



Mary Lazich

State Senator - Senate District 28

Senate Committee on Health and Human Services
Senate Bill 206 Testimony
June 5, 2013

Thank you for a public hearing about Senate Bill 206 (SB 206). SB 206, named Sonya's Law, strengthens the informed consent law by providing all pregnant women an ultrasound prior to an abortion being performed or induced.

Sonya, a hard-working mother of two, learned last November she is expecting her third child. While considering terminating her pregnancy, Sonya took advantage of a free ultrasound after seeing an advertisement on a bus. Sonya will testify today about seeing her seven-week-old son for the first time via ultrasound pictures. The perspective gained from observing her unborn child during the ultrasound was truly necessary to making a fully informed decision.

The goal of Sonya's law is to ensure that a pregnant woman has the benefit of the best information and technology available to make an informed decision, while respecting a pregnant woman's independence. The physician to perform the abortion must perform the ultrasound or provide a list of facilities that provide ultrasounds without cost. The various ultrasound transducers and techniques available for the ultrasound will be explained to the woman and she will select the option she prefers. The decision about the type of ultrasound rests **entirely** with the mother.

During the ultrasound the physician will display ultrasound images and provide a medical description of the images, including the dimensions of the unborn child and a visualization of the fetal heartbeat. Through the wonders of modern science this technology and information is now readily accessible. Sonya's law will ensure every woman has access to this level of knowledge.

The pregnant woman is not required to view the ultrasound images or fetal heartbeat. While an ultrasound is required, the woman is not compelled to view the images and she is not subject to penalty upon refusing to view the images.

Sonya's law takes another important step to protect the life of women undergoing an abortion. The law requires physicians performing abortions have admitting privileges at a hospital within 30 miles of the location the abortion is performed. This important measure ensures prompt medical attention is available and a process is in place during emergencies at abortions clinics.

Again, thank you for the public hearing, and thank you for your consideration of SB 206.

Sonya's Law – SB 206
Testimony before the
Senate Committee on Health and Human Services
June 5, 2013

Senator Vukmir and Members of the Committee:

I am Sonya and I am the mother of two children. I learned I was pregnant with my third child this past November. I was stunned – how could this be? I had taken precautions -- but now I was pregnant. I worried about how I could handle another child, emotionally and financially. I seriously thought about abortion.

I saw a bus ad about a free ultrasound and decided to have one. I learned I was seven weeks pregnant. Once I saw my child and realized his heart was beating, I made an emotional connection with my baby and made the decision to carry him to term. I will deliver a baby boy in July.

For myself, my baby, and other women like me, I urge you to pass Sonya's Law. Thank you.



WISCONSINRIGHTTOLIFE

**Wisconsin Right to Life Testimony by Barbara Lyons
In Support of Sonya's Law – SB 206
Senate Committee on Health and Human Services
June 5, 2013**

Sonya's Law, SB 206, is inspired by Sonya, a Milwaukee woman whose decision-making was empowered by information about her unborn child gained through ultrasound viewing. Sonya's story is a familiar one – a woman with serious concerns about her pregnancy, not knowing what to do -- who was allowed to view her child and make an emotional connection with him.

Here are excerpts from stories of women like Sonya who were also empowered by viewing ultrasounds of their unborn children and decided to carry their pregnancies to term.

Sonya's Law allows the following related to ultrasound:

1. An ultrasound takes place 24 hours before the abortion is performed.
2. The woman chooses which type of ultrasound she would like after her options are explained to her.
3. The woman sees her child on ultrasound and visualizes the heartbeat while an explanation is given about what is on the screen.
4. The woman has the option of turning away from the ultrasound screen.
5. If the ultrasound is not covered by the charge for the abortion, the woman is given information on where she can receive a free ultrasound. The referral facility can certify that the ultrasound requirement has been met.
6. The woman herself certifies that the ultrasound requirement has been met.
7. Exceptions are allowed for medical emergency or sexual assault consistent with current law.
8. Civil penalties apply to those who violate the law but not to the woman.



WISCONSINRIGHTTOLIFE

Another provision in Sonya's Law requires that the person performing the abortion have admitting privileges at a hospital within 30 miles of the abortion facility. If complications arise during an abortion requiring admission to a hospital, it is imperative that the hospital be close by and the person performing the abortion have admitting privileges at that hospital to provide continuity of care.

There have been instances in Milwaukee where a woman suffering abortion complications is sent to a nearby emergency room with no doctor who has admitting privileges, no back-up, and no papers to explain why she is there. It is left to the woman to explain her condition. The woman who needs medical care following her abortion should have the same continuation of care as other patients.

Wisconsin Right to Life urges the committee to recommend passage of Sonya's Law to empower a woman to have all information, including seeing her unborn child on ultrasound, before making an irreversible decision.

**Sonya's Story – Testimony before the Assembly Health Committee
June 5, 2013**



Mr. Chairman and Members of the Committee:

I am Sonya and I am the mother of two children. I learned I was pregnant with my third child this past November. I was stunned – how could this be? I had taken precautions -- but now I was pregnant. I worried about how I could handle another child, emotionally and financially. I seriously thought about abortion.

I saw a bus ad about a free ultrasound and decided to have one. I learned I was seven weeks pregnant. Once I saw my child and realized his heart was beating, I made an emotional connection with my baby and made the decision to carry him to term. I will deliver a baby boy in July.

For myself, my baby, and other women like me, I urge you to pass Sonya's Law. Thank you.

Angie's Story

Angie was a freshman in college when she learned she was pregnant. She was embarrassed and afraid to tell her parents. So, Angie went to a Milwaukee abortion clinic



where an ultrasound confirmed that she was 19 weeks pregnant. She was told she should hurry and have an abortion because she was so far along.

Anxious about what she should do, Angie decided to have another ultrasound and went to a Pregnancy Help Center. "From the moment I walked in the door, everyone was so welcoming and supportive," Angie remembers. Angie saw her baby on the ultrasound screen and could not believe her eyes. Her baby was fully formed, wiggling around, and she could hear his beating heart! After seeing her baby, Angie fell in love and knew she had the strength to choose life for her precious baby son.

Angie was helped to tell her parents who were very supportive. She continued her schooling and has not forfeited her dreams of college and a career. This year, Angie celebrated her first Mother's Day with her baby. The ultrasound saved his life, and gave his mother the courage to give him life. A wonderful outcome for mother and baby. Because of her experience, Angie strongly supports **Sonya's Law!**

Meaghan's Story



I have a beautiful 5-month-old son named Austin. If someone would have told me 2 years ago, that today I would be a mother I would have told you you were crazy. Last April I had a weird feeling. I went and got an at home pregnancy test. It was positive. I took about 10, all positive. I started to hyperventilate and have a panic attack, then that turned in to terror, and screaming. I just sat in the corner of my apartment screaming and crying.

Later that night I found a place to go to talk to someone to find out my options. I was very much considering abortion and possibly adoption, but more abortion. I sat on their couch and cried and was so scared. I listened to everything they had to say, and agreed to come in for an ultrasound, and I would make my decision after that. I came in around 8 weeks I believe. I looked up, and I saw a little heart beating on the screen and that was it.

That's all I needed. That was my baby, and no one was going to take that away from me. It didn't matter that I wasn't with the father, or that I didn't have a lot of money, or that I was still in school, I would make it work. I fell in love with him instantly. I had a little human growing inside me.

Austin is now almost 5 months old. When I was pregnant, my family and I thought it was going to ruin my life. We thought this is the worst timing and that it was a horrible thing. We couldn't have been more wrong. This little boy has brought so much joy to all of our lives. I have never been this happy in my entire life. It has made me a better person and brought our family all closer together. There are places and programs out there that can help you if you need things. Abortion should never be an option. If I would have done that, it would have been the BIGGEST mistake of my life.

I support Sonya's Law so that other women can have the same experience I did.

NAOMI'S STORY

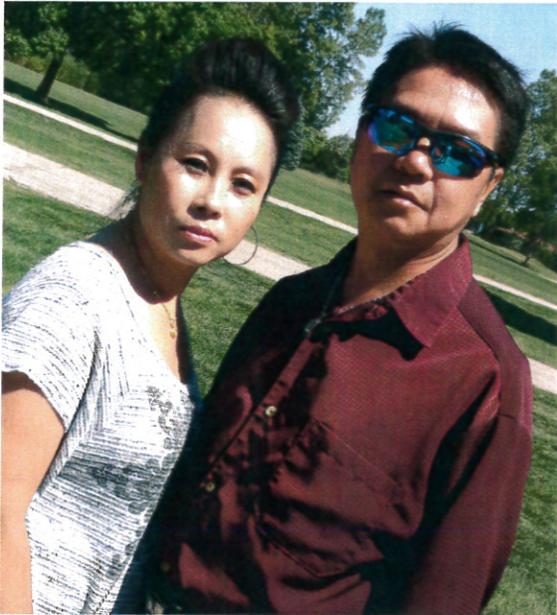
When I found out I was pregnant, I was in shock and upset. The reason for this is because I was a single parent and I didn't have a job. I just knew that I wouldn't be able to take care of two kids. When I told my partner, he was disappointed because he wanted to get married first.

So, we talked about abortion. I really didn't want one but I knew that I had to. I really needed to talk to someone about my situation. So I began to research for a company who would help me deal with my pregnancy. I saw an ad for a place that had services and called them. I was given an appointment for an ultrasound. I brought the father of my unborn child with me for support. When I had the ultrasound, it really made me change my mind. My baby was 8 weeks. The father of my child was also happy because the ultrasound changed his mind -- it was his first-born child.

So, I began job hunting and after two months of searching I found a job. I kept my pregnancy, have a job and started college. Me and the baby's father were going to get to know each other before we start dating.

I went back for another ultrasound and I was 16 weeks along. I found out that I was having a boy. I am so happy that I decided to keep my pregnancy going forward. I want to let everyone know how having an abortion can affect your decision because I think babies are blessings from God.

I support Sonya's Law so that other women can see their babies like I did. Thanks to those who are supporting Sonya's Law.



Sao and Kou's Story

Sao and Kou are expecting their sixth child. Their youngest child is 14-years-old. Fearing they were too old to have a "normal" child, they went to an abortion clinic and were going to abort.

At the abortion clinic they were told the abortion procedure was a two day process. They were told there wasn't much to it but Sao would have to go home with rods of seaweed inserted in order to dilate her enough to remove the baby.

Sao had an ultrasound at the abortion clinic and Kou asked if the baby was ok and if he could see the ultrasound. The abortion clinic staff said they would give Sao and Kou a picture. Kou asked if the baby had a heartbeat. The person doing the scan said the clinic could not share the heartbeat with them. They both asked how far along Sao was and were told 18 weeks. They had no idea Sao was that far along!

Sao and Kou had a very uneasy feeling and wondered what was going on. Kou took the ultrasound picture and walked into a Pregnancy Help Center where the couple shared what had happened at the abortion clinic. The Help Center staff told them that if their baby had a heartbeat it would most certainly be shared with them. If the baby didn't have a heartbeat, Sao would be referred to a doctor who would take care of them in this situation as well.

The couple stated that if they could see the baby's heartbeat they would love to parent. They just didn't know what was going on. Kou's jaw dropped and tears came to his eyes when he saw his beautiful

baby. He could distinctly see that the baby had a heartbeat, had fingers, toes, was jumping about and was sucking a thumb! They thanked the Pregnancy Help Center staff for sharing their baby with them and became excited about the new life they were carrying. Kou said, "I am so grateful you showed me my baby. They didn't let me see and I just had a feeling we were making a mistake. Thank you, thank you, thank you!"

A follow-up call was made to the couple a few days later. They had received baby items from the center which were in their truck. The couple had driven home after the ultrasound. Kou went to the house and called out to their children, "We have a surprise for you!" They took the kids to their truck and opened the back filled with baby items. The kids screamed in delight as the youngest ran around shouting, "We are having a baby, we are having a baby!"

Had this couple not had the opportunity to see their baby's heartbeat, they would have mistakenly chosen to abort, not knowing what their child looked like and that their baby was alive! Sao and Kou strongly support Sonya's Law which would give couples like them the information that helped them to choose life for their baby.



Wisconsin Medical Society

Your Doctor. Your Health.

TO: Senate Committee on Health and Human Services
Senator Leah Vukmir, Chair

FROM: Mark Grapentine, JD
Senior Vice President - Government Relations

DATE: June 5, 2013

RE: Opposition to 2013 Senate Bill 206

On behalf of 12,000 members statewide, the Wisconsin Medical Society thanks the committee for this opportunity to share our opposition to 2013 Senate Bill 206, which inserts new requirements into the physician-patient relationship for specific medical encounters. What constitutes optimum medical care is constantly evolving – statutory law is an incongruous place for establishing specific steps in providing medical care. The Society also opposes efforts that interfere with the sacred patient-physician relationship, as SB 206 would do by mandating specific requirements in a patient-physician encounter. This infringement is a dangerous slippery slope; the Society therefore opposes SB 206.

The Legislature Should Not Insert Itself into Medical Care Decision-Making

The Society's main concern about SB 206 is how it infringes upon the physician-patient relationship in regards to decision making for a legal medical procedure. That SB 206 focuses on an emotional topic – abortion – makes the overall issue more complicated, yet the underlying principle is the same. This concern over interference in the physician-patient relationship is evident in the Society's general abortion policy:

ABO-004

Abortion as a Medical Procedure and Providing Abortion-Related Information:

The Wisconsin Medical Society: 1) supports enactment of appropriate legislation that would acknowledge the right of a physician to perform and to practice this medical procedure as he/she might any other medical procedure or to refuse to perform an abortion according to the dictates of his/her training, experience and conscience; 2) supports the development of guidelines that ensure that abortions be performed only under proper medical circumstances with adequate provision for safeguarding the health of the patient; and 3) although abortion is a contentious issue, it is a legal medical procedure and physicians should be expected to advise their patients of all available options. (HOD, 0408)

This policy highlights two important points in this area of medical care: that abortion is a legal, accepted medical procedure, and that abortion is controversial. The Society believes that *all* medical care should follow a full and confidential discussion between a patient and her/his physician – there should be no exceptions to that relationship simply because a certain procedure is controversial.

The legislation injects specific steps that a physician must take when discussing a patient's impending decision:

- Performing or arranging for an ultrasound.
- Providing a simultaneous oral explanation during the ultrasound, with specific information.
- Displaying the ultrasound images in a way that allows the patient to view them.
- Providing a medical description of the ultrasound, with further specific information required.
- Providing a way for the patient to visualize a fetal heartbeat while providing an oral report.

This legislation essentially provides a script that the physician must follow: perform a test and provide information that may not be medically indicated, or else face monetary damages and potential civil liability – even in a lawsuit filed by a patient's relative. This intrusion in the patient-physician relationship is unacceptable. Physicians should be deciding with their patients what tests and procedures are needed and will be performed based on the best available medical evidence, guidelines of care, and shared decision making between the patient and physician. Mandatory performance of an ultrasound before an abortion is not an accepted medical practice or standard of care. Thus, this practice does not add to the quality or safety of the medical care being provided and is unacceptable waste of medical resources, especially in this time of rising health care costs.

Ability to Provide Care Should Not Be Tied to Proximity to Certain Hospitals

The bill's provision that a physician may not provide abortion services unless within 30 miles of a hospital where the physician has admitting privileges is another questionable interference into providing medical care. The American Congress of Obstetricians and Gynecologists (ACOG) recently highlighted the discrimination inherent in this type of a provision in a recent statement:

Statement on State Legislation Requiring Hospital Admitting Privileges for Physicians Providing Abortion Services

April 25, 2013

Washington, DC -- The American Congress of Obstetricians and Gynecologists (ACOG) believes physicians who provide medical and surgical procedures, including abortion services, in their offices, clinics, or freestanding ambulatory care facilities should have a plan to ensure prompt emergency services if a complication occurs and should establish a mechanism for transferring patients who require emergency treatment. However, ACOG opposes legislation or other requirements that single out abortion services from other outpatient procedures. For example, ACOG opposes laws or other regulations that require abortion providers to have hospital admitting privileges. ACOG also opposes facility regulations that are more stringent for abortion than for other surgical procedures of similar low risk.

Again, a medical procedure should not be singled out for potentially onerous requirements solely because they are controversial. Physicians understand that no matter what medical procedure is undertaken, a plan needs to be in place should a patient require emergency care. The bill's arbitrary proximity requirement should be seen for what it is: not aimed at ensuring quality patient care, but instead making it more difficult for a physician to provide care a patient needs. Such discrimination is unacceptable.

Senate Bill 206 interferes with the patient-physician relationship and places an unneeded and unprecedented burden on Wisconsin physicians and women. We ask you to oppose Senate Bill 206.

Thank you for this opportunity to provide testimony. If you have further questions please feel free to contact Mark Grapentine at mark.grapentine@wismed.org or call 608.442.3800.



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Testimony in Support of Senate Bill 206
Senate Committee on Health and Human Services
Julaine K. Appling, WFA President
June 5, 2013

Thank you, Chairman Vukmir and committee members, for the opportunity to testify today in support of Senate Bill 206. I am Julaine Appling, president of Wisconsin Family Action, an organization dedicated to strengthening, preserving and promoting marriage, family, life and liberty in The Badger State.

Senator Lazich and Representative Strachota have drafted this bill, Sonya's Law, carefully and prudently; and we are grateful for their leadership on this proposal. The bill's intent is clear: to ensure mothers in Wisconsin have the opportunity to see a picture of their baby prior to making one of the most crucial decisions of their lives and their babies' lives.

Who has not heard stories of women who have seen ultrasound images of their baby or heard that newborn's heartbeat and suddenly realized this was not, as they had been cruelly and self-servingly told, "the product of conception" or "fetal tissue"? This was clearly a baby. All pregnant women deserve the opportunity to see and hear the truth.

I find it interesting that the question our organization frequently gets on this bill is whether or not the procedure will add to the cost of the abortion. What we know is that many abortionists already do ultrasounds prior to the actual life-taking procedure in order to determine how far along the woman is in her pregnancy. The difference is that under Wisconsin's current law, the abortion provider is not required to even offer to let the woman see the image. This situation notwithstanding, this means that the cost of the ultrasound is typically already included in the pricing. Additionally, the authors have taken great care to ensure the woman is provided a list of places where she can get the required ultrasound for free, if the abortion facility does not provide it.

Importantly, the bill makes it very clear that the type of transducer used for the required ultrasound is up to the woman after she is given explanatory information about the various options.

Another key provision in SB 206 requires a person doing abortions to have admitting privileges at a hospital within 30 miles of the abortion facility. This, again, is prudent and primarily helps to ensure the safety of the woman. Given the nature of this procedure and potential complications that could require rapid treatment, it is right that the abortion provider be able to admit and treat a woman at a nearby hospital.

Women contemplating an abortion—and the babies they are carrying—deserve the opportunity to "see" their unborn baby through ultrasound technology. This bill responsibly provides that opportunity.

Wisconsin Family Action wholeheartedly and enthusiastically supports this bill, and we urge you to do the same. Thank you for your time and attention today.



WISCONSIN CATHOLIC CONFERENCE

TESTIMONY ON SENATE BILL 206: ULTRASOUND FOR AN ABORTION

Presented to the Senate Committee on Health and Human Services

By Barbara Sella, Associate Director

June 5, 2013

The Wisconsin Catholic Conference (WCC) strongly supports Senate Bill 206, which is a natural extension of our state's informed consent law and incorporates basic safety standards. By providing a pregnant woman the opportunity to see her unborn child through an ultrasound, SB 206 empowers her to make a more informed decision about whether or not to continue her pregnancy.

Standard medical practice already requires that abortion providers perform ultrasounds on women seeking abortions. The National Abortion Federation's *2013 Clinical Policy Guidelines* (http://www.prochoice.org/pubs_research/publications/documents/2013NAFCPGsforweb.pdf) states that "Proper use of ultrasound can inform clinical decision-making and enhance the safety and efficacy of abortion care." The *Guidelines* list specific standards that abortion providers must follow when performing an ultrasound exam. These include identifying the age and location of the fetus, and any cardiac activity.

It should be standard care that women who go to an abortion clinic see their medical records and receive medically accurate information so that they can make a fully informed decision.

In every other medical procedure, women are offered the opportunity to see their sonogram and mammogram images, chest and bone x-rays, etc. Abortion providers should routinely do the same. SB 206 makes certain that ultrasound information, which is essential to clinical decision-making, is made readily available to every patient. In a decision of this magnitude, it is essential that a woman rely on her own mental and sensory perception, without outside bias or interference.

SB 206 helps women determine their future, but we need to do more. We need to make certain that women are fully informed about all the resources that exist in the community, so that they can see that choosing life for their baby does not mean abandoning all hope for an education, for meaningful employment, and for a better life.

Thank you for this opportunity to testify on SB 206. Please give women the opportunity to see a picture that can be worth a thousand words and potentially allows two lives to thrive.