Senate Judiciary Committee
SB 2150
January 16, 2023

Good afternoon Chair Larson and members of the Committee. My name is Dr. Heather Sandness Nelson. I am an OB/Gyn here in Bismarck and the Obstetrics Department Chair at my hospital. Thank you for giving me the opportunity to speak with you today. I am in favor of SB 2150 and a Do Pass recommendation with a requested amendment.

I have the humble honor of guiding women through one of the most special moments in their lives. Often this is a joyous occasion, however, many times complications arise that require us to have very difficult discussions and make tough decisions with our patients and their families regarding their pregnancy.

I have concerns the bill in its current state will restrict my fellow colleagues and my capacity to safely care for patients who develop complications during pregnancy—complications, that if not managed actively and in accordance with standards of care, could lead to substantial or irreversible physical harm.

Current language of the bill states both requirements (substantial and irreversible impairment) need to be satisfied for a termination of pregnancy to be considered legal.

There are many scenarios in which continuation of a pregnancy could lead to substantial OR irreversible impairment, but if we as physicians are restricted to satisfying the language of a law rather than providing safe, standard of care medicine, it will lead to inconsistent care for fear of legal retribution.

Complications in pregnancy such as previable rupture of membranes, lethal fetal anomalies, and maternal blood pressure conditions can lead to substantial physical impairment.

Complications in pregnancy such as maternal respiratory disease, liver disease, heart disease and in utero infections are irreversible conditions and can lead to irreversible physical impairment.

I request the definition of medical emergency be amended to reflect that many complications of pregnancy can lead to substantial OR irreversible physical impairment. This would allow women in our state to receive necessary, consistent care with regard to their pregnancy. The current wording is too specific and can result in unnecessary complications because we are unable to offer standard interventions.

These complications are not rare, and these decisions can be heartbreaking for patients and their families. Restricting our capacity to offer these women and their families safe management will only lead to inconsistent and substandard care for fear of prosecution.

Although I feel the decision to continue a pregnancy or pursue termination is an entirely private, protected conversation between a woman and her physician, I ask for a Do Pass recommendation for SB2150 if an amendment is made to allow medical emergencies to read: “substantial OR irreversible physical impairment of a major bodily function.”

Thank you,
Heather Sandness Nelson, MD
Obstetrics and Gynecology Physician