

# APPENDIX IX

## STATE CODES ON INTIMATE PARTNER VIOLENCE VICTIMIZATION REPORTING REQUIREMENTS FOR HEALTH CARE PROVIDERS<sup>xiii</sup> Current through March 8, 2002

Code Number	States with General Mandatory Reporting Laws	IF ANY OF THE FOLLOWING TYPES OF INJURIES ARE PRESENT, PRACTITIONERS IN THE STATE MUST MAKE A REPORT:										Treatment of Specified Injuries Requires Practitioners to Report <sup>xiv</sup>						
		Injuries Resulting from Domestic Violence or Abuse	Injuries Resulting from Criminal Activity	Injuries Resulting from General Violence	Intentionally Inflicted Injuries	Injuries Inflicted by Gun or Firearm	Injuries Inflicted by Knife or Other Sharp Object	Burn Injuries	Injuries Likely to Cause Death									
AL																		
AK	•				•													•
AZ	•		•															•
AR	•				•													•
CA	•																	•
CO	•				•													•
CT	•																	•
DC	•																	•
DE	•																	•
FL	•																	•
GA	•																	•
HA	•																	•
ID	•																	•
IL	•																	•
IN	•																	•
IA	•																	•
KS	•																	•
KY	•																	•
LA	•																	•
ME	•																	•
MD	•																	•
MA	•																	•
MI	•																	•
MN	•																	•
MS	•																	•
MO	•																	•
MT	•																	•

<sup>xiii</sup> This document is intended to provide a cursory overview of mandatory reporting laws. Please be sure to consult the complete set of mandatory reporting laws in your state for further information. If you note any changes or errors on this document, please contact the FVPF at 415-252-8900.

<sup>xiv</sup> Under a strict reading of these laws, practitioners must be providing treatment or medical care to the person with specified injuries in order to trigger the reporting requirement. Therefore, in a pediatric or family practice setting, if an attending parent with injuries is bringing her child in for a health care appointment, the attending parent is not actually receiving treatment or medical care from the practitioner, and thus the practitioner in the state would not be required to report. Further discussion is merited, given the lack of statutory or case law that have been developed around this area.

<sup>xv</sup> The law provides an exception to reporting if the patient is over the age of 18, did not suffer a gunshot wound, and does not consent to reporting.

<sup>xvi</sup> Report is made for medical data collection purposes only, and does not contain identification information.

Prepared by Josephine Yeh, J.D., for the Family Violence Prevention Fund

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NE	R.R.S. Neb. §28-902		•	•											•	
NV	Nev. Rev. Stat. Ann. §629.041, §629.045				•										•	
NH	RSA §631:6														•	
NJ	N.J. Stat. §2C:58-8														•	
NM																
NY	NY CLS Penal §265.25 to .26															
NC	N.C. Gen. Stat. §90-21.20															
ND	N.D. Cent. Code, §43-17-41															
OH	ORC Ann. 2921.22															
OK	10 Okl. St. §7104															
OR	ORS §146.750															
PA	18 P.A.C.S. §5106															
RI	R.I. Gen. Laws §11-47-48, §12-29-9															
SC	S.C. Code Ann. §16-3-1072															
SD	S.D. Codified Laws §23-13-10															
TN	Tenn. Code Ann. §38-1-101															
TX	Texas Health & Safety Code §161.041															
UT	Utah Code Ann. §26-23a-2															
VT	13 V.S.A. §4012															
VA	Va. Code Ann. §54.1-2967															
WA																
WV	W. Va. Code §61-2-27															
WI	Wis. Stat. §146.995															
WY																

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