April 17, 2007

H 1552. WRTK-WOMAN'S RIGHT TO KNOW. Filed 4/17/07. TO REQUIRE A TWENTY-FOUR HOUR WAITING PERIOD AND THE INFORMED CONSENT OF A PREGNANT WOMAN BEFORE AN ABORTION MAY BE PERFORMED.

Adds new Article 1H to GS Chapter 90, the Woman's Right to Know Act. Defines abortion as the intentional termination of a known pregnancy by the use or prescription of any instrument, medicine, drug, substance, or device, unless the termination is intended to increase the probability of a live birth, preserve the life or health of a child after live birth, or remove a dead fetus.

Provides that consent to a medical or surgical abortion will be considered voluntary and informed only if all of the following conditions are satisfied:

- (1) At least 24 hours before the abortion, the woman's physician gives the woman the following information: the name of the physician who will perform the abortion, the statistically significant medical risks associated with the abortion procedure, and the probable gestational age of the unborn child. If the physician lacks malpractice insurance covering abortion procedures or lacks local hospital admitting privileges, that information must also be provided.
- (2) At least 24 hours before the abortion, the woman's physician or a "qualified person," defined as an agent of the physician with certain professional credentials, gives the woman the following additional information: that medical assistance benefits may be available for prenatal care, childbirth, and neonatal care; that other public assistance may or may not be available; that the father is liable to assist with support of the child; that the woman is free to withhold or withdraw her consent at any time before or during the abortion without affecting her right to receive future treatment or publicly funded benefits; and that the woman has the right to review materials describing an unborn child and listing agencies offering alternatives to abortion on a website operated by the NC Department of Health and Human Services (DHHS). The physician or qualified person must provide the website address to the woman. If the woman chooses instead to view printed copies of the materials, they must be given to her at least 24 hours before the abortion or sent to her by certified mail at least 72 hours before the abortion.
- (3) If the physician uses ultrasound equipment while performing an abortion, the physician must inform the woman that she has the right to view an ultrasound image of the fetus before the abortion is performed.
- (4) The woman must certify in writing that she has received the information described above in paragraphs (1) and (2) and has been informed of the opportunity to review the ultrasound image described in paragraph (3), if applicable. The bill also provides that the woman must certify in writing that she has been informed of the opportunity to review information described in new GS 90-21.62(2)c., but this appears to be an error, as that is the provision requiring the physician or other qualified person to inform the woman that the father is liable to assist in support of the child.
- (5) The physician or qualified person must receive a copy of the woman's written certification.
- (6) The information must have been provided to the woman individually and, if it is provided on the premises of the physician who is to perform the abortion, in a private room.
- (7) The woman must not be required to pay any amount for the abortion procedure until 24 hours after the required information is provided.

If the pregnant woman is an unemancipated minor who is obtaining the abortion with the consent of an individual authorized to give consent by GS 90-21.7, all of the above requirements must be met for both the minor and the adult giving consent.

Requires DHHS to publish specified information in English and each language that is the primary language of at least 2% of the state's population. The information must be made available on a website and include pictures or drawings of fetuses at two-week gestational increments, descriptions of abortion methods, medical risks of abortion procedures, possible detrimental psychological effects of abortion, medical risks of carrying a pregnancy to term, and information about public and private agencies and services that assist women during pregnancy, upon childbirth, and while a child is dependent, including adoption agencies. Directs DHHS to provide the materials at no cost to any physician, qualified person, facility, or hospital and to use available funds to cover the costs of implementing the act.

Provides that when a medical emergency compels an abortion, the physician must provide certain information to the woman before the abortion if possible. Requires the physician to make and document a determination that a 24-hour delay in the abortion will create a serious risk of substantial and irreversible impairment of a major bodily function.

Authorizes women who receive abortions and the fathers of their pregnancies to maintain an action for damages against a person who performs an abortion and knowingly or recklessly violates the new Article.

Effective October 1, 2007.

Intro. by Johnson.

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