Performing surgery, including the related  
5 administration of anesthesia.

6 (2) Administering radiation or chemotherapy.

7 (3) Administering a blood transfusion.

8 (4) Inserting a surgical device or appliance.

9 (5) Administering an experimental medication, using an  
10 experimental device or using an approved medication or device  
11 in an experimental manner.

12 (b) [~~Description of procedure.--~~] Requirements to obtain  
13 informed consent.--

14 (1) Consent is informed if the patient or the patient's  
15 authorized representative has been given a description of a  
16 procedure set forth in subsection (a) and the risks and  
17 alternatives that a reasonably prudent patient would require  
18 to make an informed decision as to that procedure. [~~The~~]

19 (2) A physician may delegate the task of obtaining the  
20 informed consent of the physician's patient or the patient's  
21 authorized representative to a qualified practitioner for a  
22 procedure provided in subsection (a) performed by a physician  
23 or qualified practitioner.

24 (3) If a claim for failure to obtain informed consent is  
25 alleged, the physician or qualified practitioner shall be  
26 entitled to present evidence of the description of that  
27 procedure and those risks and alternatives that a physician  
28 or qualified practitioner, acting in accordance with accepted  
29 medical standards of medical practice, would provide.

30 (b.1) Information to obtain informed consent.--

1           (1) A physician or qualified practitioner performing a  
2 procedure enumerated under subsection (a) may rely on  
3 information provided by another qualified practitioner to  
4 obtain the informed consent of the patient or the patient's  
5 authorized representative.

6           (2) Information provided by another qualified  
7 practitioner under paragraph (1) shall be competent evidence  
8 in a proceeding in which it is alleged that a physician or  
9 qualified practitioner performing a procedure under  
10 subsection (a) failed to obtain informed consent.

11       (c) Expert testimony.--Expert testimony is required to  
12 determine whether the procedure constituted the type of  
13 procedure set forth in subsection (a) and to identify the risks  
14 of that procedure, the alternatives to that procedure and the  
15 risks of these alternatives.

16       (d) Liability.--

17           (1) [A physician is liable] Liability under this section  
18 for failure to obtain the informed consent may be established  
19 only if the patient proves that receiving such information  
20 would have been a substantial factor in the patient's  
21 decision whether to undergo a procedure set forth in  
22 subsection (a).

23           (2) [A physician may be held liable] Liability may be  
24 established under this section for failure to seek a  
25 patient's informed consent if the physician or qualified  
26 practitioner knowingly misrepresents to the patient [his or  
27 her] the professional credentials, training or experience[.]  
28 of the physician or qualified practitioner who performs the  
29 procedure.

30       (e) Human research exception.--The requirement under this

1 section shall be deemed satisfied if informed consent is  
2 obtained for human research conducted pursuant to approval by an  
3 institutional review board or similar entity in accordance with  
4 applicable Federal law and regulation.

5 (f) Applicability.--A physician or qualified practitioner  
6 performing a procedure enumerated under subsection (a) shall not  
7 be required to obtain a separate or new informed consent from  
8 the patient or the patient's authorized representative if  
9 informed consent was already obtained by the physician or  
10 another qualified practitioner with respect to the procedure.

11 (g) Construction.--Nothing in this section shall be  
12 construed to require a physician to delegate the authority to  
13 obtain informed consent to a qualified practitioner.

14 (h) Definition.--As used in this section, the term  
15 "qualified practitioner" means a health care practitioner as  
16 defined in section 103 of the act of July 19, 1979 (P.L.130,  
17 No.48), known as the Health Care Facilities Act, who:

18 (1) has knowledge of the patient's condition and the  
19 procedure enumerated under subsection (a) to be conducted on  
20 the patient; and

21 (2) is acting under the supervision of, at the direction  
22 of or in collaboration with a physician.

23 The term shall include another physician and a physician  
24 participating in a medical residency or fellowship training  
25 program.

26 Section 2. This act shall apply to any action in which a  
27 final order has not been entered as of the effective date of  
28 this section.

29 Section 3. This act shall take effect in 60 days.