RESOURCE

if when how

Lawyering for Reproductive Justice

WHAT YOU NEED TO KNOW FOR PROVIDERS

Mandatory Reporting Requirements, Law Enforcement, and Patient Confidentiality in Wyoming

Note: This resource was last updated in November 2026.

Why use this fact sheet?

Confidentiality is central to the provider-patient relationship and a core part of medical ethics. In addition, violating patient confidentiality unnecessarily may carry professional or legal penalties. This fact sheet provides an overview of some of the major mandatory reporting requirements and where they intersect with patient privacy – with a specific focus on self-managed abortion. This factsheet does not include reporting requirements that are specific to long-term care facilities. This fact sheet does not contain legal advice, and we recommend that providers who have further questions about their reporting requirements consult an in-state attorney for more information.

Who wrote this guide and why?

If/When/How: Lawyering for Reproductive Justice is a legal advocacy organization. We created this fact sheet in part because the most common cause of the criminalization of people who self-manage their own abortion care is unnecessary reports to law enforcement by medical providers. We also frequently field questions from providers who are concerned about what they may need to report. We know providers share our concern that risk to patients may be high when a report to law enforcement is triggered. In the case of reporting self-managed abortion, the consequences to patients might include jail time, losing custody of their children, a criminal record, or fines – all of which are unjust responses by an overzealous, racially biased system and frequently violate people's rights. Failure to report when it is necessary also carries risk of liability, so we want providers to feel confident in their ability to discern when reporting is legally required, and what must be included.

Providers can also help protect their patients from unjust criminalization.

Know your mandatory reporting obligations, and where they intersect with patient privacy.

This fact sheet covers most mandatory reporting requirements that are in Wyoming's laws. Your hospital, clinic, or practice may have additional reporting requirements that you should be familiar with. Providers can help patients maintain their agency and confidentiality while fulfilling their mandatory reporting obligations by:

- Not reporting patients if not legally required
- Not asking patients for information that is not necessary to patient care
- Informing patients of what the provider may have to report prior to taking patient history or treating the patient
- Carefully considering what information is necessary to document in a medical chart

Providers can also help protect their patients from unjust criminalization by ensuring that their hospital or clinic reporting policies do not conflict with HIPAA or state laws on medical privacy.

Major Mandatory Reporting Requirements in Wyoming[1]

Crime: Self-managed abortion is not a crime for abortion-seekers.[2]

Wyoming health care providers are also not required to report crimes.

Certain traumas and injuries: Self-managed abortion is not a reportable injury.

Wyoming health care providers are also not required to report injuries.

Child and vulnerable adult abuse: A minor or vulnerable adult self-managing an abortion is not ordinarily reportable as abuse.

Legal requirements for child abuse reporting are fraught with bias, in particular toward families of color and families struggling to make ends meet. However, all health care providers in Wyoming who diagnose, examine, treat, or provide counseling are mandatory reporters for suspected child abuse[3] and neglect.[4][5] Health care providers are also mandatory reporters for suspected vulnerable adult abuse[6][7] and neglect.[8] Because suspicion is subjective and can often stem from bias, health care providers should thoroughly examine any potential bias at play when deciding whether or not a report is required under the law. If a provider decides to make an abuse report, the fact that a minor or vulnerable adult self-managed an abortion does not ordinarily need to be included in the report.

Have more questions? Reach out to request technical assistance.

Statutory rape: If a provider needs to report a statutory rape, the fact that the patient may have attempted to end a pregnancy is not relevant to the investigation.

Wyoming requires all health care providers to report statutory rape (sexual abuse).[9] Sexual abuse includes sex between someone 16 or older and someone younger than 13, sexual contact between someone aged 13-15 and someone 17 or older, if they have an age gap of 4 or more years, and sex between someone under 16 and someone under 13 if they have an age gap of 3 or more years.[10] These apply regardless of consent. Typically, the age of a patient's sexual partner is not relevant to treatment of a patient. Health care providers should inform adolescent patients about what constitutes reportable sexual conduct prior to talking to them about care where possible.

Overdoses and drug use during pregnancy: Wyoming does not require overdose or drug use reporting.

Wyoming law does not indicate that drug or alcohol use during pregnancy is viewed as child abuse. A newborn's positive toxicology test alone does not require a child abuse report. A report is only required if there are other factors that indicate the newborn is at risk.[11]

Self-harm: Mental health providers are not required to report a client's intention to self-manage an abortion.

Wyoming law does not require mental health providers to report when someone is a danger to themselves or others. If a client is at risk of physical harm via unsafe methods of self-management, such as a plan to throw themselves down the stairs,[12] mental health providers can help manage this risk without reporting. Other clinical interventions, such as letting the patient know where to access a safe abortion, can help clients navigate their decision safely.

Abortion:[13] If an abortion provider has actual knowledge that a patient self-managed their abortion, that abortion may be reportable via a de-identified vital statistics form.

Because the state's definition of "abortion" explicitly includes self-management,[14] Wyoming's requirements for vital statistics abortion reporting may include self-managed abortion.[15] This reporting must not include any identifying information about the patient.[16] Providers are also not required to investigate their patients to determine if they self-managed.

Fetal death: Under the current definition of "fetal death," health care providers are not required to report induced termination of pregnancy, including self-managed abortion, as fetal death.

Wyoming requires the registration of fetal death (stillbirth)[17] with the state health officer when the pregnancy is dated at 20 or more weeks.[18] Abortions are not reportable as fetal deaths.[19]

HIPAA:

HIPAA generally prevents health care providers and entities from disclosing patient information without patient consent, and the state reporting laws discussed in this fact sheet are exceptions to that rule.[20] This means that when a provider is legally required to make a report, HIPAA allows them to share patient information that is specifically required or permitted by the applicable state reporting law. Providing any additional patient information beyond what is specifically required or permitted by state law would likely violate HIPAA. Accordingly, providers should carefully consider what patient information is necessary for making a report. For example, if a provider treats a minor patient for an injury that gives them cause to suspect physical abuse, the provider could share the records that are relevant to the suspected abuse, but they likely could not share the patient's entire medical record without violating HIPAA.

Providers with questions about medical privacy laws in relation to reproductive health care can request technical assistance from If/When/How: https://ifwhenhow.org/learn/technical-assistance/.

Citations

1.This fact sheet focuses on mandatory reporting requirements that involve law enforcement or an analogous health authority. It does not include mandatory reporting requirements concerning communicable diseases, childhood blood lead levels, etc. It also does not include reporting requirements specific to long-term care facilities. The fact sheet intends to cover reporting requirements for physicians, nurses, physician assistants, midwives, social workers, mental health professionals, and emergency medical technicians. If you know of a mandatory reporting requirement for these professionals in Wyoming involving or potentially involving law enforcement that is not covered on this sheet, please contact **info@ifwhenhow.org**.

2. The currently operative statutory definition of "abortion" includes self-managed abortion (Wyo. Stat. § 35-6-501(a)(i)). However, the prohibitions with criminal penalties do not explicitly apply to the pregnant individual, which is consistent with legislative attempts to prohibit criminalization of abortion seekers (Wyo. Stat. § 35-6-125(b), *enjoined by* State v. Johnson, 2026 WY 1, 582 P.3d 380 (Wyo. 2026); Wyo. Stat. § 35-6-126(b), *enjoined by* Johnson, 582 P.3d 380; Wyo. Stat. § 35-6-139(d), enjoined by Johnson (582 P.3d 380), and the recent state high court precedent set by State v. Johnson, 2026 WY 1, 582 P.3d 380 (Wyo. 2026) (finding that abortion is encompassed within the state's constitutional protection of a fundamental right to medical decision making).

3. Under Wyoming's child abuse statute, a child is anyone under 18 years of age. Wyo. Stat. § 14-3-202(iii).

4. Wyo. Stat. § 14-3-202 (a)(ii).

5. Wyo. Stat. § 14-3-202 (a)(vii).

6. A vulnerable adult is someone "eighteen (18) years of age or older who is unable to manage and take care of himself or his money, assets or property without assistance as a result of advanced age or physical or mental disability." Wyo. Stat. § 35-20-102(a)(xviii).

7. Wyo. Stat. § 35-20-102(a)(ii).

8. Wyo. Stat. § 35-20-102(a)(xi).

9. Wyo. Stat. § 14-3-202(a)(ii)(D).

10. Wyo. Stat. § 6-2-314 (Sexual abuse of a minor in the first degree), Wyo. Stat. § 6-2-315 (Sexual abuse of a minor in the second degree), Wyo. Stat. § 6-2-316 (Sexual abuse of a minor in the third degree), Wyo. Stat. § 6-2-317 (Sexual abuse of a minor in the fourth degree).

11. 049-2 Wyo. Code R. §§ 2-3.

12. Note that a fetus is not contemplated as a "victim" under this statute.

Citations

13. Abortion in WY is defined as "an act, procedure, device or prescription administered to or prescribed for a pregnant woman by any person with knowledge of the pregnancy, including the pregnant woman herself, with the intent of producing the premature expulsion, removal or termination of a human embryo or fetus, except that in cases in which the viability of the embryo or fetus is threatened by continuation of the pregnancy, early delivery after viability by commonly accepted obstetrical practices shall not be construed as an abortion." Wyo. Stat. § 35-6-501(a)(i).
14. Wyo. Stat. § 35-6-131. Though currently in effect, a definition of abortion that includes self-managed abortion is constitutionally vulnerable under the *Johnson* decision. *See* fn 2, *supra*.
15. "An alleged miscarriage that was induced with the intent of terminating a pregnancy shall be reported as an abortion pursuant to this section." Wyo. Stat. § 35-6-131(d).
16. Wyo. Stat. § 35-6-131(b).
17. Stillbirth meaning "a birth after twenty (20) completed weeks gestation in which the child shows no evidence of life after complete birth." Wyo. Stat. § 35-1-401(a)(vi).
18. Wyo. Stat. § 35-1-419(b).
19. *See* definition of abortion. Wyo. Stat. § 35-6-501(a)(i). *See also* Wyo. Stat. § 35-6-131(d).
20. *See, e.g.*, Dep't of Health & Hum. Servs., *My state law authorizes health care providers to report suspected child abuse to the state department of health and social services. Does the HIPAA Privacy Rule preempt this state law?* (last reviewed Dec. 28, 2022), **https://perma.cc/4BUP-ZZDA** "[I]f a provision of State law provided for [reporting of disease or injury, child abuse, birth, or death, or for public health surveillance, investigation, or intervention] and was contrary to the [HIPAA] Privacy Rule, the State law would prevail." *Id*. In other words, HIPAA protects all patient information from disclosure, except for what a state reporting law either requires or permits.