Hospital Reproductive Health Services

In accordance with 2SSB 5602 (Laws of 2019), the purpose of this form is to provide the public with specific information about which reproductive health services are and are not generally available at each hospital. Please contact the hospital directly if you have questions about services that are available.

Hospital name: Astria Regional Medical Center
Physical address: 110 South 9th Avenue
City: Yakima State: WA ZIP Code: 98902
Hospital contact: Sara Williamson CNO Contact phone #: 509-454-6192

An acute care hospital may not be the appropriate setting for all reproductive health services listed below. Some reproductive services are most appropriately available in outpatient settings such as a physician office or clinic, depending on the specific patient circumstances.

The following reproductive health services are generally available at the above listed hospital:

Abortion services
☐ Medication abortion
☐ Referrals for abortion
☐ Surgical abortion

Contraception services
☑ Birth control: provision of the full range of Food and Drug Administration-approved methods including intrauterine devices, pills, rings, patches, implants, etc.
☑ Contraceptive counseling
☐ Hospital pharmacy dispenses contraception
☑ Removal of contraceptive devices
☐ Tubal ligations
☑ Vasectomies

Emergency contraception services
☑ Emergency contraception - sexual assault
☑ Emergency contraception - no sexual assault

Infertility services
☐ Counseling
☐ Infertility testing and diagnosis
☐ Infertility treatments including but not limited to in vitro fertilization

Other related services
☑ Human immunodeficiency virus (HIV) testing
☑ Human immunodeficiency virus (HIV) treatment
☐ Pre-exposure prophylaxis (PrEP), post-exposure prophylaxis (PEP), prescriptions, and related counseling
☑ Sexually transmitted disease testing and treatment
☐ Treatment of miscarriages and ectopic pregnancies

Pregnancy-related services
☑ Counseling
☐ Genetic testing
☑ Labor and delivery
☐ Neonatal intensive care unit
☑ Prenatal care
☑ Postnatal care
☑ Ultrasound

Comments; limitations on services; other services
Some of the services listed on this form are most appropriately and commonly provided outside an acute care hospital setting and some services are marked because they may be available under very specific patient circumstances.

☐ Additional comments on next page

John Gallagher, CEO
09/24/2019

Signed by: [Signature]

Date (mm/dd/yyyy)

DOH 346-107 August 2019
## Hospital Reproductive Health Services

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<thead>
<tr>
<th>Hospital name:</th>
<th>Astria Regional Medical Center</th>
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**Additional comments; limitations on services; other services (continued)**

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<th>Signed by:</th>
<th>09/24/2019</th>
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<tr>
<td>John Gallagher CEO</td>
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Signed by: ______________________  Date (mm/dd/yyyy)  

John Gallagher CEO

DOH 346-107 August 2019