FIRST REGULAR SESSION

SENATE BILL NO. 196

94TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR GROSS.

Pre-filed December 21, 2006, and ordered printed.

TERRY L. SPIELER, Secretary.

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AN ACT

To repeal sections 188.015 and 188.039, RSMo, and to enact in lieu thereof five new sections relating to the unborn child pain prevention act.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 188.015 and 188.039, RSMo, are repealed and five new 2 sections enacted in lieu thereof, to be known as sections 188.015, 188.039, 3 188.275, 188.278, and 188.281, to read as follows:

188.015. Unless the language or context clearly indicates a different
meaning is intended, the following words or phrases for the purposes of sections
188.010 to 188.130 shall be given the meaning ascribed to them:

4 (1) "Abortion", the intentional destruction of the life of an embryo or fetus 5 in his or her mother's womb or the intentional termination of the pregnancy of a 6 mother with an intention other than to increase the probability of a live birth or 7 to remove a dead or dying unborn child;

8 (2) "Abortion facility", a clinic, physician's office, or any other place or 9 facility in which abortions are performed other than a hospital;

10 (3) "Conception", the fertilization of the ovum of a female by a sperm of11 a male;

12 (4) "Gestational age", length of pregnancy as measured from the first day13 of the woman's last menstrual period;

14 (5) "Medical emergency", a condition which, on the basis of the 15 physician's good faith clinical judgment, so complicates the medical 16 condition of a pregnant woman as to necessitate the immediate 17 abortion of her pregnancy to avert her death or for which a delay will 18 create a serious risk of substantial and irreversible impairment of a

19 major bodily function;

20 (6) "Physician", any person licensed to practice medicine in this state by
21 the state board of registration of the healing arts;

(7) "Probable gestational age", the age that, with reasonable
probability in the judgment of a physician, will be the gestational age
of the unborn child at the time the abortion is planned to be performed;

[(6)] (8) "Unborn child", the offspring of human beings from the moment
of conception until birth and at every stage of its biological development,
including the human conceptus, zygote, morula, blastocyst, embryo, and fetus;

[(7)] (9) "Viability", that stage of fetal development when the life of the unborn child may be continued indefinitely outside the womb by natural or artificial life-supportive systems.

188.039. 1. [For purposes of this section, "medical emergency" means a condition which, on the basis of the physician's good faith clinical judgment, so complicates the medical condition of a pregnant woman as to necessitate the immediate abortion of her pregnancy to avert her death or for which a delay will create a serious risk of substantial and irreversible impairment of a major bodily function.

72.] Except in the case of medical emergency, no person shall perform or induce an abortion unless at least twenty-four hours prior thereto a treating 8 9 physician has conferred with the patient and discussed with her the indicators 10 and contraindicators, and risk factors including any physical, psychological, or situational factors for the proposed procedure and the use of medications, 11 including but not limited to mifepristone, in light of her medical history and 1213medical condition. For an abortion performed or an abortion induced by a drug or drugs, such conference shall take place at least twenty-four hours prior to the 14writing or communication of the first prescription for such drug or drugs in 15connection with inducing an abortion. Only one such conference shall be required 16for each abortion. 17

[3.] 2. The patient shall be evaluated by a treating physician during the conference for indicators and contraindicators, risk factors including any physical, psychological, or situational factors which would predispose the patient to or increase the risk of experiencing one or more adverse physical, emotional, or other health reactions to the proposed procedure or drug or drugs in either the short or long term as compared with women who do not possess such risk factors. [4.] 3. At the end of the conference, and if the woman chooses to proceed

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with the abortion, a treating physician shall sign and shall cause the patient to sign a written statement that the woman gave her informed consent freely and without coercion after the physician had discussed with her the indicators and contraindicators, and risk factors, including any physical, psychological, or situational factors. All such executed statements shall be maintained as part of the patient's medical file, subject to the confidentiality laws and rules of this state.

[5.] 4. The director of the department of health and senior services shall disseminate a model form that physicians may use as the written statement required by this section, but any lack or unavailability of such a model form shall not affect the duties of the physician set forth in subsections [2 to 4] 1 to 3 of this section.

188.275. 1. Sections 188.275 to 188.281 shall be known as the 2 "Unborn Child Pain Prevention Act".

2. Except in the case of a medical emergency, at least twenty-four
 hours before an abortion is performed on an unborn child whose
 probable gestation age is twenty weeks or more, the treating physician
 performing the abortion shall inform the pregnant woman that she has
 the right to review the printed materials described in section 188.281.
 3. The treating physician shall inform the pregnant woman that
 the materials have been provided by the state of Missouri and they

10 contain information on pain in relation to the unborn child.

4. If the pregnant woman chooses to view the materials otherthan on the Internet website, the materials shall either:

13 (1) Be given to her at least twenty-four hours before the14 abortion; or

(2) Mailed to her at least seventy-two hours before the abortion
by certified mail, restricted delivery to addressee, so that the postal
employee may deliver the mail only to the pregnant woman.

18 5. The pregnant woman shall certify in writing before the19 abortion that:

20 (1) The information described in subsection 2 of this section has
21 been furnished her; and

22 (2) She has been informed of her opportunity to review the 23 printed material described in section 188.281.

6. Before the abortion is performed, the treating physician whois to perform the abortion shall:

26 (1) Obtain a copy of the written certification required under
27 subsection 5 of this section; and

(2) Retain it on file with the woman's medical record for at least
three years following the date of receipt.

188.278. 1. Except in the case of a medical emergency, before an 2 abortion is performed on an unborn child whose probable gestational 3 age is twenty weeks or more, the treating physician performing the 4 abortion shall inform the pregnant woman:

5 (1) Whether an anesthetic or analgesic would eliminate or 6 alleviate organic pain to the unborn child that could be caused by the 7 particular method of abortion to be employed; and

8 (2) Of the particular medical risks associated with the particular
9 anesthetic or analgesic.

2. After presenting the information required in subsection 1 of
this section and with the consent of the pregnant woman, the treating
physician shall administer the anesthetic or analgesic.

13 188.281. 1. Within ninety days after the effective date of sections
14 188.275 to 188.281, the department of health and senior services shall
15 publish printed materials with the following statement concerning
16 unborn children of twenty weeks gestational age or more:

17"By twenty weeks gestation, the unborn child has the 18 physical structures necessary to experience pain. There is 19 evidence that by twenty weeks gestation unborn children 20seek to evade certain stimuli in a manner that in an infant 21or an adult would be interpreted to be a response to 22pain. Anesthesia is routinely administered to unborn 23children who are twenty weeks gestational age or more who undergo prenatal surgery." 24

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2. The materials shall be objective, nonjudgmental, and designed
26 to convey only accurate scientific information about the human fetus
27 at the various gestational ages.

3. The department shall make the materials available on thedepartment's website.

30 4. The materials referred to in this section shall be printed in a
31 typeface large enough to be clearly legible.

5. Upon request, the department shall make available to any hospital the materials required under this

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34 section. The department shall have the discretion to determine the35 appropriate cost and number of materials given.

36 6. The department of health and senior services shall include on
37 its Internet website the information described in this section.

38 7. No information regarding persons who use the website shall
39 be collected or maintained.

8. The department shall monitor the website on a daily basis to
prevent and correct tampering.

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