



Backgrounder

St. Elizabeth's Hospital Policy on the provision of tubal ligations

Preamble:

St. Elizabeth's Hospital publicly identifies itself with the health ministry of the Roman Catholic Church and is guided by the teachings of the Church in its policies and practices as referenced in the Catholic Health Association of Canada Health Ethics Guide subsections #51 & #52.

Policy:

1. Sterilization may be permitted when the primary purpose is to benefit the total health of the person.

Procedure:

1. When a request for female sterilization arises, the appropriate procedure, alternatives, potential benefits and risks will be discussed with the patient. The discussion should include the possibility of procedure failure (i.e. subsequent pregnancy), procedural complications and need for additional or alternative measures.
2. The physician, prior to performing the procedure, will certify that he/she has followed the protocol outlined as in Appendix A. The completed form will be placed on the patient's chart.



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Appendix A

PHYSICIAN CERTIFICATION FOR PATIENT TUBAL LIGATION PROCEDURE

I, Dr. _____ certify the following:

1. I am familiar with the policies of St. Elizabeth's Hospital regarding performance of medical procedures at St. Elizabeth's Hospital.
2. I have discussed the procedure at length with my patient
_____.
3. As a result of my discussion, it is my professional opinion that the procedure is reasonably necessary and appropriate for the health of my patient.

Dated at Humboldt, Saskatchewan this _____ day of
_____, 2_____.

Physician's Signature

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