

Testimony in Opposition to HB 1488

Human Services Committee

February 4, 2025

Good afternoon to the Honorable Chair of the House Human Services Committee and Members of the Committee.

I am Dr. David Billings, a Board-Certified Obstetrician Gynecologist who has been caring for patients in Minot, North Dakota, since 1998. I am testifying regarding house bill 1488 with a concern for the changes and revisions that are being requested. I respectfully request that you render a "DO NOT PASS" on this bill.

I feel that the changes in this bill are unnecessary, and I noticed throughout the bill changing unborn child to fetus is an attempt to dehumanize this innocent human being. Page 1 lines 18-21 should be left because of an innocent life should not be terminated for the crimes of another. I know this is a difficult position for the mother of the child to be in, but the unborn child should not be terminated no matter what age. Since the human being life begins at fertilization this would negate the bill's intent to preserve the life of the unborn child. The information on page 7 line 7-11 wants to delete information to the patient concerning any possibility of the abortion reversible process once medication is given to terminate the life of the unborn child. A physician who has a pregnant mother as a patient, has two separate patients, the mother and her child in utero. That physician has professional and legal duties to both of those patients, and that physician is responsible for the health of both. There are times when the mother's health is at risk, and she must make a decision about the course of her medical care. There are also times when the child's health is at risk, and the mother must make a decision for the child. In fact, the physician has a duty to explain any risk to the child. They should explain that risk to the mother who then makes the decision for her child. Sometimes there is a condition that poses a risk to both the patients and a mother must be advised of the risk to each, and she must make a decision for both. In the overwhelming majority of the time the interest of both patients are in harmony. I feel that as a physician, my primary mission; however, is to protect the pregnant mother's interest in keeping and maintaining her relationship with her child, if that is her true desire. Abortion businesses have interest directly in conflict with those interests of the mother. The physician at an abortion facility also has two patients with duties to both. Because that physician owes a duty to the mother to preserve her true interest and wellbeing, and has a duty to her child, this puts the abortion physician in a precarious position of being obligated to ensure that the pregnant mother, who is making decision for both patients, is making a decision that is completely voluntary and totally informed. In reality an abortion is the employment of a medical procedure to achieve a nonmedical objective. It is a method to terminate the relationship between a pregnant mother and her unborn child. Its sole purpose is to terminate that relationship by terminating the unborn child's life. The abortion physician is duty bound like no other medical professional to make sure the pregnant mother is understanding everything that is happening to her and that she understands the full nature of the procedure. I feel that a mother should be fully informed about all relevant facts, options, and help available to her to keep her child, which seems to be in direct conflict with the endeavors and objectives of the abortion industry.

Abortions performed from fertilization through 15 weeks' gestation under the supervision of a licensed physician as it says on page 10 line 29, opens the door to non-physicians doing abortions.

We should not give an abortion approval committee the right to decide on which unborn children live or are terminated. I feel that is the decision between a physician and the mother of the unborn child.

Thank you for the opportunity to speak and testify about this important issue and the negative impact that house bill 1488 would have on our patients in North Dakota if it is passed.

I ask you "DO NOT PASS" house bill 1488.

Sincerely,

DAVID BILLINGS, MD, FACOG

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