311.774 Report on prescriptions for drug or drugs to induce abortion -- Information on potential reversal of effect of drugs to be included with prescription -- Complications to be reported to Vital Statistics Branch.

(1) Each prescription issued for RU-486, cytotec, pitocin, mifeprex, misoprostol, or any other drug or combination of drugs for which the primary indication is the induction of abortion as defined in KRS 311.720 shall be reported on a report form provided by the cabinet within fifteen (15) days after the end of the month in which the prescription was issued.

(2) Information on the potential ability of a physician to reverse the effects of prescription drugs for which the primary indication is the induction of abortion, including where additional information about this possibility may be obtained and contact information for assistance in locating a physician who may aid in the reversal, shall be provided with each prescription issued for RU-486, cytotec, pitocin, mifeprex, misoprostol, or any other drug or combination of drugs for which the primary indication is the induction of abortion as defined in KRS 311.720.

(3) For each abortion reported to the Vital Statistics Branch as required by KRS 213.101, the report shall also state whether any abortion complication was known to the provider as a result of the abortion. Abortion complications to be reported shall include only the following physical or psychological conditions arising from the induction or performance of an abortion:

(a) Uterine laceration;

(b) Cervical laceration;

(c) Infection;

(d) Heavy bleeding that causes symptoms of hypovolemia or the need for a blood transfusion;

(e) Pulmonary embolism;

(f) Deep vein thrombosis;

(g) Failure to terminate the pregnancy;

(h) Incomplete abortion or retained tissue;

(i) Pelvic inflammatory disease;

(j) Missed ectopic pregnancy;

(k) Cardiac arrest;

(l) Respiratory arrest;

(m) Renal failure;

(n) Shock;

(o) Amniotic fluid embolism;

(p) Coma;

(q) Placenta Previa in subsequent pregnancies;

(r) Pre-term delivery in subsequent pregnancies;

(s) Free fluid in the abdomen;

(t) Hemolytic reaction due to the administration of ABO-incompatible blood or blood products;

(u) Hypoglycemia occurring while the patient is being treated at the abortion facility;

(v) Allergic reaction to anesthesia or abortion-inducing drugs;

(w) Psychological complications, including depression, suicidal ideation, anxiety, and sleeping disorders;

(x) Death; and

(y) Any other adverse event as defined by criteria provided in the Food and Drug Administration Safety Information and Adverse Event Reporting Program.

Effective: June 27, 2019

History: Created 2019 Ky. Acts ch. 191, sec. 2, effective June 27, 2019.