Woman's right to reproductive safety and information.

Sponsored by: Senator(s) Nutting, Barnard and Meier and Representative(s) Hutchings, Jaggi, Reeder and Watt

A BILL
for

1 AN ACT relating to public health and safety; requiring physicians to obtain a signed acknowledgment as specified when obtaining a pregnant woman's consent to an abortion; requiring the disclosure of information; requiring the retention of records; providing exceptions; providing definitions; and providing for an effective date.

Be It Enacted by the Legislature of the State of Wyoming:

Section 1. W.S. 35-6-119 is created to read:

35-6-119. Abortion; informed consent; ultrasound.

(a) No abortion shall be performed or induced without the voluntary and informed consent of the woman upon whom the abortion is to be performed or induced. Except in the
case of a medical emergency, consent to an abortion is voluntary and informed only if:

(i) No less than twenty-four (24) hours prior to an abortion being performed, the physician who is to perform the abortion on the pregnant woman, or the referring physician or qualified person assisting the physician, has informed the woman, orally and in person, of the following:

(A) The name of the physician who will perform the abortion;

(B) The abortion method to be used;

(C) The medications that will be administered and the potential side effects of the medications;

(D) The immediate and long-term medical risks associated with the proposed abortion method including the risks of infection, hemorrhage, cervical or uterine perforation, danger to subsequent pregnancies, the
increased risk of breast cancer and the death of the unborn fetus;

(E) Alternatives to abortion;

(F) Ultrasonic evidence of the probable gestational age and viability of the unborn fetus with a description of any anatomic and physiologic characteristics of the unborn fetus. The pregnant woman shall be offered the opportunity to view the ultrasound image and hear any audible heartbeat of the unborn child;

(G) Necessary follow-up care including information on how to recognize common post-abortion complications;

(H) Common medical risks associated with carrying the unborn child to full term;

(J) Any need for anti-Rh immune globulin therapy if the pregnant woman is Rh negative;

(K) Any other information commonly provided for informed consent prior to medical procedures.
(ii) Prior to the performance of the abortion, the woman signs a certification stating that the woman received the notices and information required by paragraph (i) of this subsection and was given the opportunity to view the ultrasound of the unborn fetus and to listen to the heartbeat of the fetus, if audible.

(b) The ultrasound required by subparagraph (a)(i)(F) of this section may be obtained at any facility of the pregnant woman's choice. The ultrasound image shall be of a quality consistent with standard medical practice in the community, shall contain the dimensions of the fetus and shall accurately portray the presence of external members and internal organs, if present or viewable, of the fetus. If the pregnant woman obtains the ultrasound at a location other than where the abortion will be performed, the physician performing the abortion may accept a written verification from the facility that performed the ultrasound stating that the ultrasound was completed and that the pregnant woman was given the opportunity to review the ultrasound and hear any audible heartbeat.
(c) The pregnant woman shall be provided a list of healthcare providers, facilities and clinics that offer to perform ultrasounds free of charge. The list shall be compiled by the department of health and arranged geographically and shall include the name, address, hours of operation and telephone number of each listed entity.

(d) Before the abortion is performed, the physician who is to perform the abortion shall receive a copy of the written certification prescribed by paragraph (a)(ii) of this section and the verification, if any, prescribed by subsection (b) of this section. The physician shall retain a copy of these documents in the woman’s medical record.

(e) The procedures specified in this section shall not apply to any physician or facility in the case of a medical emergency involving the pregnant woman. Upon a determination by a physician that a medical emergency exists, the physician shall certify in the woman's medical records the specific medical condition or conditions that constitute the emergency.
Section 2. W.S. 35-6-101(a) by creating new paragraphs (xii) through (xiv) and by amending and renumbering (xii) as (xv) is amended to read:

35-6-101. Definitions.

(a) As used in the act, unless the context otherwise requires:

(xii) "Medical emergency" means a condition which, in the reasonable medical judgment of the abortion provider, so complicates the medical condition of the pregnant woman as to necessitate the immediate termination of the pregnancy to avert her death, or for which a delay in commencing an abortion procedure would create a serious risk of substantial and irreversible impairment of a major bodily function;

(xiii) "Qualified person" means an agent of the physician who is a psychologist, licensed social worker, licensed professional counselor, registered nurse or physician;
(xiv) "Ultrasound" means the use of ultrasound waves for diagnostic or therapeutic purposes to monitor a developing fetus;

(xii)(xv) "This act" means W.S. 35-6-101 through 35-6-118.

Section 3. This act is effective July 1, 2013.

(END)