Sen. Abrams, Rep. Steinberg
Co-Chairs, Public Health Committee
CT General Assembly
State Capitol
Hartford, CT 06106-1562

Dear Sen. Abrams, Rep. Steinberg & Committee Members,

I write in support of 2020 Session SB-243, an act prohibiting an unauthorized pelvic examination on a female patient who is under deep sedation or anesthesia or unconscious.

As a drug development director and a clinical researcher for more than 30 years, I was horrified when I read about this practice which is equivalent to sexual assault last year. For those of us in the clinical research field, patient safety is our highest priority. It is appalling to find out teaching hospitals would allow such practice to harm, humiliate, and disrespect women in their most vulnerable state in order to benefit medical students. What if the female patient is a sexual assault victim? It's time to stop this madness once and for all.

The issue of non-consensual pelvic exams on unconscious female patients has reached a critical point of explosion on national stage in the past 6 months. ELLE did an anonymous survey, 3 medical students confirmed the unethical practice at Yale; NY Times had a major story entitled "She didn't want a pelvic exam. She received one anyway;" routefifty.com had a feature article "States move to protect anesthetized women from non-consensual pelvic exams;" Florida senate passed a bill analogous to SB-243 unanimously. In support of a similar legislation in Maine, a medical student testified "medical students need to learn how to be a good doctor and respect their patients. Legislation is needed to reinforce the high ethical standards that physicians represent. We can't continue to rely on individuals or groups to hold this standard when the course of action is so clear." A patient who woke up during the procedure said "I'm not associating all health care with assault, but I have a good reason to associate some health care with trauma. Health care providers are not exempt from that ethical obligation to have obtained consent."

The proposed legislation SB-243 is a win-win for both patients and teaching hospitals. It has been more than 17 years since medical societies condemned this practice. The American College of Obstetricians and Gynecologists (ACOG) and Association of American Medical Colleges (AAMC) have recommended explicit consent for performing pelvic exams. The informed consent process must be transparent; the information conveyed must be explicit and relevant. Every woman wants to know if a learner would be performing a pelvic examination while they are under anesthesia. Most of the women will give consent if asked. Shawn Barnes, a medical student testified in Hawaii said it so well - "why not ask first?"

In summary, non-consensual pelvic exam is occurring in CT. This practice is unethical, immoral, and indefensible. As legislators, your course of action is clear given the fact

that teaching hospitals fail to follow guidelines to seek explicit consent for pelvic exams. You must enact SB-243 and require all public & private institutions, businesses, & practices in CT where medical students train to have a clear process to obtain informed consent for pelvic exam under anesthesia. We must respect and bring dignity back to women. Lastly, for your reference, attached please find a slide deck which summarizes my research findings on this topic.

ProposalToBanPelvic ExamFinal 20200229.

Thanks for the opportunity to testify.

Sincerely,

Terry Tsang
Groton, CT