Jewish Hospital & St. Mary's HealthCare

Saint Joseph Health System

Day One of Kentucky Newco - Fact Sheet

"Procedures that will contractually not be performed" Changes
Applies to: Clinical Operations (ED, OR, Nursing, Pharmacy) employees, managers
Updated: December 15, 2011

What changes can you expect to see on Day One?

Operating Room scheduling – Updated OR scheduling policies
 Upon completion of the merger, the partners have agreed by contract to discontinue
 certain procedures at Jewish Hospital, UMC, Jewish Hospital Shelbyville, JH Medical
 Center East and JH Medical Center South facilities. Stated simply, procedures will
 continue to be performed as they are now as long as they are not performed for the
 sole indication of elective abortion, sterilization or contraception.

The following are no longer offered:

• Elective sterilizations including tubal ligations, vasectomies, or Essure procedures -puntant Hancewich Stilling political

The following procedures are allowed if the primary clinical indication is confirmed to be other than for direct abortion, sterilization or contraception:

- Dilatation and Evacuation (D&E)
- Dilation and Curettage (D&C)
- Extra-Uterine Pregnancy
- Inevitable Abortion
- Patient Assistance Program Birth Control Assistance programs will be supported through the UL OBGYN Clinic in the Ambulatory Care Building.
- Pharmacy Updated policies on prescribing and dispensing contraceptives
 - Emergency Contraception post sexual assault Emergency Contraception medications will be made available if, after appropriate testing, there is no evidence that conception has occurred already. These medications are designed to prevent ovulation, sperm capacitation, or fertilization. The role of the pharmacist is to dispense this medication, at the order of the physician providing care, with documentation of the above. In order to achieve this, the medication will be dispensed directly from the pharmacy where 24 hour services are available. In facilities where automated dispensing machines are utilized, this medication will require pharmacist order review and order entry in order to allow access to the medication from the automated dispensing machine.
 - Counseling language around research parameters related to known teratogens and abortifacients used in the research - Females of childbearing potential must have a negative pregnancy test at screening (unless surgically sterile or postmenopausal) and must agree to use highly effective contraception methods as prescribed and dispensed by the physician for that given patient from

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University of Louisville Hospital James Graham Brown Cancer Center

screening throughout the duration of the study treatment and for 14 days following the last dose of the study drug.

- Contraceptives with secondary indications may be ordered and dispensed but are required to reflect documentation of an indication of anything but a sole and primary purpose of contraception for dispensing. Patients will be allowed to self administer home medications with appropriate physician orders.
- Inventory management parameters to indicate adherence to the requirements of the agreement surrounding the PCNP's will be demonstrated in a resultant removal of product and an audit trail to assure disposal and return. All stocked products will be stored at 1 centrally located, 24 hour facility in a secure area to regulate access
- UMC has relocated birth control assistance programs to a provider outside of Newco. Birth Control Assistance programs will be supported through the UL OBGYN Clinic in the Ambulatory Care Building.
- Any medication order, for a female of child bearing age, with secondary indications as abortifacients including methotrexate, celecoxib, meloxicam, misoprostol, and carboprost, will include a diagnosis when ordered in an outpatient procedure setting.
- The use of fertility enhancing medication assistance for both female and male patients is allowed when; the marital act of sexual intercourse is not able to attain its procreative purpose, the assistance does not separate the unitive and procreative ends of the act, and does not substitute for the marital act itself, then the fertility enhancing medication may be used to help married couples conceive. Those techniques of assisted conception that respect the unitive and procreative meanings of sexual intercourse and do not involve the destruction of human embryos, or their deliberate generation in such numbers that it is clearly envisaged that all cannot implant and some are simply being used to maximize the chances of others implanting, may be used as therapies for infertility. A health care institution that provides treatment for infertility should offer not only technical assistance to infertile couples but also should help couples pursue other solutions (e.g., counseling, adoption) Examples: clomiphene citrate; human menopausal gonadotropin; folliclestimulating hormone; human chorionic gonadotropin; gonadotropin releasing hormone analogs; metformin; bromocriptine; and aromatase inhibitors (non FDA approved).

What is not changing?

- Care of Victims of Sexual Assault There is no change to current policies followed by your facility. Please refer to appropriate policy.
- Treatment of extra-uterine pregnancy There is no change to current policies followed by your facility. Please refer to appropriate policy.

Mayers

JEWISH HOSPITAL & ST. MARY'S HEALTHCARE POLICIES/PROCEDURES

Applies to: JHSMH Corporation SINGLE PROVIDER ENTITY X Lewish Hospital (JH) X JH MCE X JH MCS Our Lady of Peace X Sts. Mary & Elizabeth	OTHER Frazier Rehab Institute Jewish Hospital Meade County Jewish Hospital Shelbyville JHSMH Foundation VNA Nazareth Home Care OTHER CORPORATIONS The Physician Group Four Courts Senior Center JH Properties, Inc. Regional Service Center	
SUBJECT: Surgical Procedures Cont	matually About	
MANUAL: Surgical	PAGE: 1 of 3	
Services		
SCOPE:		
APPROVED BY:		
INITIAL APPROVAL DATE:	LAST REVISION DATE:	

POLICY STATEMENT: Identified procedures will not be performed as they are deemed as absent from our approved procedure list according to contractual obligations. The hospital recognizes that this decision must be interpreted on the basis of each unique situation and for the total good of the whole person. In keeping with this policy, procedures that are questionable will be referred to the facility Ethics Committee for final determination.

PROCEDURE:

Procedure	Clinical Indication	Rationale
Vascetomy, Laparoscopy Tubal Ligation/Cautery/w Fallopian Ring, Bilateral Tubal Sterilization, and Hysteroscopy w/ Essure, Bilateral Partial Salpingectomy, Hysteroscopy, Ablation Endometrial or Ablation Hydrothermal w/Hysteroscopy.	direct sterilization, or contraception for the sole	Direct Sterilization is not contractually approved.
Dilatation & Evacuation (D&E)	Obtain clinical indication: Cannot be for direct abortion, direct sterilization, or contraception for the sole primary purpose of pregnancy prevention. Must have an ultrasound report documenting the lack of a fetal heartbeat prior to scheduling. Clinical indication of lethal defect /birth defect incompatible with life cannot contractually be performed.	Cessation of pregnancy with heartbeat is not contractually approved.
Dilatation & Curettage (D&C)	Obtain clinical indications. Cannot be for direct abortion, direct sterilization, or	Contractually acceptable as the direct purpose is to restore health

JEWISH HOSPITAL & ST. MARY'S HEALTHCARE POLICIES/PROCEDURES SUBJECT: Surgical Surgical Procedures Contractually Absent PAGE: 2 of 3 MANUAL: Surgical Services

	contraception for the sole primary purpose of pregnancy prevention.	
Extra-uterine Pregnancy	Obtain clinical indication to include the location of the fetus. Cannot be for direct abortion, direct sterilization, or contraception for the sole primary purpose of pregnancy prevention.	Contractually acceptable as the direct purpose is to restore health.
Inevitable Abortion	Cannot be for direct abortion, direct sterilization, or 'contraception for the sole primary purpose of pregnancy prevention.	Contractually acceptable as the direct purpose is to restore health.

DEFINITIONS:

Direct Abortion: Abortion that is, the directly intended termination of pregnancy before viability or the directly intended destruction of a viable fetus is never permitted. Every procedure whose sole immediate effect is the termination of pregnancy before viability is an abortion, including the interval between conception and implantation of the embryo.

Direct Sterilization: Any sterilization which of itself has the sole immediate effect of rendering the individual incapable of reproduction.

Indirect sterility: Any sterilization which results merely as a side effect of a medical treatment directly aimed at a specific pathology can be justified because the direct purpose of the procedure is to restore health. Indirect sterilization does not need approval by the Ethics committee.

ATTACHMENTS: None

REFERENCE: NONE

REVISION DATE(S):

REPLACES POLICY NUMBER(S):

NEWCO Procedures that will Contractually Not be Performed

Surgical Procedure Guidance

POLICY STATEMENT: Identified procedures will not be performed as they are deemed as absent from our approved procedure list according to contractual obligations. The hospital recognizes that this decision must be interpreted on the basis of each unique situation and for the total good of the whole person. In keeping with this policy, procedures that are questionable will be referred to the facility Ethics Committee for final determination.

PROCEDURE:

Procedure	Clinical Indication	Rationale
Vasectomy, Laparoscopy Tubal Ligation/Cautery/w Fallopian Ring, Bilateral Tubal Sterilization, and Hysteroscopy w/ Essure, Bilateral Partial Salpingectomy, Hysteroscopy, Ablation Endometrial or Ablation Hydrothermal w/Hysteroscopy.	Cannot be for direct abortion, direct sterilization, or contraception for the sole primary purpose of pregnancy prevention.	Direct Sterilization is not contractually approved.
Dilatation & Evacuation (D&E)	Obtain clinical indication: Cannot be for direct abortion, direct sterilization, or contraception for the sole primary purpose of pregnancy prevention. Must have an ultrasound report documenting the lack of a fetal heartbeat prior to scheduling the surgical procedure. Clinical indication of lethal defect /birth defect incompatible with life cannot contractually be performed.	Cessation of pregnancy with heartbeat is not contractually approved.
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Inevitable Abortion: Profuse vaginal bleeding accompanied with cervical dilation in a pre-viable pregnancy.

ATTACHMENTS: None

REFERENCE: NONE

REVISION DATE(S):

REPLACES POLICY NUMBER(S):