Chapter 1
GENERAL PROVISIONS

§ 1. Scope of application of Act

Termination of Pregnancy and Sterilisation Act provides for the conditions and procedure for termination of pregnancy and sterilisation.

§ 2. Termination of pregnancy

Termination of pregnancy means the removal from the uterus of a foetus or embryo by surgical means or administration of medicinal products.

§ 3. Duration of pregnancy

The duration of pregnancy is calculated in weeks.

§ 4. Sterilisation

Sterilisation means:
1) the blocking or cutting of a woman’s fallopian tubes for avoiding pregnancy, or
2) the blocking or cutting of a man’s vas deferens for avoiding fertilisation.

Chapter 2
TERMINATION OF PREGNANCY

§ 5. Voluntariness of termination of pregnancy

(1) A woman’s pregnancy may only be terminated at her own request. Nobody is allowed to force or influence a woman to terminate her pregnancy. A request for termination of pregnancy shall be in written form.

(2) Pregnancy of a woman with restricted active legal capacity may be terminated at her own request and with the consent of her guardian. If a woman does not consent with the termination of pregnancy or cannot express her will or if the guardian does not consent with the termination of pregnancy, pregnancy may only be terminated with a court’s permission. If due to delay of receipt of the court’s permission there is a serious risk to the woman’s health, pregnancy may also be terminated without a court’s permission but in such case a permission must be immediately obtained ex post facto. [RT I 2008, 59, 330 - entry into force 01.01.2009]
§ 6. Term of termination of pregnancy

(1) Pregnancy may be terminated if it has not lasted for more than 11 weeks.

(2) Pregnancy which has lasted for more than 11 and up to 21 weeks may be terminated if:
1) the pregnancy endangers the pregnant woman’s health;
2) the unborn child may have a severe mental or physical damage to health;
3) the illness or health problem of a pregnant woman hinders the raising of a child;
4) the pregnant woman is below the age of 15;
5) the pregnant woman is over the age of 45.

§ 7. Sole right of gynaecologist to terminate pregnancy

Only gynaecologists shall have the right to terminate pregnancy.

§ 8. Voluntariness of act of termination of pregnancy

Gynaecologists or other health care professionals cannot be required to terminate pregnancy or participate in the process of termination of pregnancy.

§ 9. Place of termination of pregnancy

(1) Pregnancy can only be terminated at a health care institution holding the respective state activity licence.

(2) In case of illnesses and health problems, termination of pregnancy is only allowed at a hospital. The list of illnesses and health problems in case of which the termination of pregnancy is only allowed at a hospital providing third stage health care shall be established by a regulation of the Minister of Social Affairs.

§ 10. Establishment of existence and duration of pregnancy

The existence and duration of pregnancy shall be established by the family physician or gynaecologist to whom a woman or a woman without active legal capacity with a guardian turned to with the request to terminate pregnancy. The existence and duration of pregnancy shall be established on the basis of the information received upon questioning and examination of the woman and, if necessary, by means of diagnostic equipment.

§ 11. Deciding on admissibility of termination of pregnancy

(1) A doctor who terminates pregnancy shall decide on the admissibility of termination of pregnancy based on the requirements specified in sections 5 and 6 of this Act.

(2) The admissibility of termination of pregnancy in the cases described in clauses 6 (2) 1), 2) and 3) of this Act shall be ascertained with the decision of at least three doctors – two or more gynaecologists and a medical specialist or specialists resulting from the woman’s illness or health problems, based on the requirements specified in section 9 of this Act. If necessary, a social worker shall be involved in the making of a decision in addition to doctors in the cases specified in clause 6 (2) 3) of this Act. A decision on admissibility of termination of pregnancy shall be in written form and certified by all the persons making the decision with their signatures.

(3) The existence of conditions specified in clauses 6 (2) 4) and 5) of this Act shall be ascertained on the basis of a pregnant woman’s passport, birth certificate or other identity document.

§ 12. Counselling obligation

(1) Before the termination of pregnancy the doctor who terminates pregnancy must explain to the woman who wishes to terminate her pregnancy or to the guardian who requests the termination of pregnancy of a woman without active legal capacity the biological and medical nature of termination of pregnancy and the involved risks, including the potential complications.

(2) An act shall be prepared on the counselling specified in subsection (1) of this section which shall be signed by the counselled person and the doctor having conducted the counselling. The requirements for the format of the act of counselling shall be established by a regulation of the Minister of Social Affairs.

§ 13. Preparation of termination of pregnancy

(1) The doctor having established the existence and duration of pregnancy shall perform all the examinations and acts corresponding to the relevant treatment standard prior to referral to termination of pregnancy. The list of examinations and acts prior to and following the termination of pregnancy shall be established by a regulation of the Minister of Social Affairs.

(2) The doctor who terminates pregnancy shall check the results of examinations specified in subsection (1) of this section prior to termination of pregnancy.
(3) A woman whose pregnancy is terminated shall be admitted for hospital treatment if her pregnancy has lasted for more than 11 weeks or if the woman’s medical status so requires.

§ 14. Acts following termination of pregnancy

(1) Immediately after termination of pregnancy a doctor shall apply measures preventing complications which may accompany the termination of pregnancy. The list of measures shall be established by a regulation of the Minister of Social Affairs.

(2) A woman whose pregnancy was terminated shall have the right within two weeks following the termination of pregnancy to consult with the doctor having established the existence and duration of pregnancy out of turn on the conditions of emergency care.

§ 15. Documents concerning termination of pregnancy

The health care institution having terminated the pregnancy shall draw the documents necessary for termination of pregnancy. The format of documents concerning the termination of pregnancy and procedure for preservation thereof shall be established by a regulation of the Minister of Social Affairs, taking account of the requirements for processing sensitive personal data provided for in the law.

§ 16. Collection of data on termination of pregnancy

(1) The Ministry of Social Affairs shall collect and process data concerning the termination of pregnancy for the development of national social policy in the field of family planning, increasing the number of births and decreasing the number of abortions as well as for ensuring the quality of health services and exercising supervision over the organisers of termination of pregnancy and as an obligation of a member of the World Health Organisation for the submission of reliable data comparable with other countries thereto.

(2) The Minister of Social Affairs shall establish:
1) the composition of data to be collected and processed;
2) the conditions and procedure for processing of data;
3) the procedure for coding and submission of data.

(3) The collection and processing of data concerning the termination of pregnancy shall be in compliance with this Act, Public Information Act, Personal Data Protection Act and other Acts and the legislation established on the basis thereof, which ensure the processing of sensitive personal data in the authority prescribed therefor in this Act and the comprehensive protection of personal data by all possible organisational and technical means, including the transfer of coded data to the person who maintains a database or to a person authorised thereby.

[RT I 2007, 12, 66 - entry into force 01.01.2008]

§ 17. Establishment of termination of pregnancy database

(1) The Minister of Social Affairs shall establish a termination of pregnancy database for the collection and processing of data related to termination of pregnancy.

(2) The establishment of termination of pregnancy database shall take place pursuant to the procedure provided for in the Public Information Act.

[RT I 2007, 12, 66 - entry into force 01.01.2008]

§ 18. Chief processor and authorised processor of database

(1) The chief processor of termination of pregnancy database shall be the Ministry of Social Affairs.

(2) The exerciser of the rights of an authorised processor of termination of pregnancy database shall be determined by the Minister of Social Affairs.

Chapter 3
STERILISATION

§ 19. Voluntariness of sterilisation

(1) A person may only be sterilised at his or her own request. A request for sterilisation shall be in written form.

(2) The sterilisation of a person with restricted active legal capacity shall be decided by a county court in proceedings on petition of the guardian of a person. Minors may not be sterilised.

[RT I 2009, 60, 395 - entry into force 01.07.2010]
§ 20. Admissibility of sterilisation

(1) An adult may be sterilised if at least one of the following circumstances exists:
   1) the person has at least three children;
   2) the person is older than 35;
   3) pregnancy endangers the woman’s health;
   4) other contraceptive devices are contraindicated;
   5) the person is in danger of having a child with severe mental or physical damage to health;
   6) the person’s illness or health problem hinders the raising of a child.

(2) An adult with restricted active legal capacity may be sterilised if at least one of the conditions specified in clauses (1) 3), 4), 5) or 6) of this section exists.

(3) The list of illnesses and health problems in case of which sterilisation is allowed shall be established by a regulation of the Minister of Social Affairs.

[RT I 2005, 39, 308 - entry into force 01.01.2006]

§ 21. Sole right of doctor to perform sterilisation

A person can be sterilised by a gynaecologist, surgeon or urologist.

§ 22. Place of sterilisation

A person may only be sterilised at a health care institution which has a surgery, urology or gynaecology department.

§ 23. Deciding on admissibility of sterilisation

(1) The conditions specified in clauses 20 (1) 1) and 2) of this Act shall be ascertained by a doctor performing the sterilisation on the basis of a person’s passport.

(2) The admissibility of sterilisation in the cases specified in clauses 20 (1) 3), 4) and 5) shall be decided with the decision of at least three doctors. If necessary, a social worker shall also be involved in the making of decision in addition to the doctors in the case specified in clause 20 (1) 6) of this Act. The decision on admissibility of sterilisation shall be in written form and certified by all the persons making the decision with their signatures.

§ 24. Counselling obligation

(1) Before the sterilisation and after deciding on the admissibility of sterilisation, the doctor who performs the sterilisation must explain to the person who wishes to be sterilised or to the guardian who requests the sterilisation of a person without active legal capacity the biological and medical nature of sterilisation and the involved risks, including the potential complications.

(2) An act shall be prepared on the counselling specified in subsection (1) of this section which shall be signed by the counselled person and the doctor having conducted the counselling. The requirements for the format of the act of counselling shall be established by a regulation of the Minister of Social Affairs.

(3) A person shall not be sterilised before one month has passed since the counselling specified in this section.

§ 25. Documentation of sterilisation

An entry shall be made on the sterilisation in the record of operations and the person’s medical history. Data concerning sterilisation are sensitive personal data and the formation of databases thereof shall not be allowed.

Chapter 4
IMPLEMENTING PROVISIONS

§ 26. [Omitted from this text]