

Introduced by

Senators Myrdal, Boehm, Luick

Representatives Porter, Rohr, M. Ruby

1 | A BILL for an Act to amend and reenact sections 12.1-31-12, 14-02.1-01, 14-02.1-02,
2 | 14-02.1-02.1, 14-02.1-02.2, 14-02.1-03, 14-02.1-03.1, 14-02.1-04, and 14-02.1-07, and
3 | subsection 1 of section 43-17-31 of the North Dakota Century Code, relating to abortion and
4 | grounds for disciplinary action imposed against a physician; to repeal sections 14-02.1-04.1,
5 | 14-02.1-04.2, 14-02.1-05.1, 14-02.1-05.2, and 14-02.1-05.3 of the North Dakota Century Code,
6 | relating to sex-selective abortions, genetic abnormality abortions, human dismemberment
7 | abortions, and abortions after a detectable heartbeat; to provide a penalty; and to declare an
8 | emergency.

9 | **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

10 | **SECTION 1. AMENDMENT.** Section 12.1-31-12 of the North Dakota Century Code is
11 | amended and reenacted as follows:

12 | **12.1-31-12. Abortion - ~~Affirmative defenses~~Exceptions.**

13 | 1. As used in this section:

14 | a. "Abortion" means the use or prescription of any substance, device, instrument,
15 | medicine, or drug to intentionally terminate the pregnancy of an individual known
16 | to be pregnant. The term does not include an act made with the intent to increase
17 | the probability of a live birth; preserve the life or health of a child after live birth; or
18 | remove a dead, unborn child who died as a result of a spontaneous miscarriage,
19 | an accidental trauma, or a criminal assault upon the pregnant female or her
20 | ~~unborn child~~act of using or prescribing any instrument, medicine, drug, or any
21 | other substance, device, or means with the intent to terminate the clinically
22 | diagnosable pregnancy of a woman, including the elimination of one or more
23 | unborn children in a multifetal pregnancy, with knowledge the termination by

1 those means will with reasonable likelihood cause the death of the unborn child.

2 Such use, prescription, or means is not an abortion if done with the intent to:

3 (1) ~~Save the life or preserve the health of the unborn child;~~

4 ~~(2)~~ Remove a dead unborn child caused by spontaneous abortion; or

5 ~~(3)~~(2) Treat a woman for an ectopic pregnancy.

6 b. "Medical emergency" means a condition that, in reasonable medical judgment, so
7 complicates the medical condition of the pregnant woman that it necessitates an
8 immediate abortion to prevent her death or substantial ~~and irreversible~~ physical
9 impairment of a major bodily function, not including any psychological or
10 emotional condition. A condition may not be deemed a medical emergency if
11 based on a claim or diagnosis that the woman will engage in conduct that she
12 intends to result in her death or in substantial and irreversible physical
13 impairment of a major bodily function.

14 c. "Physician" means an individual licensed to practice medicine or osteopathy
15 under chapter 43-17 or a physician who practices in the armed services of the
16 United States or in the employ of the United States.

17 e. "Professional

18 d. "Probable gestational age of the unborn child" means what, in reasonable
19 medical judgment, will with reasonable probability be the gestational age of the
20 unborn child.

21 e. "Reasonable medical judgment" means a medical judgment that would be made
22 by a reasonably prudent physician who is knowledgeable about the case and the
23 treatment possibilities with respect to the medical conditions involved.

24 2. It is a class C felony for a person, other than the pregnant female upon whom the
25 abortion was performed, to perform an abortion.

26 3. ~~The following are affirmative defenses under this~~ This section does not apply to:

27 a. ~~That the~~ An abortion was deemed necessary in professional based on reasonable
28 medical judgment and which was intended to prevent the death of the pregnant
29 female.

30 b. ~~That the~~ An abortion was to terminate a pregnancy that based on reasonable
31 medical judgment resulted from gross sexual imposition, sexual imposition,

1 sexual abuse of a ward, or incest, as those offenses are defined in chapter
2 12.1-20, if the probable ~~postfertilization~~gestational age of the unborn child is six
3 weeks or less.

4 c. ~~That the~~An individual assisting in performing an abortion if the individual was
5 acting within the scope of that individual's regulated profession and, was under
6 the direction of or at the direction of a physician, and did not know the physician
7 was performing an abortion in violation of this section.

8 d. An abortion necessary due to a medical emergency.

9 **SECTION 2. AMENDMENT.** Section 14-02.1-01 of the North Dakota Century Code is
10 amended and reenacted as follows:

11 **14-02.1-01. Purpose.**

12 The purpose of this chapter is to protect ~~unborn~~and promote human life and maternal health
13 within present constitutional limits when the performance of an abortion is not otherwise
14 prohibited by law. ~~†~~This chapter reaffirms the tradition of the state of North Dakota to protect
15 every human life whether unborn or aged, healthy or sick.

16 **SECTION 3. AMENDMENT.** Section 14-02.1-02 of the North Dakota Century Code is
17 amended and reenacted as follows:

18 **14-02.1-02. Definitions.**

19 As used in this chapter:

20 1. "Abortion" means the act of using or prescribing any instrument, medicine, drug, or
21 any other substance, device, or means with the intent to terminate the clinically
22 diagnosable ~~intrauterine~~ pregnancy of a woman, including the elimination of one or
23 more unborn children in a multifetal pregnancy, with knowledge that the termination by
24 those means will with reasonable likelihood cause the death of the unborn child. Such
25 use, prescription, or means is not an abortion if done with the intent to:

26 a. ~~Save the life or preserve the health of the unborn child;~~

27 ~~b.~~ Remove a dead unborn child caused by spontaneous abortion; or

28 ~~c.~~b. Treat a woman for an ectopic pregnancy.

29 2. "Abortion facility" means a clinic, ambulatory surgical center, physician's office, or any
30 other place or facility in which abortions are performed or prescribed, other than a
31 hospital.

- 1 3. "Abortion-inducing drug" means a medicine, drug, or any other substance prescribed
2 or dispensed with the intent of causing an abortion.
- 3 4. ~~"Down syndrome" refers to a chromosome disorder associated with an extra-~~
4 ~~chromosome twenty-one, in whole or in part, or an effective trisomy for chromosome-~~
5 ~~twenty-one.~~
- 6 5. "Drug label" means the pamphlet accompanying an abortion-inducing drug which
7 outlines the protocol tested and authorized by the federal food and drug administration
8 and agreed upon by the drug company applying for the federal food and drug
9 administration authorization of that drug. Also known as "final printing labeling
10 instructions", drug label is the federal food and drug administration document that
11 delineates how a drug is to be used according to the federal food and drug
12 administration approval.
- 13 ~~6-5.~~ "Fertilization" means the fusion of a human spermatozoon with a human ovum.
- 14 7. ~~"Genetic abnormality" means any defect, disease, or disorder that is inherited-~~
15 ~~genetically. The term includes any physical disfigurement, scoliosis, dwarfism, Down-~~
16 ~~syndrome, albinism, amelia, or any other type of physical or mental disability,~~
17 ~~abnormality, or disease.~~
- 18 ~~8-6.~~ "Hospital" means an institution licensed by the department of health and human
19 services under chapter 23-16 and any hospital operated by the United States or this
20 state.
- 21 ~~9-7.~~ "Human being" means an individual living member of the species of homo sapiens,
22 including the unborn human being during the entire embryonic and fetal ages from
23 fertilization to full gestation.
- 24 ~~10-8.~~ "Infant born alive" means a born child which exhibits either heartbeat, spontaneous
25 respiratory activity, spontaneous movement of voluntary muscles or pulsation of the
26 umbilical cord if still attached to the child.
- 27 ~~11-9.~~ "Informed consent" means voluntary consent to abortion by the woman upon whom
28 the abortion is to be performed or induced provided:
29 a. The woman is told the following by the physician who is to perform the abortion,
30 by the referring physician, or by the physician's agent, at least twenty-four hours
31 before the abortion:

- 1 (1) The name of the physician who will perform the abortion;
 - 2 (2) The abortion will terminate the life of a whole, separate, unique, living
 - 3 human being;
 - 4 (3) The particular medical risks associated with the particular abortion
 - 5 procedure to be employed including, when medically accurate, the risks of
 - 6 infection, hemorrhage, danger to subsequent pregnancies, and infertility;
 - 7 (4) The probable ~~gestational~~postfertilization age of the unborn child at the time
 - 8 the abortion is to be performed; and
 - 9 (5) The medical risks associated with carrying her child to term.
- 10 b. The woman is informed, by the physician or the physician's agent, at least
- 11 twenty-four hours before the abortion:
- 12 (1) That medical assistance benefits may be available for prenatal care,
 - 13 childbirth, and neonatal care and that more detailed information on the
 - 14 availability of that assistance is contained in the printed materials given to
 - 15 her as described in section 14-02.1-02.1;
 - 16 (2) That the printed materials given to her and described in section
 - 17 14-02.1-02.1 describe the unborn child and list agencies that offer
 - 18 alternatives to abortion;
 - 19 (3) That the father is liable to assist in the support of her child, even in
 - 20 instances in which the father has offered to pay for the abortion; and
 - 21 (4) That she is free to withhold or withdraw her consent to the abortion at any
 - 22 time without affecting her right to future care or treatment and without the
 - 23 loss of any state or federally funded benefits to which she might otherwise
 - 24 be entitled; ~~and~~
 - 25 ~~(5) That it may be possible to reverse the effects of an abortion-inducing drug if~~
 - 26 ~~she changes her mind, but time is of the essence, and information and~~
 - 27 ~~assistance with reversing the effects of an abortion-inducing drug are~~
 - 28 ~~available in the printed materials given to her as described in section~~
 - 29 ~~14-02.1-02.1.~~
- 30 c. The woman certifies in writing, ~~prior to~~before the abortion, that the information
- 31 described in subdivisions a and b has been furnished to her.

1 d. Before the performance of the abortion, the physician who is to perform or induce
2 the abortion or the physician's agent receives a copy of the written certification
3 prescribed by subdivision c.

4 e. The physician has not received or obtained payment for a service provided to a
5 patient who has inquired about an abortion or has scheduled an abortion before
6 the twenty-four-hour period required by this section.

7 ~~42.10.~~ "Medical emergency" means a condition that, in reasonable medical judgment, so
8 complicates the medical condition of the pregnant woman that it necessitates an
9 immediate abortion ~~of her pregnancy without first determining postfertilization age to~~
10 ~~avert~~prevent her death or ~~for which the delay necessary to determine postfertilization~~
11 ~~age will create serious risk of~~ substantial ~~and irreversible~~ physical impairment of a
12 major bodily function, not including psychological or emotional conditions. A condition
13 may not be deemed a medical emergency if based on a claim or diagnosis that the
14 woman will engage in conduct that she intends to result in her death or in substantial
15 and irreversible physical impairment of a major bodily function.

16 ~~43.11.~~ "Physician" means an individual ~~who is~~ licensed to practice medicine or osteopathy
17 under chapter 43-17 or a physician who practices in the armed services of the United
18 States or in the employ of the United States.

19 ~~44.12.~~ ~~"Postfertilization age" means the age of the unborn child as calculated from~~
20 ~~fertilization.~~

21 45. "Probable gestational age of the unborn child" means what, in reasonable medical
22 judgment, will with reasonable probability be the gestational age of the unborn child ~~at~~
23 the time the abortion is planned to be performed.

24 ~~46.13.~~ ~~"Probable postfertilization age of the unborn child" means what, in reasonable medical~~
25 ~~judgment, will with reasonable probability be the postfertilization age of the unborn~~
26 ~~child at the time the abortion is planned to be performed or induced.~~

27 ~~47.14.13.~~ "Reasonable medical judgment" means a medical judgment that would be made by a
28 reasonably prudent physician, knowledgeable about the case and the treatment
29 possibilities with respect to the medical conditions involved.

30 ~~48.15.14.~~ "Unborn child" means the offspring of human beings from conception until birth.

1 | 49.16.15. "Viable" means the ability of an unborn child to live outside the mother's womb, albeit
2 | with artificial aid.

3 | **SECTION 4. AMENDMENT.** Section 14-02.1-02.1 of the North Dakota Century Code is
4 | amended and reenacted as follows:

5 | **14-02.1-02.1. Printed information - Referral service.**

6 | 1. The department of health and human services shall publish in English, and in every
7 | other language that the department determines is the primary language of a significant
8 | number of state residents, the following easily comprehensible printed materials:

- 9 | a. Geographically indexed materials designed to inform the woman of public and
10 | private agencies and services available to assist a woman through pregnancy,
11 | upon childbirth, and while the child is dependent, including adoption agencies.
12 | The materials must include a comprehensive list of the agencies available, a
13 | description of the services they offer and a description of the manner, including
14 | telephone numbers, in which they might be contacted, or, at the option of the
15 | department, printed materials, including a toll-free, twenty-four-hour-a-day
16 | telephone number that may be called to obtain, orally, such a list and description
17 | of agencies in the locality of the caller and of the services they offer. The
18 | materials must state that it is unlawful for any individual to coerce a woman to
19 | undergo an abortion and that if a minor is denied financial support by the minor's
20 | parent, guardian, or custodian due to the minor's refusal to have an abortion
21 | performed, the minor is deemed to be emancipated for the purposes of eligibility
22 | for public assistance benefits, except that those benefits may not be used to
23 | obtain an abortion. The materials also must state that any physician who
24 | performs an abortion upon a woman without her informed consent may be liable
25 | to her for damages in a civil action and that the law permits adoptive parents to
26 | pay costs of prenatal care, childbirth, and neonatal care. The materials must
27 | include the following statement: There are many public and private agencies
28 | willing and able to help you to carry your child to term and to assist you and your
29 | child after your child is born, whether you choose to keep your child or to place
30 | your child for adoption. The state of North Dakota strongly urges you to contact
31 | one or more of these agencies before making a final decision about abortion. The

1 law requires that your physician or your physician's agent give you the
2 opportunity to call agencies like these before you undergo an abortion.

3 b. Materials, published in a booklet format, designed to inform the woman of the
4 probable anatomical and physiological characteristics of the unborn child at
5 two-week gestational increments from the time when a woman can be known to
6 be pregnant to full term, including any relevant information on the possibility of
7 the survival of the unborn child and color photographs of the development of an
8 unborn child at two-week gestational increments. The descriptions must include
9 information about brain and heart function, the presence of external members
10 and internal organs during the applicable states of development, and any
11 relevant information on the possibility of the unborn child's survival. The materials
12 must be objective, nonjudgmental, and designed to convey only accurate
13 scientific information about the unborn child at the various gestational ages. The
14 materials required under this subsection must be reviewed, updated, and
15 reprinted as needed.

16 c. Materials that include information on the support obligations of the father of a
17 child who is born alive, including the father's legal duty to support his child, which
18 may include child support payments and health insurance, and the fact that
19 paternity may be established by the father's signature on an acknowledgment of
20 paternity or by court action. The printed material must also state that more
21 information concerning paternity establishment and child support services and
22 enforcement may be obtained by calling state public assistance agencies or
23 human service zones.

24 d. Materials that contain objective information describing the various surgical and
25 drug-induced methods of abortion as well as the immediate and long-term
26 medical risks commonly associated with each abortion method, including the
27 risks of infection, hemorrhage, cervical or uterine perforation or rupture, danger to
28 subsequent pregnancies, the possible increased risk of breast cancer, the
29 possible adverse psychological effects associated with an abortion, and the
30 medical risks associated with carrying a child to term.

- 1 e. Materials including information it may be possible to reverse the effects of an
2 abortion-inducing drug but time is of the essence. The materials must include
3 information directing the patient where to obtain further information and
4 assistance in locating a medical professional who can aid in the reversal of
5 abortion-inducing drugs, ~~such as mifepristone and misoprostol.~~
- 6 f. Materials including a notice that the performance of certain abortions is prohibited
7 by law.
- 8 2. The materials required under subsection 1 must be available at no cost from the
9 department of health and human services upon request and in appropriate number to
10 any person, facility, or hospital, and, except for copyrighted material, must be available
11 on the department's internet website. The department may make the copyrighted
12 material available on its internet website if the department pays the copyright royalties.

13 **SECTION 5. AMENDMENT.** Section 14-02.1-02.2 of the North Dakota Century Code is
14 amended and reenacted as follows:

15 **14-02.1-02.2. Abortion report form.**

16 The department of health and human services shall prepare an abortion compliance report
17 form and an abortion data report form to be used by the physician for each abortion performed,
18 as required by section 14-02.1-07. The abortion compliance report form must include a checklist
19 designed to confirm compliance with all provisions of this chapter, [section 12.1-31-12](#), chapter
20 14-02.3, chapter 14-02.6, and section 23-16-14. The abortion data report form must include the:

- 21 1. The data called for in the United States standard report of induced termination of
22 pregnancy as recommended by the national center for health statistics; and
- 23 2. Whether the abortion was:
- 24 a. Necessary in reasonable medical judgment and was intended to prevent the
25 death of the pregnant female;~~or~~
- 26 b. To terminate a pregnancy that resulted from gross sexual imposition, sexual
27 imposition, sexual abuse of a ward, or incest, as those offenses are defined in
28 chapter 12.1-20; or
- 29 c. [Necessary due to a medical emergency.](#)

30 **SECTION 6. AMENDMENT.** Section 14-02.1-03 of the North Dakota Century Code is
31 amended and reenacted as follows:

1 **14-02.1-03. Consent to abortion - Notification requirements.**

- 2 1. ~~No~~A physician ~~shall~~may not perform an abortion unless ~~prior to~~before such
3 performance the physician certified in writing that the woman gave her informed
4 consent as defined and provided in section 14-02.1-02 and shall certify in writing the
5 pregnant woman's marital status and age based upon proof of age offered by her.
6 Before the period of pregnancy when the unborn child may reasonably be expected to
7 have reached viability, an abortion may not be performed upon an unemancipated
8 minor unless the attending physician certifies in writing that each of the parents of the
9 minor requesting the abortion has been provided by the physician in person with the
10 information provided for in section 14-02.1-02 at least twenty-four hours before the
11 minor's consent to the performance of abortion or unless the attending physician
12 certifies in writing that the physician has caused materials of section 14-02.1-02 to be
13 posted by certified mail to each of the parents of the minor separately to the
14 last-known addresses at least forty-eight hours ~~prior to~~before the minor's consent to
15 the performance of abortion. If a parent of the minor has died or rights and interests of
16 that parent have been legally terminated, this subsection applies to the sole remaining
17 parent. When both parents have died or the rights and interests of both parents have
18 been legally terminated, this subsection applies to the guardian or other person
19 standing in loco parentis. Notification by the attending physician is not required if the
20 minor elects not to allow the notification of one or both parents or her guardian and the
21 abortion is authorized by the juvenile court in accordance with section 14-02.1-03.1.
22 None of the requirements of this subsection apply in the case of a medical emergency,
23 except that when a medical emergency compels the performance of an abortion, the
24 physician shall inform the woman, before the abortion if possible, of the medical
25 indications supporting the physician's judgment that an abortion is necessary to avert
26 her death or for which a twenty-four-hour delay will create grave peril of immediate
27 and irreversible loss of major bodily function, and shall certify those indications in
28 writing.
- 29 2. Subsequent to the period of pregnancy when the unborn child may reasonably be
30 expected to have reached viability, ~~no~~an abortion, other than an abortion necessary to
31 preserve her life, or because the continuation of her pregnancy will impose on her a

1 substantial risk of grave impairment of her physical ~~or mental~~ health, may not be
2 performed upon any woman in the absence of:

3 a. ~~The written consent of her husband unless her husband is voluntarily separated-~~
4 ~~from her; or~~

5 b. ~~The~~ the written consent of a parent, if living, or the custodian or legal guardian of
6 the woman, if the woman is unmarried and under eighteen years of age.

7 3. No executive officer, administrative agency, or public employee of the state of North
8 Dakota or any local governmental body has power to issue any order requiring an
9 abortion, nor shall any such officer or entity coerce any woman to have an abortion,
10 nor shall any other person coerce any woman to have an abortion.

11 **SECTION 7. AMENDMENT.** Section 14-02.1-03.1 of the North Dakota Century Code is
12 amended and reenacted as follows:

13 **14-02.1-03.1. Parental consent or judicial authorization for abortion of unmarried**
14 **minor - Statement of intent.**

15 The legislative assembly intends to encourage unmarried pregnant minors to seek the
16 advice and counsel of their parents when faced with the difficult decision of whether or not to
17 bear a child, to foster parental involvement in the making of that decision when parental
18 involvement is in the best interests of the minor and to do so in a manner that does not unduly
19 burden the right to seek an abortion.

20 1. ~~NeA~~ person may not knowingly perform an abortion upon a pregnant woman under
21 the age of eighteen years unless:

22 a. The attending physician has secured the written consent of the minor woman and
23 both parents, if living, or the surviving parent if one parent is deceased, or the
24 custodial parent if the parents are separated or divorced, or the legal guardian or
25 guardians if the minor is subject to guardianship;

26 b. The minor woman is married and the attending physician has secured her
27 informed written consent; or

28 c. The abortion has been authorized by the juvenile court in accordance with the
29 provisions of this section.

30 2. Any pregnant woman under the age of eighteen or next friend is entitled to apply to
31 the juvenile court for authorization to obtain an abortion without parental consent. All

1 proceedings on such application must be conducted in the juvenile court of the county
2 of the minor's residence before a juvenile judge or referee, if authorized by the juvenile
3 court judge in accordance with the provisions of chapter 27-05, except that the
4 parental notification requirements of rules 3, 4, and 5 of the North Dakota Rules of
5 Juvenile Procedure are not applicable to proceedings under this section. A court may
6 change the venue of proceedings under this section to another county only upon
7 finding that a transfer is required in the best interests of the minor. All applications in
8 accordance with this section must be heard by a juvenile judge or referee within
9 forty-eight hours, excluding Saturdays and Sundays, of receipt of the application. The
10 juvenile judge or referee shall find by clear and convincing evidence:

- 11 a. Whether or not the minor is sufficiently mature and well informed with regard to
12 the nature, effects, and possible consequences of both having an abortion and
13 bearing her child to be able to choose intelligently among the alternatives.
- 14 b. If the minor is not sufficiently mature and well informed to choose intelligently
15 among the alternatives without the advice and counsel of her parents or
16 guardian, whether or not it would be in the best interests of the minor to notify her
17 parents or guardian of the proceedings and call in the parents or guardian to
18 advise and counsel the minor and aid the court in making its determination and to
19 assist the minor in making her decision.
- 20 c. If the minor is not sufficiently mature and well informed to choose intelligently
21 among the alternatives and it is found not to be in the best interests of the minor
22 to notify and call in her parents or guardian for advice and counsel, whether an
23 abortion or some other alternative would be in the best interests of the minor.

24 3. All proceedings in connection with this section must be kept confidential and the
25 identity of the minor must be protected in accordance with provisions relating to all
26 juvenile court proceedings. This section does not limit the release, upon request, of
27 statistical information regarding applications made under this section and their
28 disposition.

29 4. The court shall keep a stenographic or mechanically recorded record of the
30 proceedings which must be maintained on record for forty-eight hours following the
31 proceedings. If no appeal is taken from an order of the court pursuant to the

1 proceedings, the record of the proceedings must be sealed as soon as practicable
2 following such forty-eight-hour period.

3 5. Following the hearing and the court's inquiry of the minor, the court shall issue one of
4 the following orders:

5 a. If the minor is sufficiently mature and well informed concerning the alternatives
6 and without the need for further information, advice, or counseling, the court shall
7 issue an order authorizing a competent physician to perform the abortion
8 procedure on the minor.

9 b. If the minor is not sufficiently mature and well informed, the court may:

10 (1) Issue an order to provide the minor with any necessary information to assist
11 her in her decision if the minor is mature enough to make the decision but
12 not well informed enough to do so.

13 (2) Issue an order to notify the minor's parents or guardian of the pendency of
14 the proceedings and calling for their attendance at a reconvening of the
15 hearing in order to advise and counsel the minor and assist the court in
16 making its determination if the court finds that to do so would be in the best
17 interests of the minor and the pregnancy resulted from gross sexual
18 imposition, sexual imposition, sexual abuse of a ward, or incest, as those
19 offenses are defined in chapter 12.1-20.

20 (3) Issue an order authorizing an abortion by a competent physician if the court
21 has determined that it would not be in the best interests of the minor to call
22 in her parents or guardian but has found that it would be in the minor's best
23 interests to authorize the abortion.

24 6. The minor or next friend may appeal the determination of the juvenile court directly to
25 the state supreme court. In the event of such an appeal, any and all orders of the
26 juvenile court must be automatically stayed pending determination of the issues on
27 appeal. Any appeal taken pursuant to this section by anyone other than the minor or
28 next friend must be taken within forty-eight hours of the determination of the juvenile
29 court by the filing of written notice with the juvenile court and a written application in
30 the supreme court. Failure to file notice and application within the prescribed time

1 results in a forfeiture of the right to appeal and render the juvenile court order or orders
2 effective for all intents and purposes.

3 7. Upon receipt of written notice of appeal, the juvenile court shall immediately cause to
4 be transmitted to the supreme court the record of proceedings had in the juvenile
5 court.

6 8. An application for appeal pursuant to this section must be treated as an expedited
7 appeal by the supreme court and must be set down for hearing within four days of
8 receipt of the application, excluding Saturdays and Sundays.

9 9. The hearing, inquiry, and determination of the supreme court must be limited to a
10 determination of the sufficiency of the inquiry and information considered by the
11 juvenile court and whether or not the order or orders of the juvenile court accord with
12 the information considered with respect to the maturity and information available to the
13 minor and the best interests of the minor as determined by the juvenile court. The
14 determination of the juvenile court may not be overturned unless found to be clearly
15 erroneous.

16 10. After hearing the matter the supreme court shall issue its decision within twenty-four
17 hours.

18 11. Within forty-eight hours of the hearing by the supreme court, the record of the juvenile
19 court must be returned to the juvenile court and the juvenile court shall seal it at the
20 earliest practicable time.

21 12. Nothing in this section may be construed to prevent the immediate performance of an
22 abortion on an unmarried minor woman in ~~an~~ a medical emergency ~~where such action~~
23 ~~is necessary to preserve her life and no physician may be prevented from acting in~~
24 ~~good faith in such circumstances or made to suffer any sanction thereby other than~~
25 ~~those applicable in the normal course of events to the general review of emergency~~
26 ~~and nonemergency medical procedures.~~

27 13. Nothing in this section may be construed to alter the effects of any other section of this
28 chapter or to expand the rights of any minor to obtain an abortion beyond the limits to
29 such rights recognized under the Constitution of the United States or under other
30 provisions of this code.

1 **SECTION 8. AMENDMENT.** Section 14-02.1-04 of the North Dakota Century Code is
2 amended and reenacted as follows:

3 **14-02.1-04. Limitations on the performance of abortions - Penalty.**

- 4 1. An abortion may not be performed by any person other than a physician who is using
5 applicable medical standards and who is licensed to practice in this state. All
6 physicians performing abortion procedures must have admitting privileges at a hospital
7 located within thirty miles [42.28 kilometers] of the abortion facility and staff privileges
8 to replace hospital on-staff physicians at that hospital. These privileges must include
9 the abortion procedures the physician will be performing at abortion facilities. An
10 abortion facility must have a staff member trained in cardiopulmonary resuscitation
11 present at all times when the abortion facility is open and abortions are scheduled to
12 be performed.
- 13 2. After the first twelve weeks of pregnancy but ~~prior to~~before the time at which the
14 unborn child may reasonably be expected to have reached viability, ~~an~~ abortion may
15 not be performed in any facility other than a licensed hospital.
- 16 3. After the point in pregnancy when the unborn child may reasonably be expected to
17 have reached viability, ~~an~~ abortion may be performed ~~except in a hospital, and then~~
18 only if in the medical judgment of the physician the abortion is necessary to preserve
19 the life of the woman ~~or if in the physician's medical judgment the continuation of her~~
20 ~~pregnancy will impose on her a substantial risk of grave impairment of her physical or~~
21 ~~mental health.~~

22 An abortion under this subsection may only be performed if the above-mentioned
23 medical judgment of the physician who is to perform the abortion is first certified by the
24 physician in writing, setting forth in detail the facts upon which the physician relies in
25 making this judgment and if this judgment has been concurred in by two other licensed
26 physicians who have examined the patient. The foregoing certification and
27 concurrence is not required in the case of ~~an~~ a medical emergency when the abortion
28 is necessary to preserve the life of the patient.

- 29 4. An abortion facility may not perform an abortion on a woman without first offering the
30 woman an opportunity to receive and view at the abortion facility or another facility an
31 active ultrasound of her unborn child. The offer and opportunity to receive and view an

1 ultrasound must occur at least twenty-four hours before the abortion is scheduled to
2 be performed. The active ultrasound image must be of a quality consistent with
3 standard medical practice in the community, contain the dimensions of the unborn
4 child, and accurately portray the presence of external members and internal organs,
5 including the heartbeat, if present or viewable, of the unborn child. The auscultation of
6 the fetal heart tone must be of a quality consistent with standard medical practice in
7 the community. The abortion facility shall document the woman's response to the offer,
8 including the date and time of the offer and the woman's signature attesting to her
9 informed decision.

10 5. Any physician who performs an abortion without complying with the provisions of this
11 section is guilty of a class A misdemeanor.

12 6. It is a class B felony for any person, other than a physician licensed under chapter
13 43-17, to perform an abortion in this state.

14 **SECTION 9. AMENDMENT.** Section 14-02.1-07 of the North Dakota Century Code is
15 amended and reenacted as follows:

16 **14-02.1-07. Records required - Reporting of practice of abortion.**

17 1. **Records:**

18 a. All abortion facilities and hospitals in which abortions are performed shall keep
19 records, including admission and discharge notes, histories, results of tests and
20 examinations, nurses' worksheets, social service records, and progress notes,
21 and shall further keep a copy of all written certifications provided for in this
22 chapter as well as a copy of the constructive notice forms, consent forms, court
23 orders, abortion data reports, adverse event reports, abortion compliance reports,
24 and complication reports. All abortion facilities shall keep the following records:

25 (1) The number of women who availed themselves of the opportunity to receive
26 and view an ultrasound image of their unborn children pursuant to section
27 14-02.1-04, and the number who did not; and of each of those numbers, the
28 number who, to the best of the reporting abortion facility's information and
29 belief, went on to obtain the abortion.

30 (2) ~~Postfertilization age:~~

- 1 (a) ~~If a determination of probable postfertilization age was not made, the~~
2 ~~basis of the determination that a medical emergency existed~~A record
3 of the probable gestational age of the unborn child at the time of the
4 abortion. If a probable gestational age of the unborn child was not
5 made because of a medical emergency, the record must include the
6 basis of the determination that a medical emergency existed.
- 7 (b) ~~If the probable postfertilization age was determined to be twenty or~~
8 ~~more weeks and an abortion was performed, the basis of the~~
9 ~~determination that a medical emergency existed.~~
- 10 b. The medical records of abortion facilities and hospitals in which abortions are
11 performed and all information contained therein must remain confidential and
12 may be used by the department of health and human services only for gathering
13 statistical data and ensuring compliance with the provisions of this chapter.
- 14 c. Records must be maintained in the permanent files of the hospital or abortion
15 facility for a period of not less than seven years.
- 16 2. Reporting:
- 17 a. An individual abortion compliance report and an individual abortion data report for
18 each abortion performed upon a woman must be completed by her attending
19 physician. The abortion data report must be confidential and may not contain the
20 name of the woman. The abortion data report must include the data called for in
21 the United States standard report of induced termination of pregnancy as
22 recommended by the national center for health statistics and whether:
- 23 (1) The abortion was performed to prevent the death of the pregnant female;~~or~~
24 (2) The pregnancy resulted from gross sexual imposition, sexual imposition,
25 sexual abuse of a ward, or incest, as those offenses are defined in chapter
26 12.1-20; or
27 (3) Necessary due to a medical emergency.
- 28 b. All abortion compliance reports must be signed by the attending physician within
29 twenty-four hours and submitted to the department of health and human services
30 within ten business days from the date of the abortion. All abortion data and
31 complication reports must be signed by the attending physician and submitted to

1 the department of health and human services within thirty days from the date of
2 the abortion. If a physician provides an abortion-inducing drug to another for the
3 purpose of inducing an abortion and the physician knows that the individual
4 experiences during or after the use an adverse event, the physician shall provide
5 a written report of the adverse event within thirty days of the event to the
6 department of health and human services and the federal food and drug
7 administration via the medwatch reporting system. For purposes of this section,
8 "adverse event" is defined based upon the federal food and drug administration
9 criteria given in the medwatch reporting system. If a determination of probable
10 ~~postfertilization~~ gestational age of the unborn child was not made, the abortion
11 compliance report must state the basis of the determination that a medical
12 emergency existed. ~~If the probable postfertilization age was determined to be~~
13 ~~twenty or more weeks and an abortion was performed, the abortion compliance~~
14 ~~report must state the basis of the determination that a medical emergency~~
15 ~~existed.~~

- 16 c. A copy of the abortion report, any complication report, and any adverse event
17 report must be made a part of the medical record of the patient at the facility or
18 hospital in which the abortion was performed. In cases when post-abortion
19 complications are discovered, diagnosed, or treated by physicians not associated
20 with the facility or hospital where the abortion was performed, the department of
21 health and human services shall forward a copy of the report to that facility or
22 hospital to be made a part of the patient's permanent record.
- 23 d. The department of health and human services is responsible for collecting all
24 abortion compliance reports, abortion data reports, complication reports, and
25 adverse event reports and collating and evaluating all data gathered from these
26 reports and shall annually publish a statistical report based on data from
27 abortions performed in the previous calendar year. All abortion compliance
28 reports received by the department of health and human services are public
29 records. Except for disclosure to a law enforcement officer or state agency, the
30 department may not disclose an abortion compliance report without first removing
31 any individually identifiable health information and any other demographic

- 1 information, including race, marital status, number of previous live births, and
2 education regarding the woman upon whom the abortion was performed.
3 e. The department of health and human services shall report to the attorney general
4 any apparent violation of this chapter.

5 **SECTION 10. AMENDMENT.** Subsection 1 of section 43-17-31 of the North Dakota
6 Century Code is amended and reenacted as follows:

- 7 1. Disciplinary action may be imposed against a physician upon any of the following
8 grounds:
- 9 a. The use of any false, fraudulent, or forged statement or document, or the use of
10 any fraudulent, deceitful, dishonest, or immoral practice, in connection with any of
11 the licensing requirements.
 - 12 b. The making of false or misleading statements about the physician's skill or the
13 efficacy of any medicine, treatment, or remedy.
 - 14 c. The conviction of any misdemeanor determined by the board to have a direct
15 bearing upon a person's ability to serve the public as a practitioner of medicine or
16 any felony. A license may not be withheld contrary to the provisions of
17 chapter 12.1-33.
 - 18 d. Habitual use of alcohol or drugs.
 - 19 e. Physical or mental disability materially affecting the ability to perform the duties of
20 a physician in a competent manner.
 - 21 f. The performance of any dishonorable, unethical, or unprofessional conduct likely
22 to deceive, defraud, or harm the public.
 - 23 g. Obtaining any fee by fraud, deceit, or misrepresentation.
 - 24 h. Aiding or abetting the practice of medicine by an unlicensed, incompetent, or
25 impaired person.
 - 26 i. The violation of any provision of a medical practice act or the rules and
27 regulations of the board, or any action, stipulation, condition, or agreement
28 imposed by the board or its investigative panels.
 - 29 j. The practice of medicine under a false or assumed name.
 - 30 k. The advertising for the practice of medicine in an untrue or deceptive manner.

- 1 l. The representation to a patient that a manifestly incurable condition, sickness,
2 disease, or injury can be cured.
- 3 m. The willful or negligent violation of the confidentiality between physician and
4 patient, except as required by law.
- 5 n. The failure of a doctor of osteopathy to designate that person's school of practice
6 in the professional use of that person's name by such terms as "osteopathic
7 physician and surgeon", "doctor of osteopathy", "D.O.", or similar terms.
- 8 o. Gross negligence in the practice of medicine.
- 9 p. Sexual abuse, misconduct, or exploitation related to the licensee's practice of
10 medicine.
- 11 q. The prescription, sale, administration, distribution, or gift of any drug legally
12 classified as a controlled substance or as an addictive or dangerous drug for
13 other than medically accepted therapeutic purposes.
- 14 r. The payment or receipt, directly or indirectly, of any fee, commission, rebate, or
15 other compensation for medical services not actually or personally rendered, or
16 for patient referrals; this prohibition does not affect the lawful distributions of
17 professional partnerships, corporations, limited liability companies, or
18 associations.
- 19 s. The failure to comply with the reporting requirements of section 43-17.1-05.1.
- 20 t. The failure to transfer medical records to another physician or to supply copies of
21 those records to the patient or to the patient's representative when requested to
22 do so by the patient or the patient's designated representative, except if the
23 disclosure is otherwise limited or prohibited by law. A reasonable charge for
24 record copies may be assessed.
- 25 u. A continued pattern of inappropriate care as a physician, including unnecessary
26 surgery.
- 27 v. The use of any false, fraudulent, or deceptive statement in any document
28 connected with the practice of medicine.
- 29 w. The prescribing, selling, administering, distributing, or giving to oneself or to one's
30 spouse or child any drug legally classified as a controlled substance or
31 recognized as an addictive or dangerous drug.

- 1 x. The violation of any state or federal statute or regulation relating to controlled
2 substances.
- 3 y. The imposition by another state or jurisdiction of disciplinary action against a
4 license or other authorization to practice medicine based upon acts or conduct by
5 the physician that would constitute grounds for disciplinary action as set forth in
6 this section. A certified copy of the record of the action taken by the other state or
7 jurisdiction is conclusive evidence of that action.
- 8 z. The lack of appropriate documentation in medical records for diagnosis, testing,
9 and treatment of patients.
- 10 aa. The failure to properly monitor a fluoroscopy technologist or an emergency
11 medical technician.
- 12 bb. The failure to furnish the board or the investigative panel, their investigators, or
13 representatives information legally requested by the board or the investigative
14 panel.
- 15 cc. ~~The performance of an abortion on a pregnant woman prior to determining if the~~
16 ~~unborn child the pregnant woman is carrying has a detectable heartbeat, as~~
17 ~~provided in subsection 1 of section 14-02.1-05.1.~~
- 18 ~~dd.~~ Noncompliance with the physician health program established under chapter
19 43-17.3.

20 **SECTION 11. REPEAL.** Sections 14-02.1-04.1, 14-02.1-04.2, 14-02.1-05.1, 14-02.1-05.2,
21 and 14-02.1-05.3 of the North Dakota Century Code are repealed.

22 **SECTION 12. EMERGENCY.** This Act is declared to be an emergency measure.