



# REPUBLIC OF SAN MARINO

## **We the Captains Regent of the Most Serene Republic of San Marino**

*Having regard to Article 4 of Constitutional Law n. 185/2005 and to Article 6 of Qualified Law no. 186/2005;*

*Hereby promulgate and order the publication of the following Ordinary Law, approved by the Great and General Council during its sitting of 31 August 2022:*

### **LAW no. 127 of 7 September 2022**

#### **REGULATING VOLUNTARY TERMINATION OF PREGNANCY**

##### **Art. 1**

*(Purposes and general principles)*

1. This Law shall regulate voluntary termination of pregnancy (VTP).
2. The Social Security Institute (hereinafter also referred to as "SSI") shall guarantee access to VTP to women assisted by the SSI who request it, in accordance with this Law, also through the conclusion of special agreements with accredited public and private hospital and health facilities, inside and outside the Republic of San Marino.
3. From the moment a request is processed and throughout all stages of the termination of pregnancy, health care and related expenses shall be borne by the Social Security Institute. To this end, the SSI shall issue specific guidelines and protocols based on World Health Organisation (WHO) indications and shall adjust the relevant expenditure chapters.
4. Under no circumstances shall voluntary termination of pregnancy be considered as birth control and limitation means.

CHAPTER I  
VOLUNTARY TERMINATION OF PREGNANCY

**Art. 2**

*(Establishment and functions of the Counselling Centre)*

1. A Counselling Centre managed entirely by the SSI shall be established, either by setting up a new facility or reorganising existing units.

2. Through the Counselling Centre, the Social Security Institute shall provide psychological, gynaecological and andrological advice and assistance for women and men, including minors, at all stages of their lives and according to their sexual orientation, ensuring the utmost confidentiality and resorting to specifically trained SSI personnel. No mention shall be made in the electronic health file of any access to the Counselling Centre for information purposes. Access to the Counselling Centre shall be free, optional and free of charge.

The Counselling Centre shall provide the following services:

- a) Reception, assistance and support for both women and couples choosing VTP or motherhood through health and gynaecological counselling services and programmes. It shall inform about the social, health and welfare services offered and the methods of performing voluntary termination of pregnancy. It shall provide outpatient care and/or a connection with the hospital unit, by guaranteeing continuity of the process chosen while fully respecting privacy;
- b) Psychological assistance to pregnant women and during the postpartum period, women or couples choosing motherhood, women or couples choosing VTP in all phases before and after VTP, menopausal women, and all those who need psychological counselling related to gender orientation;
- c) Counselling and information aimed at the prevention of unwanted pregnancies, sexually transmitted diseases, guidance on contraceptive methods, and the promotion of safe sex;
- d) Access and assistance to minors, including those unaccompanied by their parent or guardian, on the safest and most effective methods of contraception, including emergency methods, in order to avoid unwanted pregnancies, as well as information on safe sex in order to prevent sexually transmitted diseases or infections. Access to emergency contraception shall not require any authorisation by the parents or guardians, nor any prescription. Emergency contraception shall be provided free of charge by the Counselling Centre to minors who request it, by recording the doctor's prescription;
- e) Planning of andrological and urological counselling activities for youth and adults, in order to ensure the prevention, diagnosis and treatment of andrological diseases and dysfunctions;
- f) Planning of screening activities to monitor female and male sexual and reproductive health.

3. The woman's partner or other trusted person may take part, with her consent, in the care and health activities supported by the Counselling Centre.

4. The SSI shall guarantee that within the Counselling Centre all personnel directly involved, at every stage of VTP-related procedures, are not conscientious objectors within the meaning of Article 15.

**Art. 3**

*(Prevention of unwanted pregnancies and sexuality education)*

1. The Social Security Institute and the School shall develop, through their services, the necessary initiatives or programmes to prevent unwanted pregnancies. In particular, they shall:

- a) Put in place operational methods to actively provide appropriate tools for socio-affective and sexual education and health promotion, which shall be age-appropriate and evidence-based in relation to the various population groups, including programmes targeted at persons with disabilities;

- b) Undertake to carry out and disseminate information campaigns, particularly destined to young people, including through the media and the development of applications, on prevention of unwanted pregnancies and sexually transmitted diseases or infections;
  - c) Promote refresher courses for health personnel, both medical and paramedical, on sexual and reproductive health, contraceptive methods and the use of the most modern and least risky techniques, which are respectful of the woman's physical and psychological integrity in relation to VTP;
  - d) Implement modalities for the sharing of information and exchange of views between health and education professionals on the topics of conscious and responsible procreation, contraceptive methods, the course of pregnancy and of pregnancy termination, psycho-social implications, and the prevention and suppression of violence against women.
2. The State shall also promote, within the school system, sexual, reproductive and affective education as an integral part of young people's personal growth and development, with a special focus on:
- a) Scientific knowledge of the human body, its metabolic, hormonal, reproductive and sexual development;
  - b) The concept of conscious and responsible procreation, recognising the equality and equal responsibility of men and women;
  - c) The prevention of unwanted pregnancies and sexually transmitted diseases or infections;
  - d) The idea of a fully aware sexuality, even without the purpose of procreating.
3. The contents of the information campaigns referred to in paragraph 1, letter b) shall be drafted and updated by the SSI, made accessible to persons with sensory disabilities and translated into English and the main foreign languages, according to the nationality of origin of the migrants living in the Republic of San Marino.
4. The Education Department, in cooperation with the SSI and the School Directorates, shall be responsible for the inclusion of the educational activities referred to in paragraph 2 in the school curricula and shall supervise their regular updating.
5. The Health Authority shall be required to disseminate a questionnaire, solely for statistical purposes, aimed only at collecting data useful to define policies in support of conscious and responsible procreation and the means to ensure anonymity at each stage.

**Art. 4**  
*(Common provisions)*

1. A woman may request voluntary termination of pregnancy:
- a) By the end of the twelfth week of gestation, in accordance with Article 5;
  - b) After the twelfth week of gestation, if there is danger to the woman's life or if there are proven abnormalities and malformations of the foetus that pose a serious risk to the woman's physical or psychological health or if the pregnancy results from rape or incest, in accordance with Article 6.

The weeks of gestation shall be certified by a gynaecologist from the SSI or with whom the SSI has concluded an agreement. In case VTP is performed outside the territory of the Republic, the weeks of gestation shall be certified by a doctor from the obstetrics-gynaecology service of the hospital with which the SSI has concluded an agreement and where the intervention is performed.

2. The request for voluntary termination of pregnancy shall only be accepted with the woman's informed consent and shall be processed:
- a) By the Counselling Centre, in the case of a request for VTP within the twelfth week of an established pregnancy;
  - b) As an alternative, at the woman's choice, by the Counselling Centre or the gynaecologist from the SSI, in case of a request for VTP after the twelfth week of an established pregnancy.
3. The request referred to in the preceding paragraphs shall be made in writing, including electronically. With a view to processing the requests and to adequately ensuring confidentiality, the

SSI shall set up, within two months from the entry into force of this Law, the necessary technological tools to allow the submission of requests also electronically.

4. The SSI gynaecological service shall provide women with all health and administrative information regarding the intervention, how and when it shall be performed, the bureaucratic procedure to be followed, and any possible side effects. Women shall always be guaranteed:

- a) If requested, psychological assistance before and after the termination of pregnancy by the personnel from the SSI or with whom the SSI has concluded an agreement;
- b) The confidentiality of their personal data and privacy at all stages.

5. In relation to the provisions of the preceding paragraphs, the Counselling Centre shall also carry out the following activities in favour of women submitting a request:

- a) It shall inform them of their rights under the law, as well as of the social, health and welfare services offered by facilities operating within and outside the territory of the Republic;
- b) It shall explain to them how to obtain compliance with labour law provisions protecting pregnant women;
- c) It shall inform them of the recognised associations operating in the territory that can provide support to mothers.

The above information, together with the health information provided by the gynaecological service of the SSI, shall be an integral part of the informed consent given by women.

6. The SSI shall organise periodic training, meetings and refresher courses for all professionals, both medical and non-medical, involved in the various stages related to voluntary termination of pregnancy.

7. At any time prior to the performance of voluntary termination of pregnancy, women shall have the right to withdraw their consent already given to such termination.

8. In the event of repeated access to VTP, the gynaecologist shall suggest psychological support to the woman by the Counselling Centre.

9. Voluntary termination of pregnancy shall be prohibited if there is evidence to suggest that it was requested with reference to the sex of the foetus.

10. Except in the case of imminent danger to the woman's life, the doctor shall not perform voluntary termination of pregnancy and shall report it to the judicial authorities when, despite the request, objective facts emerge suggesting that the woman has been forced or induced by a third party to terminate her pregnancy, which she would instead wish to carry out. The judicial authority shall in that case decide within the time-limits set out in Article 5, paragraph 2.

11. The State and the SSI shall guarantee all appropriate support measures so that the woman is not induced to terminate her pregnancy by economic, employment, social or cultural difficulties, or for any other reason other than her free choice.

## **Art. 5**

### *(Voluntary termination of pregnancy within the twelfth week)*

1. A woman of full age may request VTP by the end of the twelfth week of gestation without having to provide any reasons for such a request.

2. Within the same time-limit as in paragraph 1, a woman under the age of eighteen years may request voluntary termination of pregnancy, subject to the consent of those exercising parental authority over her. In case of conflict between the minor's wishes and the wishes of the persons exercising parental authority, or in the event of their refusal to meet the request, or in the event of dissenting opinions, or when there are serious reasons that prevent or discourage consultation with the persons exercising parental authority or guardianship, the doctor shall contact the Minors' Protection Service, which, within three days, shall transmit a report to the Guardianship Judge. Within five days, the Guardianship Judge, after hearing the minor and taking into account her wishes and the report of the Minors' Protection Service, may authorise the termination of pregnancy by an act that shall not be challenged.

3. Without prejudice to the reporting obligations set forth in Article 19 of Law no. 97 of 20 June 2008, in cases where the minor is a victim of rape or incest, the request for voluntary termination of pregnancy may be made autonomously, without the consent of those exercising parental authority or of the Guardianship Judge.
4. VTP shall be performed within seven days of the woman's request, without prejudice to the provisions of paragraph 2, and in any case in sufficient time to avoid exceeding the twelve weeks of gestation, in one of the following ways, according to the woman's choice, after consultation with the gynaecologist involved:
  - a) Pharmacological intervention, performed within the SSI hospital, or in a public or private accredited facility with which the SSI has concluded an agreement, either inside or outside San Marino territory. This intervention shall be performed within the timeframe indicated in the package insert of the drug used and it shall be the preferred method proposed, if the woman's request for VTP is made within the timeframe envisaged for such drug;
  - b) Surgical intervention, performed within the SSI hospital, or in a public or private accredited facility with which the SSI has concluded an agreement, either inside or outside San Marino territory.
5. To calculate the time-limit of the end of the twelfth week of gestation to access VTP, the date of submission of the request for VTP shall be considered.

#### **Art. 6**

##### *(Voluntary termination of pregnancy after the twelfth week)*

1. Voluntary termination of pregnancy after the twelfth week shall be requested and performed as long as there is no possibility of autonomous life for the foetus, in the light of the best neonatal resuscitation science. The SSI shall periodically define this time-limit, according to the evolution of scientific progress, taking into account the indications provided by San Marino Bioethics Committee. To this end, it shall develop appropriate health protocols pursuant to the provisions of Article 19. Voluntary termination of pregnancy shall be requested and performed, within seven days of the woman's request being processed, in the following cases:
  - a) If there is danger to the woman's life;
  - b) If there are established abnormalities and malformations of the foetus, diagnosed by specialists from the SSI or third level facilities, with which the SSI has concluded an agreement, in the event that such abnormalities and malformations entail a serious risk for the woman's physical or psychological health. The risk to physical health shall be established by the attending physician; the risk to psychological or psychic health shall be established by a psychiatrist from the SSI or with whom the SSI has concluded an agreement;
  - c) If the pregnancy results from rape or incest and the violence has been reported to the police forces, or from the time when the police forces report the offence to the competent authority for entry in the appropriate register.
2. The report of violence referred to in paragraph 1, letter c) shall be verified by the attending physician with the police forces or the competent authority concerned at the time of the request for VTP. If the woman has not reported the violence, the attending physician shall be required to provide all information on the services of the anti-violence network and on the protection measures provided for by this Law and by Law no. 97/2008 and subsequent amendments, without prejudice to the reporting obligations under Article 19 of Law no.97/2008.
3. In cases where the woman's life is in danger, if there is a possibility of autonomous life for the foetus, the doctor shall terminate the pregnancy by delivery and shall take all appropriate measures to safeguard the life of the foetus: the termination of pregnancy may take place in any week. In the case of a woman under the age of eighteen years, the termination of pregnancy may take place irrespective of the consent of the persons exercising parental responsibility or guardianship.
4. In the case of a woman under the age of eighteen years, voluntary termination of pregnancy, within the meaning of paragraph 1, with the exclusion of letter c), shall be requested with the consent

of those exercising parental authority or guardianship over her, in accordance with the provisions of Article 5.

5. The termination of pregnancy referred to in this Article shall be performed in accordance with the most suitable methods that scientific progress permits and may be performed within the SSI hospital, or in an accredited public facility outside San Marino territory, with which the SSI has concluded an agreement.

#### **Art. 7**

*(Termination of pregnancy in the event of imminent danger to the woman's life)*

1. Termination of pregnancy may be performed as an emergency intervention in the event of imminent danger to the woman's life, including a minor, in any week of gestation and, where possible, with a certification of urgency by the attending physician. If there is a possibility of autonomous life for the foetus, as defined in Article 6, paragraph 1, the doctor shall take all appropriate measures to safeguard its life in accordance with Article 6, paragraph 1.

#### **Art. 8**

*(Termination of pregnancy of a disqualified woman)*

1. If a woman is disqualified by reason of insanity, the request for voluntary termination of pregnancy referred to in Articles 5 and 6 may be submitted not only by her personally but also by her guardian.

2. In the case of a request submitted by the disqualified woman, the opinion of the guardian shall be heard. The request submitted by the guardian shall, if possible, be confirmed by the woman. The competent doctor shall transmit to the competent judge, within three days of the submission of the request, a report containing information on the request and its reasons, on the woman's attitude, on her pregnancy and on the nature of her insanity, as well as the opinion of the guardian, if any.

3. The judge, after hearing the members of the Family Council, if he deems it appropriate, and taking into account the doctor's report, may authorise, within five days of receiving such report, the termination of pregnancy by an act that shall not be challenged

#### **Art. 9**

*(Termination of pregnancy of an incapacitated woman)*

1. If the woman is incapacitated, the request for voluntary termination of pregnancy referred to in Articles 5 and 6 may be submitted by her personally, after hearing the guardian.

2. After having obtained a report from the social services of the SSI, the competent doctor shall send to the competent judge, within three days from the submission of the request, a report containing information on the request, on the woman's attitude, on her pregnancy and on the state of her incapacitation in relation to the decision on the voluntary termination of pregnancy, as well as the opinion of the guardian, if any.

3. After hearing the Family Council and the incapacitated woman and taking into account the doctor's report, the judge may authorise, within five days of receiving the report, the termination of pregnancy by means of an act that shall not be challenged, if he deems it appropriate.

4. The report by the competent social services referred to in paragraph 2 shall also be acquired in the case of voluntary termination of pregnancy of a disqualified woman.

**Art. 10**

*(Abstention from work)*

1. Following VTP, the woman shall temporarily abstain from work according to the indications of the attending physician. To this end, a certificate of abstention for “common illness” shall be issued to protect the woman's privacy.

**Art. 11**

*(Management of VTP personnel)*

1. In all cases, the SSI shall be required to ensure that the procedures provided for in this Law are fulfilled and to monitor and guarantee their implementation. If this is not possible, the SSI shall be required to draw up special agreements with non-objector professionals.

CHAPTER II

INTERVENTIONS TO PREVENT UNWANTED PREGNANCIES AND TO GUARANTEE THE  
RIGHT TO CONSCIOUS AND RESPONSIBLE PROCREATION

**Art. 12**

*(Monitoring system)*

1. The SSI Executive Committee shall be responsible for defining a monitoring system to collect:
  - a) Data on requests for VTP, through the drafting of specifically dedicated forms, with particular reference to the services and facilities that perform such intervention and the procedures used to terminate the pregnancy (pharmacological, surgical, emergency) and the causes that lead women to resort to VTP, where reported; the services provided when resorting to the Counselling Centre, ensuring the collection of data exclusively for statistical purposes, also with a view to the continuous improvement of services;
  - b) Epidemiological data and specific data on sexually transmitted and gynaecological diseases and, on the basis of the information collected through the Counselling Centre, data to update the list of invalidating gynaecological diseases, such as endometriosis, and to provide specific health guidelines.
2. The medical health professional of all facilities involved shall be responsible for handing out the form referred to in letter b) of paragraph 1 at each admission or discharge. He shall also provide appropriate information on its use and purpose. If the woman expresses an objection to have her personal data used, the form shall be filled in and used anonymously, mentioning the objection.
3. The data referred to in paragraph 1 shall be collected anonymously and analysed by the Executive Committee of the SSI, which shall submit an annual report to the Ministry of Health and to the Health Authority for the purpose of verifying the implementation of this Law and the regulations for the social protection of motherhood. The information acquired as part of the monitoring process shall be aimed at:
  - a) Developing and updating the strategies and operational models for the prevention and promotion of sexual and reproductive health, also within the framework of the National Health and Socio-Health Plan;
  - b) Measuring the effectiveness and efficiency of services provided to users and of procedures.

### **Art. 13**

#### *(Facilitated access to contraceptive methods)*

1. Pursuant to Law no. 40 of 22 December 1972, and subsequent amendments, the import tax rate for barrier contraceptives (condoms, diaphragms) and emergency postcoital contraceptives shall be 6%.
2. Postcoital contraceptives (so-called morning-after pill) shall be considered an emergency contraceptive method and as such, they shall not replace a regular contraceptive method. Emergency contraceptives shall be accessible free of charge for SSI patients and be distributed directly by the Emergency Department and the attending physician. Access to emergency contraception shall not require any authorisation by the parents or guardians in the case of women under 18 years of age. The doctor shall be responsible for assessing whether the case shall be reported to the Minors' Service.

### CHAPTER III

#### CONSCIENTIOUS OBJECTION AND THE WOMAN'S RIGHT TO PRIVACY

### **Art. 14**

#### *(Strengthening of confidentiality protection - right to privacy)*

1. Everyone shall have the right to privacy with regard to sexual health services and care and with regard to their medical records. Everyone shall have the right to decide on the disclosure of information concerning his or her sexual choices and behaviour, as well as any other matter relating to sexuality.
2. The right to confidentiality of personal information and life choices, dignity and personal freedom shall be guaranteed to the woman who has requested and undergone a voluntary termination of pregnancy or has expressed her intention to undergo such a procedure. Data, information and news shall not be disclosed without the consent of the persons concerned. Their identity shall be kept confidential at all times and by any means in accordance with data protection regulations and this Article.
3. The SSI, in collaboration with the Organisational Unit of the Office for Purchases, Contracts and Personal Data Protection, shall be responsible for establishing a specific internal procedure to collect and keep health data relating to VTP procedures. The aim is to guarantee the confidentiality of patients both in the operational phase relating to access to health services, and in the subsequent data retention phase in accordance with Law no. 171 of 21 December 2018 and subsequent amendments.
4. The provisions of paragraph 2 shall be complied with over the entire process undertaken by the woman. If a written request for voluntary termination of pregnancy is submitted, the data contained in the electronic or paper medical record shall be granted the highest levels of confidentiality.
5. In order to protect the dignity of women from any moral judgement or psychological pressure in relation to their personal choice or intention to resort to the procedures or interventions provided for by this law, any public employee or health professional with whom the SSI has concluded an agreement, regardless of the nature of their employment relationship, who:
  - a) Does not process any information and documents acquired during or as a result of the performance of his duties in accordance with Article 18 of Law no. 141 of 5 September 2014;
  - b) Discloses data, information and news which could reveal the identity of the person,shall be punishable for serious violation of professional duties and reprehensible moral and civil conduct, as well as for acts contrary to the duty of loyalty with reference to the obligation of confidentiality, pursuant to Law no. 106 of 31 July 2009, without prejudice to the reporting obligations referred to in Article 19 of Law no. 97/2008. Unless the act constitutes a more serious

offence, failure to comply with paragraphs 1 and 2 shall be punished pursuant to Article 72 of Law no. 171/2018.

6. If the employee discloses data, information and news covered by the provisions of Law no. 97/2008, he shall also be punished pursuant to Article 16 of the same Law.

7. The Social Security Institute shall issue a specific information note on the processing of personal data, pursuant to Law no. 171/2018 and subsequent amendments. In such information note, the principles set out in the preceding paragraphs shall be put into practice and the data and contact details of the data controller and the data processor, as well as the procedures for exercising the rights of the persons concerned, shall be indicated.

### **Art. 15**

#### *(Conscientious objection of medical and non-medical personnel)*

1. The medical and non-medical personnel employed by the SSI, including newly recruited, with the exception of administrative personnel, shall inform in writing the SSI Executive Committee and the Health Authority of their choice regarding conscientious objection within thirty days from the entry into force of this Law, or within fifteen days from taking up their duties.

2. Medical and non-medical personnel, with the exception of administrative personnel, in service at accredited private facilities in San Marino shall communicate their choice to the Health Authority within the same time-limit referred to in paragraph 1.

3. The choice referred to in paragraphs 1 and 2 may be changed at any time by written communication to the SSI Executive Committee and the Health Authority respectively.

4. Conscientious objection shall exempt the personnel referred to in paragraphs 1 and 2 from carrying out the procedures and activities specifically aimed at terminating a pregnancy, but shall in no way exempt them from providing assistance before and afterwards. In the case of a pharmacological abortion, in which the administration of the drug and the expulsion of the embryo are not concurrent, conscientious objection shall not exempt the medical and healthcare personnel from all activities following the administration of the drug, if there are no non-objectors on duty.

5. Conscientious objection shall not be invoked if the intervention is indispensable to save the woman's life in imminent danger.

6. The members of the personnel who choose to be conscientious objectors shall not be authorised to carry out VTP procedures as independent professionals.

7. Conscientious objection shall be deemed to be withdrawn, with immediate effect, if the person in question takes part in procedures or interventions, at a hospital or in accredited private facilities within San Marino, for the termination of pregnancy in accordance with the provisions of this Law.

8. Except for the cases referred to in paragraph 5, failure to comply with the provisions of paragraph 7 shall be punishable under the law with a disciplinary sanction of suspension. In the event of repeated infringement, the professional shall be punished with dismissal for misconduct. If such professional is in service at private clinics which have concluded an agreement with the SSI, the collaboration contract shall be terminated by right.

9. A professional employed by the SSI who for any reason provides false information to dissuade the woman from requesting a VTP, or does not declare her choice within the time-limits set out in paragraphs 1 and 2, shall be punishable for violation of professional duties and reprehensible moral and civil conduct, pursuant to Law no. 106/2009. If he is employed by private clinics having concluded an agreement with the SSI, the collaboration contract shall be terminated by right.

10. Information on the choice of objection or non-objection, concerning medical and non-medical personnel working in the Obstetrics and Gynaecology Unit, the Counselling Centre or in private clinics, shall be made available to patients who request it.

11. If the necessary non-objector SSI employees are not available to carry out VTP procedures, the SSI may compensate such lack in accordance with Article 11. In this case, the medical personnel

with whom the SSI has concluded an agreement shall communicate that they are non-objectors prior to the conclusion of the contract.

**Art. 16**

*(Amendment to Article 153 of the Criminal Code)*

1. Article 153 of the Criminal Code shall be replaced by the following:

“Art.153

*(Unlawful termination of pregnancy)*

1. A pregnant woman who deliberately terminates her pregnancy outside the cases permitted by law and anyone who contributes to such termination shall be punished with second degree imprisonment.
  2. Third degree imprisonment shall be applied to the following cases of termination of pregnancy:
    - a) The fact is committed without the woman’s consent, outside the cases permitted by law;
    - b) The offender carries out unlawful practices or acts for profit;
    - c) The woman dies or suffers serious injuries as a consequence of the termination of pregnancy, in the cases punished by this Article.
  3. Third degree imprisonment and fourth degree disqualification shall be applied if the offender exercises a health profession, except in cases where termination of pregnancy is permitted.
- 3-bis. Whoever by violence or threat, artifice or deception or abusing his authority persuades a woman to terminate a pregnancy or, on the contrary, forces her to carry it to term when she would like to terminate it, shall be punished by third-degree imprisonment. If the woman is under eighteen years of age or disqualified or incapacitated, fourth-degree imprisonment shall be applied.”.

**Art. 17**

*(Introduction of Article 153-bis of the Criminal Code)*

1. After Article 153 of the Criminal Code, the following Article shall be added:

“Art. 153-bis

*(Prohibition of trade in gametes, embryos, foetal tissues)*

1. Whoever in any form exercises, organises or advertises marketing, export or import activities at any title of gametes, embryos and tissues resulting from the termination of pregnancy shall be punished by third-degree imprisonment.”.

**Art. 18**

*(Repeal)*

1. Article 154 of the Criminal Code shall be repealed.

**Art. 19**

*(Transitional provisions)*

1. Within sixty days of the entry into force of this Law, the Social Security Institute shall be required to:
  - a) Prepare the necessary acts and conclude agreements with public and private facilities inside and outside San Marino for the purposes of this Law;

- b) Prepare the necessary forms for access to VTP, including information on informed consent;
  - c) Prepare the health protocols referred to in Article 1, paragraph 3;
  - d) Propose a training plan for all medical and non-medical professionals involved in the various stages related to VTP;
  - e) Implement the Tecum APP with information on VTP in the Republic of San Marino;
  - f) Set up and launch the Counselling Centre.
2. Within sixty days of the entry into force of this Law, the Health Authority shall prepare the questionnaire referred to in Article 3, paragraph 5 and provide the data in its possession concerning the termination of pregnancy to the Ministry of Health for the purposes of the report referred to in paragraph 3.
3. The Ministry of Health, together with the Executive Committee of the SSI, shall report on the activities mentioned in paragraph 1 to the IV Permanent Parliamentary Commission, no later than 45 days after the time-limit mentioned in paragraph 1.
4. Pending the activities referred to in paragraph 1 and until the Counselling Centre is established, requests for access to voluntary termination of pregnancy shall be processed by the Obstetrics and Gynaecology Unit of the SSI, which shall refer them to the healthcare facility outside San Marino with which the SSI has concluded an agreement.

**Art. 20**  
*(Annual report)*

1. By June of each year, starting from the year following the entry into force of this Law, the Minister of Health and the Minister responsible for Family shall submit to the IV Permanent Parliamentary Commission a report on the implementation of this Law and its effects, also with reference to prevention measures.

**Art. 21**  
*(Entry into force)*

1. This Law shall enter into force on the fifth day following that of its legal publication.

*Done at Our Residence, on 7 September 2022/1722 since the Foundation of the Republic.*

THE CAPTAINS REGENT  
*Oscar Mina – Paolo Rondelli*

THE MINISTER  
OF INTERNAL AFFAIRS  
*Elena Tonnini*