

**Chapter 40. State Medical Board.**

(Words in **boldface and underlined** indicate language being added; words [CAPITALIZED AND BRACKETED] indicate language being deleted.)

12 AAC 40.060 is amended to read:

**12 AAC 40.060. Termination of pregnancy.** Termination of pregnancy must be requested by the pregnant woman [, UNLESS SHE HAS BEEN ADJUDGED MENTALLY INCOMPETENT OR IS UNMARRIED AND UNDER 18 YEARS OF AGE, IN WHICH CASE THE REQUEST MUST BE MADE BY HER PARENT OR GUARDIAN]. (Eff. 12/20/70, Register 36; am 8/29/73, Register 47; am \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

**Authority:** [AS 11.15.060(a)] AS 08.64.105

12 AAC 40.070 is amended to read:

**12 AAC 40.070. Informed consent.** A [UNLESS OTHERWISE PROVIDED IN 12 AAC 40.060, A] written informed consent **that complies with AS 18.16.060** shall be obtained from the patient [OR FROM ANY OTHER PERSON WHOSE CONSENT IS REQUIRED BEFORE TERMINATION OF A PREGNANCY]. Such written informed consent shall be on the patient's chart. The patient [AND OTHER PERSONS WHOSE CONSENT IS REQUIRED] shall be advised of the medical implications and the possible emotional and physical sequelae of the procedure. (Eff. 12/20/70, Register 36; am 8/29/73, Register 47; am \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

**Authority:** AS 08.64.105

12 AAC 40.080 is amended to read:

**12 AAC 40.080. Medical procedures.** The patient shall be examined by a physician licensed in Alaska, and a written record of the patient's [PHYSICAL AND EMOTIONAL] health shall be prepared before performing an abortion [PROCEDURE AS SET OUT IN 12 AAC 40.110]. (Eff. 12/20/70, Register 36; am 8/29/73, Register 47; am \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

**Authority:** AS 08.64.105

12 AAC 40.100 is repealed:

**12 AAC 40.100. Consultation requirements.** Repealed \_\_\_\_/\_\_\_\_/\_\_\_\_. (Eff. 12/20/70, Register 36; am 8/29/73, Register 47; repealed \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

12 AAC 40.110 is amended to read:

**12 AAC 40.110. Abortion procedures.** The Clinical Management Guidelines for Obstetrician-Gynecologists: Second-Trimester Abortion Practice Bulletin Number 135, (dated June 2013, reaffirmed 2015) of the American College of Obstetricians and Gynecologists is adopted by reference as the standard of practice when providing an abortion after the first trimester [DURING THE SECOND OR THIRD TRIMESTER OF A PREGNANCY, ACCEPTABLE PROCEDURES INCLUDE DILATATION AND CURETTAGE, SUCTION ASPIRATION OF THE UTERUS, INJECTION OF PHARMACOLOGICAL AGENTS, HYSTERECTOMY AND HYSTEROTOMY. THE EXACT PROCEDURE TO BE USED WILL DEPEND UPON THE PATIENT'S TOTAL HEALTH, AGE, ASSOCIATED DISEASE AND PATHOLOGY, AND ANOMALIES SUCH AS SKELETAL DEFECTS AND OTHER MEDICAL INDICATIONS]. (Eff. 12/20/70, Register

36; am 8/29/73, Register 47; am \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

**Authority:** AS 08.64.105

**Editor's note:** A copy of the American College of Obstetricians and Gynecologists (ACOG) *Clinical Management Guidelines for Obstetrician-Gynecologists: Second-Trimester Abortion* Practice Bulletin Number 135, (dated June 2013, reaffirmed 2015) adopted by reference in 12 AAC 40.110, may be obtained from the American College of Obstetricians and Gynecologists, 409 12th Street SW, PO Box 96920, Washington, DC 20090-6920 or website at <http://www.acog.org/Resources-And-Publications/Practice-Bulletins-List>.

12 AAC 40.120(b) is amended to read:

(b) **From and after the point in time when a fetus becomes viable, as determined by such medical examinations and tests which in the physician's professional judgment are necessary, an abortion may only be performed at a hospital with a Neonatal Intensive Care Unit (NICU)** [DURING THE SECOND OR THIRD TRIMESTER OF A PREGNANCY, BLOOD, BLOOD DERIVATIVES, BLOOD SUBSTITUTES OR PLASMA EXPANDERS SHALL BE IMMEDIATELY AVAILABLE WHEN AN ABORTION IS PERFORMED, AND AN OPERATING ROOM APPROPRIATELY STAFFED AND EQUIPPED FOR MAJOR SURGERY IN ACCORDANCE WITH REGULATIONS ADOPTED UNDER AS 18.20.060 SHALL BE IMMEDIATELY AVAILABLE]. (Eff. 12/20/70, Register 36; am 8/29/73, Register 47; am \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

**Authority:** AS 08.64.105

12 AAC 40.130 is amended to read:

**12 AAC 40.130. Records.** In accord with 12 AAC 40.940, during [DURING] the second or third trimester of a pregnancy, the attending physician shall record a medical history, findings of the physical examination, operative report of the abortion procedure and pathology report as part of the clinical record to be maintained by the hospital or facility. The physician and hospital or facility shall treat the patient's identity and medical record as confidential information. (Eff. 12/20/70, Register 36; am 8/29/73, Register 47; am \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

**Authority:** AS 08.64.105

12 AAC 40.140 is amended to read:

**12 AAC 40.140. Limitation.** A fetus which has not developed beyond 150 days after the first day of the last menstrual period may be considered non-viable [FOR PURPOSES OF AS 11.15.060(a)]. In the performance of an abortion after that date, the physician shall be guided by a reasonable judgment as to whether the fetus is viable in fact. (Eff. 12/20/70, Register 36; am 8/29/73, Register 47; am \_\_\_\_/\_\_\_\_/\_\_\_\_, Register \_\_\_\_)

**Authority:** AS 08.64.105 [AS 11.15.060(a)]