UCONN HEALTH

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SB 243, An Act Prohibiting an Unauthorized Pelvic Examination on a Female Patient Who is Under Deep Sedation or Anesthesia or Unconscious

Distinguished Co-Chairs, Ranking Members and Members of the Public Health Committee, we thank you for allowing us the opportunity to submit testimony on behalf of UConn Health on **SB 243**.

UConn Health is Connecticut's only public academic medical center and a vibrant, high-performing state asset. With an annual operating budget of over one billion dollars, UConn Health employs nearly 4,600 full- and part-time individuals working as doctors, dentists, mental health professionals, nurses, residents, research assistants, technicians, and many other positions. Our fundamentals are strong and growing, with 60% increases in clinical revenues over six years, the largest medical and dental student classes to date, and expansions in research awards. In addition to generating $2.2 billion in overall economic impact to the state, UConn Health fulfills its public mission of teaching the doctors, dentists, and scientists of tomorrow and providing high-quality patient care to all residents of the state, including thousands of underserved citizens.

This bill clarifies that physicians, residents, or medical school students must obtain informed consent before performing pelvic exams on female patients who are under deep sedation, under anesthesia, or unconscious. In addition, the exam has to be within the scope of the surgical procedure or diagnostic examination to be performed or, in the case of an unconscious patient, required for diagnostic purposes. The Department of Public Health is required to investigate any alleged violations of this section and is enabled to take disciplinary action.

UConn Health does not have concerns with the passage of this new requirement, as it codifies our current practices.

In March 2019, the Association of Professors of Gynecology and Obstetrics released the following statement related to teaching pelvic exams to medical students:

"APGO considers the ability to perform a complete and competent pelvic and breast examination to be a necessary skill in the provision of comprehensive women's health care.

We promote the appropriate teaching of pelvic exam skills to medical students during their undergraduate medical education. Teaching of these exam skills should be comprehensive and can include the use of didactics, simulation and mentored examinations in the clinical setting.

We recommend that learners in the clinical setting, including in the operating room when the patient is under anesthesia, should only perform a pelvic examination for teaching purposes when the pelvic exam is:

- **Explicitly consented to;**
- **Related to the planned procedure;**
- **Performed by a student who is recognized by the patient as a part of their care team; AND**
- **Done under direct supervision by the educator**.

This statement is supported by the Association of American Medical Colleges (AAMC), the America College of Obstetricians and Gynecologists (ACOG), the American College of Osteopathic Obstetricians and Gynecologists (ACOOG) and the American Urogynecologic Society AUGS)."

Even prior to the release of the APGO statement, at the UCONN School of Medicine all students entering the OBGYN clerkship had been and continue to comply with all four principles as outlined by APGO. On the first day of orientation to the clerkship, the clerkship director reviews with every student that students are to introduce themselves to patients prior to their planned procedures, state their role on the team and their planned involvement in the procedure. If they are to perform a pelvic exam, this is explicitly reviewed with the patient so that she may provide her explicit consent. Students are also told that they must perform all clinical breast exams and pelvic exams under the direct supervision of their faculty educator. Finally, when a pelvic exam is performed by an Obstetrician Gynecologist, it is always done as an integral part of the planned abdominal or pelvic procedure. As an additional measure to ensure that patients are aware of student involvement during procedures under anesthesia, there is a specific section in the informed consent which highlights possible student involvement. It highlights that the student role during the procedure will be explicitly explained, and that they will be directly supervised. All site directors are aware of these guidelines and this information is given to their teaching faculty

For clerkships other than OBGYN, we have initiated a process in which the dean who oversees all clerkships will present information related to informed consent and pelvic exams to all students PRIOR to starting their clinical clerkships so the students understand that they may not perform pelvic exams unless it is an integral part of the procedure. If this bill moves forward and becomes law, we also plan to contact all of the

clinical chairs to ensure they are informed, and remind them to include this information in the clerkship orientation for the medical students.

Thank you for the opportunity to share this testimony. As we train the next generation of medical students, residents, fellows, and researchers, we know how important it is to emphasize not only the technical training that results in high-quality patient care and outcomes, but also the ethical and moral obligation of treating patients with respect and dignity. We appreciate the intent of this proposal to ensure patients are afforded the opportunity to be properly informed and give consent to their treatment.