



FAMILY ISSUE FACT SHEET

No. 2011-01 (January 2011)

HB 2416/SB 1246 – MOTHER’S HEALTH & SAFETY; ULTRASOUND PROVISION

EXECUTIVE SUMMARY

Women facing crisis pregnancies need to be provided with the best possible care to ensure they are able to make well-informed decisions. HB 2416/SB 1246 guarantees that every woman considering an abortion is provided with an ultrasound and has the opportunity to view the image and hear the heartbeat of her preborn child. HB 2416/SB 1246 also bans the practice of abortion-via-webcam, in which a woman receives a medication abortion without ever being in the same building as a doctor. HB 2416/SB 1246 also updates definitions for abortion clinic licensing to ensure that medication abortions are included. Finally, HB 2416/SB 1246 offers additional protection for minors seeking a judicial bypass of parental consent by requiring the judge to appoint a guardian *ad litem*.

BACKGROUND

HB 2416/SB 1246 makes four important changes to protect the health and safety of women seeking an abortion in Arizona:

- Provides every woman considering an abortion the opportunity to view her ultrasound and hear the heartbeat of the preborn child (if audible)
- Updates abortion clinic licensing statutes to include medication abortions
- Prohibits use of telemedicine for abortion
- Requires appointment of guardians *ad litem* for minors seeking abortion without parental consent

Ultrasound

Advances in medical technology have made it possible to provide better information to women considering an abortion than ever before. Women deserve to have full and complete information before making a decision whether to have an abortion. HB 2416/SB 1246 requires a physician performing an abortion to complete an ultrasound of the preborn child and provide the mother an opportunity to view the ultrasound image and listen to the child’s heartbeat. Arizona has an important interest in ensuring that women have full information before choosing an abortion, including the information provided by viewing an ultrasound. As the U.S. Supreme Court recently noted, “[i]t is self-evident that a mother who comes to regret her choice to abort must struggle with grief more anguished and sorrow more profound when she learns, only after the event, what she once did not know....”¹

Licensing Statutes

When Arizona’s licensing statutes were passed in the late 1990s, medication abortion was just being introduced.² Thus, the definition of “abortion” did not cover dangerous abortion drugs like RU-486. However, abortion providers in Arizona currently administer medication abortions about half of the time.³ Medication abortions carry significant medical risks,⁴ and abortion clinics dispensing medication abortions should not be permitted to operate without proper licensing oversight by the Department of Health Services. HB 2416/SB 1246 corrects the definitions to reflect the abortion industry’s current practice.

Telemedicine

In early 2010, Americans were horrified to learn that Planned Parenthood clinics in Iowa were dispensing abortion medication to women without direct physician supervision and after having the women “consult” with a physician using telecommunications services rather than seeing the physician in person.⁵ Even more disturbing is Planned Parenthood’s stated intent to export these so-called “teled abortions” to states across the nation.

Telemedicine has been successfully used in legitimate medical practices for such things as patient history reviews and the exchange of information between physicians. However, telemedicine, or care *in absentia*, was never meant as a replacement for an in-office consultation and examination by a physician. HB 2416/SB 1246 stops this effort to misappropriate telemedicine by prohibiting its use for abortions.

Guardian ad litem for Minors

Current law allows a judge to appoint a guardian *ad litem* (GAL) when a minor is seeking an abortion without her parents’ consent. The GAL’s role is to offer the judge an unbiased perspective on the minor’s best interests and whether she is mature enough to make the decision without her parents’ involvement. Practice varies among judges in whether to appoint a GAL, yet this is an important safeguard in a proceeding where no one is representing the interests of other parties like the parents or the preborn child. HB 2416/SB 1246 requires judges to appoint a GAL so that the best interests of the minor are better safeguarded.

TALKING POINTS

- **Abortion is a decision fraught with consequences, so it's critical to provide women with as much information as possible.** Ultrasound gives women a more complete picture of their situation and allows them to consider the real impact of abortion.
- **Requiring ultrasounds arms women with the information they need to make an informed and voluntary decision.** Abortion providers state that they are already performing ultrasounds on every patient, and this bill simply safeguards a woman’s right to view her ultrasound results.
- **The abortion industry is abusing new technology by administering medication abortions to women without an in-person consultation with a doctor.** Medication abortions can have serious complications and are not a “safer alternative” to surgical abortions. In fact, the instructions for the abortion pill say “Nearly all women who receive [the abortion pill] will report adverse reactions.”⁶ The Center for Disease Control has also reported at least 8 deaths due to the abortion pill.⁷ Without the opportunity to consult with a doctor in person, women are even more susceptible to these risks.
- **HB 2416 protects the life of both the mother and her pre-born child.** The abortion industry has demonstrated time and time again that their chief concern is their bottom line, not the well-being of either the mother or the child.

CONCLUSION

Arizona has an important interest in protecting the health and safety of women and ensuring that women receive full and accurate information when considering abortion. HB 2416/SB 1246 improves Arizona law to better accomplish those goals.

¹ *Gonzales v. Carhart*, 550 U.S. 124, 159-60 (2007).

² The FDA gave conditional approval to RU-486 in 1996, but it was not finally approved until September of 2000. See Mifepristone Approval Letter (Sept. 28, 2000), available at http://www.accessdata.fda.gov/drugsatfda_docs/appletter/2000/20687appltr.htm.

³ Arizona Department of Health Services, No. 1D, *Induced Terminations of Pregnancy*, Arizona Health Status and Vital Statistics (2009), available at <http://www.azdhs.gov/plan/report/ahs/ahs2009/pdf/text1d.pdf>.

⁴ Elissa Meites, et al., *Fatal Clostridium sordellii Infections after Medical Abortions*, 363 *New Eng. J. Med.* 1382 (2010) (noting at least eight deaths).

⁵ Monica Davey, *Abortion Drugs Given in Iowa via Video Link*, *N.Y. Times*, June 9, 2010, at A1;

⁶ Mifeprex label at 11, available at http://www.accessdata.fda.gov/drugsatfda_docs/label/2005/020687s013lbl.pdf

⁷ Meites, *supra* note 4.