

1 in operational action against an enemy of the United States further deserve our clear and obvious
2 recognition; Now, therefore,
3 The General Assembly of North Carolina enacts:
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5 **PART I. DESIGNATE POSTTRAUMATIC STRESS INJURY AWARENESS DAY**

6 **SECTION 1.** Chapter 103 of the General Statutes is amended by adding a new
7 section to read:

8 **"§ 103-15. Posttraumatic stress injury awareness.**

9 June 27 of each year is designated as Posttraumatic Stress Injury Awareness Day in North
10 Carolina."
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12 **PART II. ESTABLISH JOINT LEGISLATIVE TASK FORCE ON SUDDEN CARDIAC**
13 **ARREST IN STUDENT ATHLETES**

14 **SECTION 2.** There is created the Joint Legislative Task Force on Sudden Cardiac
15 Arrest in Student Athletes (Task Force).

16 **SECTION 3.** The Task Force shall consist of 10 members as follows:

- 17 (1) Two members of the Senate appointed upon the recommendation of the
18 President Pro Tempore of the Senate, with one of those members serving as a
19 cochair.
- 20 (2) Two members of the House of Representatives appointed upon the
21 recommendation of the Speaker of the House of Representatives, with one of
22 those members serving as a cochair.
- 23 (3) The Secretary of Health and Human Services or his or her designee.
- 24 (4) The Superintendent of Public Instruction or his or her designee.
- 25 (5) A representative of the American Heart Association appointed upon the
26 recommendation of the cochairs.
- 27 (6) A representative of the North Carolina High School Athletic Association
28 appointed upon the recommendation of the cochairs.
- 29 (7) A representative of the North Carolina Athletic Trainers' Association
30 appointed upon the recommendation of the cochairs.
- 31 (8) A member of the North Carolina Chapter of the American College of
32 Cardiology appointed upon the recommendation of the cochairs.

33 **SECTION 4.** The Task Force shall study the following:

- 34 (1) The frequency of sudden cardiac arrest or other heart conditions in student
35 athletes.
- 36 (2) Other jurisdictions that have implemented strategies to mitigate risks to
37 student athletes, such as mandatory heart exams.
- 38 (3) The cost of requiring student athletes to be tested for heart conditions.
- 39 (4) Any other issue the Task Force considers relevant.

40 **SECTION 5.** The Task Force shall meet upon the call of its cochairs. A quorum of
41 the Task Force is a majority of its members. No action may be taken except by a majority vote
42 at a meeting at which a quorum is present. The Task Force, while in the discharge of its official
43 duties, may exercise all powers provided for under G.S. 120-19 and G.S. 120-19.1 through
44 G.S. 120-19.4. The Task Force may contract for professional, clerical, or consultant services, as
45 provided by G.S. 120-32.02. If the Task Force hires a consultant, the consultant shall not be a
46 State employee or a person currently under contract with the State to provide services. Members
47 of the Task Force shall receive per diem, subsistence, and travel allowance as provided in
48 G.S. 120-3.1, 138-5, or 138-6, as appropriate. The expenses of the Task Force shall be considered
49 expenses incurred for the joint operation of the General Assembly.

50 **SECTION 6.** The Legislative Services Officer shall assign professional and clerical
51 staff to assist the Task Force in its work. The Director of Legislative Assistants of the House of

1 Representatives and the Director of Legislative Assistants of the Senate shall assign clerical
2 support to the Task Force.

3 **SECTION 7.** Meetings of the Task Force shall begin no later than October 1, 2019.
4 The Task Force shall submit a final report on the results of its study and development, including
5 proposed legislation, to the General Assembly on or before April 1, 2020, by filing a copy of the
6 report with the Office of the President Pro Tempore of the Senate, the Office of the Speaker of
7 the House of Representatives, and the Legislative Library. The Task Force shall terminate on
8 April 1, 2020, or upon the filing of its final report, whichever comes first.

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10 **PART III. ADDRESS PARENTAL CONSENT AND THE DISPOSITION OF FETAL**
11 **REMAINS**

12 **SECTION 8.(a)** Article 16 of Chapter 130A of the General Statutes is amended by
13 adding a new section to read:

14 "**§ 130A-421. Parental consent to disposition of fetal remains.**

15 In every instance of unintended fetal death resulting from accidental injury, stillbirth, or
16 miscarriage, the attending physician or individual in charge of the institution where the fetal
17 remains were expelled or extracted shall obtain consent from the mother before the disposal of
18 the fetal remains and shall only dispose of the fetal remains by burial, cremation, or incineration
19 in accordance with applicable laws and regulations. If the mother is unable to give consent, and
20 the father is known and able to be contacted within seven days, the attending physician or
21 individual in charge of the institution where the fetal remains were expelled or extracted shall
22 obtain consent from the father and shall only dispose of the fetal remains by burial, cremation,
23 or incineration in accordance with applicable laws and regulations. If neither the mother nor the
24 father is able to give consent within seven days from the time the remains were expelled or
25 extracted, the fetal remains shall only be disposed of by burial, cremation, or incineration in
26 accordance with applicable laws and regulations. Burial or cremation shall be the only method
27 of disposing of fetal remains that have developed beyond completion of the second trimester of
28 gestation."

29 **SECTION 8.(b)** This section becomes effective January 1, 2020, and applies to the
30 disposition of fetal remains on or after that date.

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32 **PART IV. AUTHORIZE ENGAGEMENT WITH THIRD-PARTY TOXICOLOGY**
33 **LABORATORIES TO GUIDE RESOURCES**

34 **SECTION 9.** The Department of Health and Human Services, the Department of
35 Justice, local health departments as defined in G.S. 130A-2(5), and local law enforcement
36 agencies are authorized to engage third-party toxicology laboratories, capable of providing
37 clinical intelligence and data related to prescription and illicit drug usage trends and
38 developments, for the purpose of providing data to guide the delivery of drug treatment and law
39 enforcement resources.

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41 **PART V. EFFECTIVE DATE**

42 **SECTION 10.** Unless otherwise provided, this act is effective when it becomes law.