AUTHORITY: 42 CFR 440.150, 483.420
RCW 71A.20.050
DDD Policy 7.03

BACKGROUND

The Division of Developmental Disabilities (DDD) makes every effort possible to provide its clients with appropriate medical and surgical treatments for disease prevention, intervention, and health conditions. The proper medical or surgical treatment for some diseases causes sterility or reduced ability to produce children. Some medical or surgical procedures that result in sterilization of an individual that can be performed without a court order. Other medical or surgical procedures require permission from a court to protect the civil rights of clients.

PURPOSE

This policy clarifies the responsibilities of DDD staff in obtaining informed consent prior to treatment and describes which treatments and procedures require court authorization.

SCOPE

This policy applies to all clients served by DDD.

POLICY

DDD staff are responsible to assist clients through the consent process before intentional sterilization procedures are performed.
A. Clients Who Can Provide Informed Consent

1. This section applies to individuals who are able to provide informed consent for intentional sterilization procedures including:
   
a. Tubal ligations and vasectomies;
   
b. Removal of the uterus;
   
c. Removal of the ovaries or testes;
   
d. Administration of medications that diminish the amount of sperm necessary for conception; and
   
e. Administration of medications that diminish sexual desire.

When such treatment as described above has been prescribed for an individual, DDD Field Service or Residential Habilitation Center (RHC) staff will assist the individual in completing and providing the necessary consent.

B. Clients Who Cannot Provide Informed Consent

1. This section applies to individuals who cannot provide informed consent for intentional sterilization procedures including:
   
a. Tubal ligations and vasectomies;
   
b. Removal of the uterus; and
   
c. Removal of the ovaries or testes.

For individuals described above, DDD Field Services or RHC staff will assist them, their family members or guardians to seek to petition the Superior Court for consent, when such assistance is deemed professionally appropriate.
2. The following intentional sterilization procedures may be performed if consent has been provided by a client’s guardian.

a. Administration of medications that diminish the amount of sperm necessary for conception; and

b. Administration of medications that diminish sexual desire.

3. Medical or surgical treatments and procedures that result in secondary sterilization, and that require consent from the client or his/her parent or guardian, but not court authorization, include the following:

a. Treatments for cancer of the reproductive system;

b. Treatment for disease of the reproductive system that cures or prevents the spread of disease from the reproductive system; and

c. Treatment for trauma to the reproductive system.

C. Documentation of Need for Treatment

1. All medical or surgical treatments that result, or may result, in sterilization shall be preceded by:

a. Specific medical diagnosis;

b. Description of:

(1) the planned medical procedure;
(2) possible effects of the procedure;
(3) alternative treatments including non-treatment; and
(4) the risks and benefits of each treatment alternative.

c. Documentation of the medical necessity of the procedure by at least two (2) physicians; and
d. Documentation of necessary laboratory studies including X-rays, CT Scans, and ultrasound results.

**EXCEPTION**

This policy does not apply to emergency medical or surgical procedures necessary to save the life or to protect the health of the client.

**SUPERSESSION**

None

Approved:  

/s/ Norm Davis  
Director, Division of Developmental Disabilities

Date:  11/20/1995