

19-13-D45. Definition

Licensing Outpatient Clinics Operated by Corporations/Municipalities**19-13-D45. Definition**

Outpatient clinics operated by corporations or municipalities. For the purposes of sections 19-13-D45 to 19-13-D53, inclusive, an outpatient clinic is an organization operated by a municipality or a corporation other than a hospital which provides ambulatory medical or dental care for diagnosis, treatment and care of persons with chronic or acute conditions which do not require overnight care, or medical or dental care to well persons including preventive services and maintenance of health.

(Effective April 4, 1972.)

19-13-D46. Buildings and equipment

- (a) A clinic building shall be of sound construction and shall provide adequate space and equipment for patient interviews, physical examinations and treatment of patients and for service and other areas in accordance with the requirements of the state department of public health.
- (b) Clinic buildings and equipment shall meet the requirements of the state fire safety code. Annual application for approval shall be accompanied by a certificate of inspection by the local fire marshal.
- (c) Areas in which explosive gases or radioactive materials are used shall provide for adequate protection of patients and personnel.
- (d) The clinic buildings and equipment shall be maintained in a good state of repair and shall be kept clean at all times.

(Effective April 4, 1972; Amended, effective December 30, 1996.)

19-13-D47. Governing board, administrator

- (a) A clinic shall be managed by a governing board whose duties shall include, as a minimum:
 - (1) Adoption of bylaws or their equivalent, rules and regulations or their equivalent, including medical or dental staff bylaws, or both;
 - (2) annual appointment of the medical or dental staff with annual designation of medical or dental director; and
 - (3) appointment of a clinic administrator, qualified on the basis of training and experience approved by the commissioner of public health.
- (b) The administrator, or the equivalent, shall be responsible to the governing board for the management and operation of the clinic and for the employment of personnel. He shall attend meetings of the governing board and meetings of the professional staff.
- (c) Personnel shall be employed in sufficient numbers and of adequate qualifications so that the function of the clinic may be performed efficiently.

(Effective April 4, 1972; Amended, effective December 30, 1996.)

19-13-D48. Professional staff

- (a) There shall be an organized professional staff of not fewer than three members of the major profession or professions providing care in the clinic; except that, in a family-planning clinic or well-child clinic, the staff may consist of a medical director and one other major profession providing care in the clinic.
- (b) The professional staff shall adopt written rules and regulations governing its own activities, subject to approval of the governing board of the clinic. As a minimum these shall include:
 - (1) Methods of control of privileges granted to members of the medical or dental staff and the responsibilities of the medical or dental director;
 - (2) method of professional supervision of clinical work;
 - (3) provision for regular staff meetings;
 - (4) preparation of adequate case records; and

Current with materials published in Connecticut Law Journal through 06/01/2006

19-13-D49. Records

- (5) procedure for recommending appointment to the staff and for hearing complaints regarding the conduct of members, referring the same, with recommendations, to the governing board.

(Effective April 4, 1972; Amended, effective December 30, 1996.)

19-13-D49. Records

- (a) There shall be adequate provisions for the retention and storage of medical or dental records with adequate space and equipment and qualified medical record personnel, if necessary.
- (b) A medical or dental record shall be started for each patient at the time of admission, including proper identifying data. Medical and dental records shall include sufficient information to justify the diagnosis made and warrant the treatment given or services provided. Each entry shall be signed by the person responsible for it.
- (c) Medical and dental records shall be filed in the clinic in a manner accessible to the professional staff, with proper provision for their confidentiality, and shall be kept for a minimum of five years after discharge of the patient.

(Effective April 4, 1972.)

19-13-D50. Nursing personnel

Sufficient licensed nursing personnel shall be employed to render the care, treatment or preventive services necessary, including the administration of drugs and biologicals as required by the stated program of the clinic.

(Effective April 4, 1972.)

19-13-D51. Pharmaceuticals

Where pharmaceuticals are dispensed other than by a physician there shall be a pharmacy which meets the following requirements:

- (1) There shall be a competent pharmacist, registered in Connecticut, who shall be responsible to the administrator for all pharmaceutical services in the clinic.
- (2) The pharmacy shall be operated in compliance with all applicable state and federal drug laws and regulations.
- (3) The premises shall be kept clean, adequately lighted, and ventilated, and the equipment and facilities necessary for compounding, dispensing, manufacturing, producing or processing of drugs shall be maintained in good order.
- (4) Drugs used in the clinic shall meet standards established by the United States Pharmacopoeia, The National Formulary or the Federal Food and Drug Administration and shall be stored and kept so as to insure their proper purity and strength. A medical staff pharmacy committee in conference with the pharmacist shall formulate policies to control the administration of toxic or dangerous drugs with specific reference to the duration of the order and the dosage. All applicable statutes and regulations governing the purchase, storage and dispensing of drugs and biologicals shall be in force at all times.

(Effective April 4, 1972.)

19-13-D52. Maintenance

The management, operation, personnel, equipment, facilities, sanitation and maintenance of the clinic shall be such as reasonably to assure the health, comfort and safety of patients at all times.

(Effective April 4, 1972.)

19-13-D53. Inspection

Clinics shall be inspected biennially by the state department of public health to test for ongoing compliance with sections 19-13-D45 through 19-13-D54 of the Regulations of Connecticut State Agencies.

(Effective April 4, 1972; Amended, effective December 30, 1996.)

Current with materials published in Connecticut Law Journal through 06/01/2006

19-13-D54. Abortions

19-13-D54. Abortions

- (a) No abortion shall be performed at any stage of pregnancy except by a person licensed to practice medicine and surgery in the State of Connecticut.
- (b) All induced abortions will be reported within seven days by the physician performing the procedure to the state commissioner of public health who will maintain such reports in a confidential file and use them only for statistical purposes except in cases involving licensure. Such reports will specify date of abortion, place where performed, age of woman and town and state of residence, approximate duration of pregnancy, method of abortion, and explanation of any complications. The name of the woman will not be given. These records will be destroyed within two years after date of receipt. In addition, a fetal death certificate shall be filed for each fetus born dead which is the result of gestation of not less than twenty weeks, or a live birth certificate shall be filed for each fetus born alive regardless of gestational age, as provided in sections 7-48 and 7-60 of the Connecticut General Statutes. If a live born fetus subsequently dies, a death certificate shall be filed as provided in section 7-62b of the Connecticut General Statutes.
- (c) All induced abortions after the second trimester as verified by ultrasound, last menstrual period and pelvic exam, shall be done only in a licensed hospital with a department of obstetrics and gynecology and a department of anesthesiology.
- (d) All outpatient clinics operated by corporations or municipalities where abortions are performed shall develop standards to control the quality of medical care provided to women having abortions. These standards shall include but not necessarily be limited to:
 - (1) verification of pregnancy and determination of duration of pregnancy;
 - (2) pre-operative instruction and counseling;
 - (3) operative permission and informed consent;
 - (4) pre-operative history and physical examination;
 - (5) pre-operative laboratory procedure for blood Rh factor;
 - (6) prevention of Rh sensitization;
 - (7) examination of the tissue by a pathologist;
 - (8) receiving and recovery room facilities;
 - (9) a standard operating room;
 - (10) post-operative counseling including family planning; and
 - (11) a permanent record.
- (e) There shall be a mechanism for continuing review to evaluate the quality of records and the quality of clinical work. This review shall include all deaths, complications, infections and such other cases as shall be determined by the chief of the department of obstetrics and gynecology of the hospital or the clinic medical director.
- (f) No person shall be required to participate in any phase of an abortion that violates his or her judgment, philosophical, moral or religious beliefs.
- (g) If the newborn shows signs of life following an abortion, those measures used to support life in a premature infant shall be employed.
- (h) During the third trimester of pregnancy, abortions may be performed only when necessary to preserve the life or health of the expectant mother.
(Effective February 25, 1974; amended effective December 30, 1996; amended effective August 1, 2005.)