|  |
| --- |
| BILL ANALYSIS |

|  |
| --- |
| S.B. 1081 |
| By: Burton |
| Public Health |
| Committee Report (Unamended) |

|  |
| --- |
| **BACKGROUND AND PURPOSE** Interested parties contend that the requirement for the administration of prophylaxis to a newborn infant for the prevention of ophthalmia neonatorum does not account for situations in which the infant's parents, managing conservator, or guardian object to the administration of the prophylaxis. S.B. 1081 seeks to protect health care providers from any legal ramifications resulting from a parent's, managing conservator's, or guardian's objection to having the prophylaxis administered to the infant. |
| **CRIMINAL JUSTICE IMPACT**It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY** It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution. |
| **ANALYSIS**S.B. 1081 amends the Health and Safety Code to establish that a physician, nurse, midwife, or other person in attendance at childbirth who is unable to apply prophylaxis approved by the executive commissioner of the Health and Human Services Commission to prevent ophthalmia neonatorum due to the objection of a parent, managing conservator, or guardian of the newborn infant does not commit a Class B misdemeanor criminal offense for failure to perform a duty under statutory provisions relating to ophthalmia neonatorum prevention and to establish that such a person is not subject to criminal, civil, or administrative liability or any professional disciplinary action for failure to administer the prophylaxis. The bill requires the physician, nurse, midwife, or person to ensure that the objection of the parent, managing conservator, or guardian is entered into the medical record of the infant. |
| **EFFECTIVE DATE** September 1, 2017. |
|  |
|  |